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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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	26/03/2018 14:44				
Date Of Accident	24/03/2018 14:45				
Exact Location Of Accident	ELIAS MALL MULTI-STOREY CARPARK DECK 2				
Country/State of Loss	SINGAPORE				
AND RESIDENCE OF THE PERSON OF	DETAILS OF OWN VEHICLE				
Vehicle Registration Number	SJV6718P				
Insured/Policyholder					
Name Of Registered Owner	LIM CHENG HONG				
NRIC No	S1433303G				
Email Address	HJBROS@GMAIL.COM				
Mobile Phone No	(LOCAL) +65-98197554				
Alternative Phone No	OTHERS-98197554				
Vehicle Particulars					
Manufacturer	BMW				
Model	5251				
Exact Purpose for which vehicle was being used a time of accident	at .				
Are you claiming under your own insurance policy for repair to your vehicle?	NO				
f No, Please state action to be taken	THIRD PARTY				
Vehicle Category	PRIVATE CAR				
Insurance Company					
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD				
Type Of Coverage	COMPREHENSIVE				
Fleet Policy	NO				
Policy Number	5087964560-01				
Cover Note Number					
Driver					
Name of Driver	LIM CHENG HONG				
NRIC No	S1433303G				
Date Of Birth	29/11/1960				
Occupation	INDOOR				
Date Of Driving Pass	09/04/1981				
Priving Experience	36 YEARS AND 11 MONTHS				
Gender	MALE				
flobile Number	(LOCAL) +65-98197554				
ax Number					
Contact Number	OTHERS-98197554				
Mail Address	HJBROS@GMAIL.COM				

Address BLOCK 779 PASIR RIS STREET 71 #06-570

Postcode 510779

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

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 2

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by NO

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name PASIR RIS NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 1 PASIR RIS DRIVE 4 , POSTCODE: 519457 , COUNTRY:

SINGAPORE

Police Station Contact TEL NO: 1800-5852999 - FAX NO: 65855261

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

On the 24/03/2018 at about 1.25pm, I parked my car SJV6718P at the MSCP of Elias Mall Deck 2. During that time, my car was intact. At about 3.30pm, I came back and discovered that the right front portion of my front bumper was damaged. It was scratched and dented. I then viewed my in car CCTV and saw a white color Porsche car (SKA3939L) had hit onto my car at 2.44pm. This said car was reversing into the parking lot on the right side of my car. After reversing into the parking lot, this car then drove off turning left. Its left rear side of the car had then hit and grazed onto my front right side bumper. The driver had stopped after grazing against my car, however the driver drove off after that.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKA3939L

Vehicle Make/Model/Colour WHITE PORSCHE

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode ,
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

SKETCH PLAN

INIPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Ferm must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as prutiful and occurate as possible. Any volful misrepresentation or withholding of natural facts may allow insurance companies to repudiate policy liability.
- 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.
- the 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.
- 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.
- Consent under the Personal Data Protection Act (PDPA)

I understand, admowledge, 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 (all insurer(s) who have insured vehicle(s) involved in this accident (all insurers) lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of .
 - processing, handling and/or dealing with my caims 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 dains (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve discipsure of cortain 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 Parsonal 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 states), or

(ii) for complying with requirements under any regulations, laws or court orders.

Pulicyhalder's Signature

Date & Time:

26/3/18

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

Reporting Centre Personn Name: JCAIS SEOW MRIC/FIN No.: 57525550

Refer to Attach and victes of the Please refer t	ACCIDENT		w: 7	Sav 6718
SCRIBE CIRCUMSTANCES OF THE	ACCIDENT		w: 7	2018 0324/217
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Police Report





Date of Expiry:

Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457 1 of 3 Report No. T/20180324/2173

Tel No: 1800-5852999

Director

REPURI	UF A IRAFF	CACCIDENT	•			
Date/Time Report Made: 24/03/2018 23:21			Vide Report No.: Station Dia 153			
Informa	ant's Partic	ulars		· · · · · · · · · · · · · · · · · · ·		
Name of Informant: LIM CHENG HONG			Address: APT BLK 779 PASIR RIS STREET 71 #06-570 SINGAPORE 510779			
ID Type / ID No.: NRIC NO / S1433303G			Contact No.: Home/Office:	Mobile: 98197554		
Nationa SINGAR	lity: PORE CITIZ	EN	Email:			
Sex: Male	Age: 57	Date of Birth. 29/11/1960	Type of Informant: Driver			
Race: Chinese		Language: Institution / School Name:				
Occupation:			Driving Licence Information:			

Type of Accident:	Non-Injury Hit and Run	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
Location: Along Road 1 ELIAS ROAD Elias Mail, MS					
Weather: Ros		Road Surface: Dry		Road Speed Limit:	
	The state of the s			Traffic Volume:	
Traffic Flow: One Way		Not Controlled			

Class: 3

Details of V	ehicle Invo	lved				B. 35 7 7 7 1
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenge
SJV6718P	Car	BMW	5251 XL	Black	Seriously Damaged	0
SKA3939L	Car	PORSCHE		White		0

Details of V	shicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJV6718P	NTUC Income Insurance Co-Operative Limited	5087964560-01	18/02/2018	17/02/2019

Police Report





2 of 3

Report No. T/20180324/2173

Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4#01-01 SINGAPORE 519457 Tel No: 1800-5852999

CONTINUATION OF REPORT

Details of Perso	on Involved			8		
Any Pedestrian I	nvolved: No					
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA			
Driver					WHITE STATE	
Name	LIM CHENG HONG		ID No.		S1433303G	
Related Vehicle	SJV6718P (Car)			Conta	ict No.	98197554
Hospital/Clinic	NIL .			Class Drivin Licent Expin	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL Date				NIL	
				Injury	NIL	

Brief Details.

On the 24/03/2018 at about 1.25pm, I parked my car SJV6718P at the MSCP of Elias Mall Deck 2. During that time