

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	06/04/2018 14:38
Date Of Accident	04/04/2018 16:00
Exact Location Of Accident	ALONG JALAN UNGGAS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GY994S
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Insured/Policyholder

Name Of Registered Owner	CHUN MEE LEE
Co Reg No	07442900X
Email Address	CHUNMEELEE@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92733023
Alternative Phone No	OFFICE-62782388

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA 150 MANUAL
Exact Purpose for which vehicle was being used at time of accident	LORRY WAS PARKED
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	UNITED OVERSEAS INSURANCE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	DHOM110063480612
Cover Note Number	

Driver

Name of Driver	CHEN FOON KEE
NRIC No	S2006840Z
Date Of Birth	17/01/1949
Occupation	INDOOR
Date Of Driving Pass	27/06/1966
Driving Experience	51 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92733023
Fax Number	
Contact Number	OFFICE-62782388
Email Address	CHUNMEELEE@GMAIL.COM

Address	BLK 50 TELOK BLANGAH DRIVE #08-90
Postcode	100050
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	0
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	QUEENSTOWN N.P.C
Police Station Address	ROAD: 3 QUEENSWAY #01-03 , POSTCODE: 149073 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4719999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180404/2172

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

Sketch Plan

SKETCH PLAN

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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

CHUN MEE LEE

#11, 122, Bukit Merah Lane 1

01-68 Singapore 031*

Tel: 2782388

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

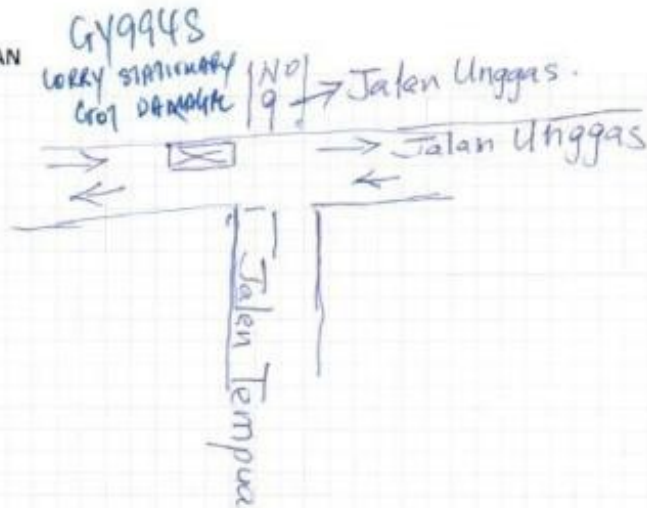
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No:

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS Refer to Police Report
12080404/4172

DECLARATION

I/We declare the foregoing particulars are true in every respect.

CHUN MEE LEE
#1k 122, Bukit Merah Lane 1
01-68 Singapore 0315
Tel: 2892388

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20180404/2172

1 of 3

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

Report No. T/20180404/2172

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/04/2018 20:10	Vide Report No.: E/20180404/0101	Station Diary No.: 89
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Informant's Particulars

Name of Informant: CHEN FOON KEE			Address: APT BLK 50 TELOK BLANGAH DRIVE #08-90 SINGAPORE 100050		
ID Type / ID No.: NRIC NO / S2006840Z			Contact No.: Home/Office: Mobile: 92733023		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 69	Date of Birth: 17/01/1949	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: SOLE PROPRIETOR			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 04/04/2018 16:00	Type of Location: T-Junction
Location: Junction of Road 1 and Road 2 JALAN UNGGAS JALAN TEMPUA Junction of Jalan Unggas and Jalan Tempua, Outside No.9 Jalan Unggas.				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GY994S	Lorry	TOYOTA	Dyna	Silver	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
GY994S	UNITED OVERSEAS INSURANCE LIMITED			

Sketch Plan #4



**SINGAPORE
POLICE FORCE**



T/20180404/2172

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

2 of 3

Report No. T/20180404/2172

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	CHEN FOON KEE	ID No.	S2006840Z
Related Vehicle	GY994S (Lorry)	Contact No.	92733023
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 04/04/2018 at about 3.20 p.m, I parked my silver Dyna lorry registration number GY994S at the junction of Jalan Unggas and Jalan Tempua, outside No.9 Jalan Unggas to do measurement of Bamboo blind for my customer. Upon returning at 4.00 p.m, I discovered that the driver's window was smashed, dent on the door and damaged the right side mirror. There was a black paint left on the door and red paint on the side mirror. I checked with the neighbours if any large vehicles moving around. I managed to get the vehicle that moved around earlier. It was a big lorry with registration number XD7912. I contacted the police and the Traffic Police came. The investigator is TPIO Mariah Tel: 65476433 advised to file a copy of a road traffic accident report. There is no in-car camera and no CCTVs in the estate. Reference to E/20180404/0101.

Sketch Plan #5



**SINGAPORE
POLICE FORCE**



T/20180404/2172

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

3 of 3

Report No. T/20180404/2172

CONTINUATION OF REPORT

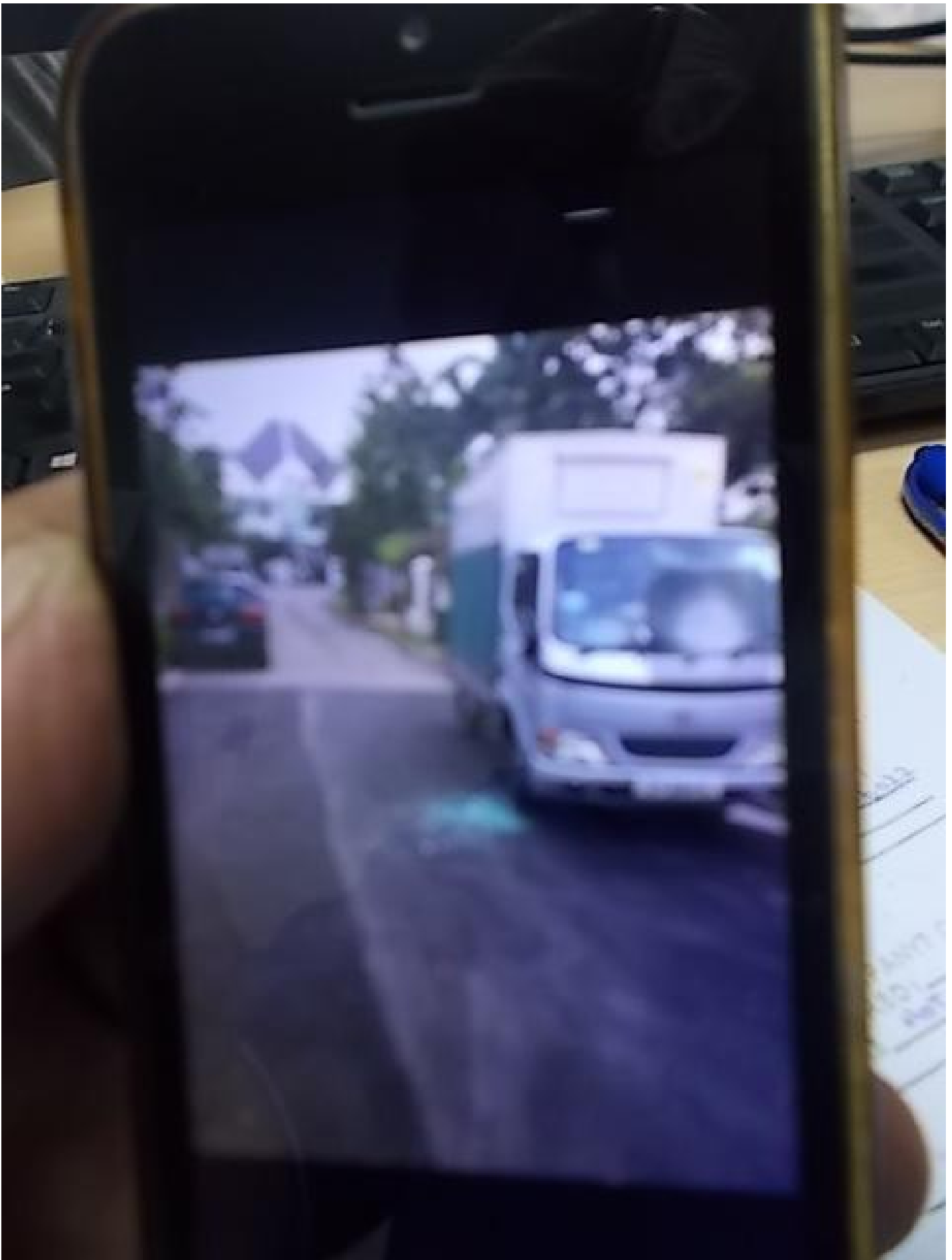
Sketch Plan

Informant is not able to provide sketch plan

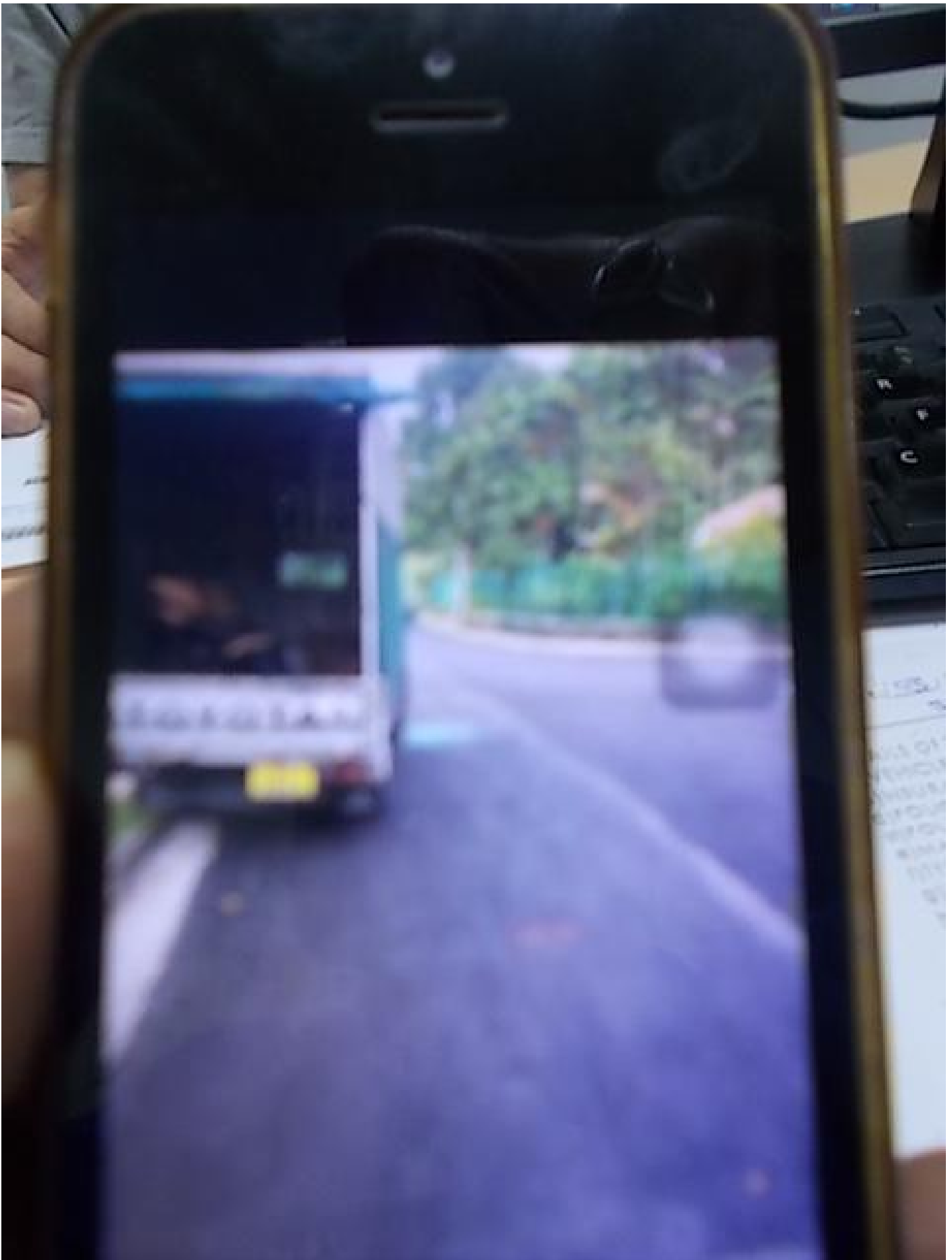
IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: D / SI MOHAMED HAIROLIZAT BIN HASSAN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 04/04/2018 20:10
Officer In Charge Of Case: TP / HRT / SI ABDUL KAREEM BIN ABDUL HAGUE Contact No.: 65476079	Classification Of Case:
Authentication Stamp NP168	 Sgt 46

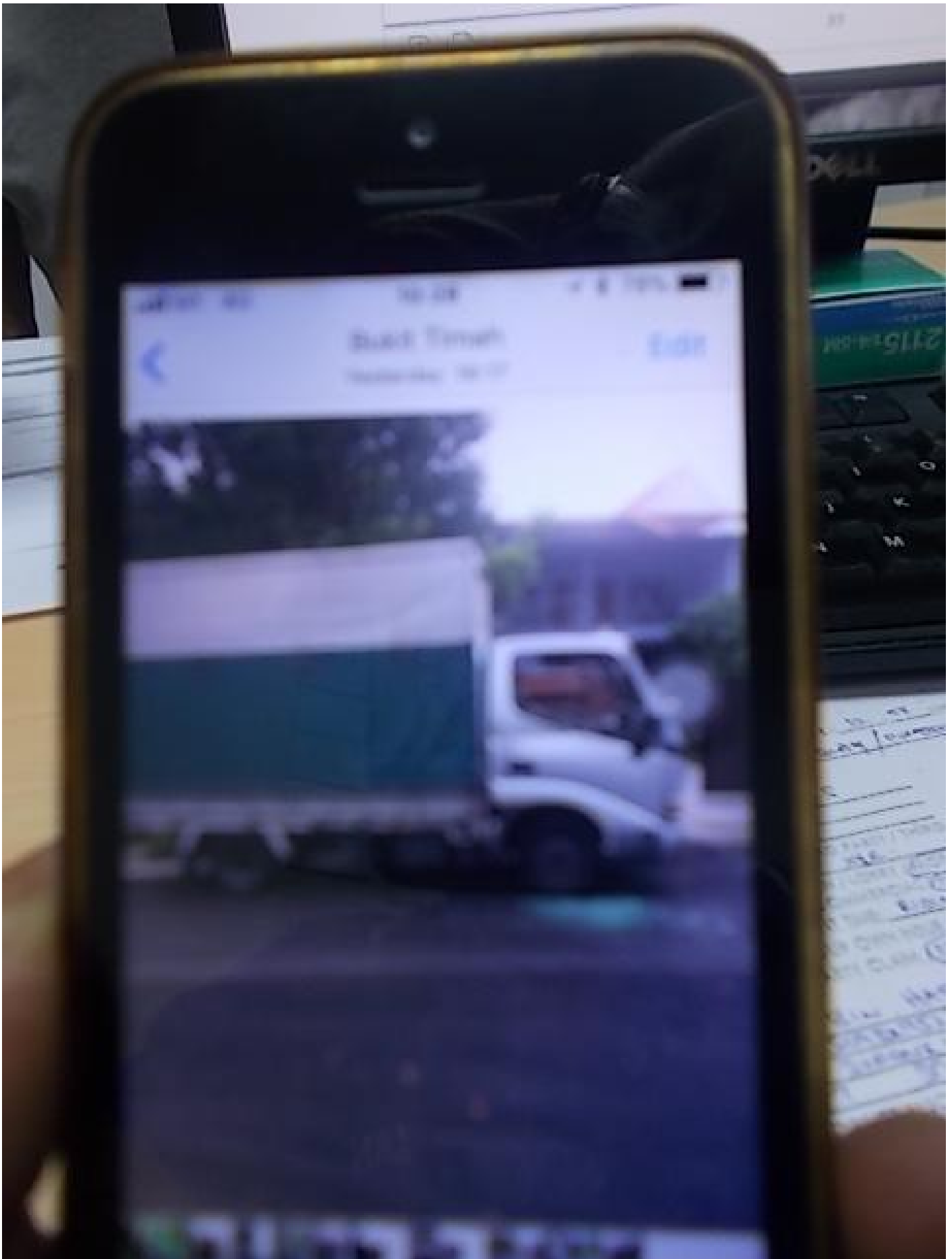
Accident Photo



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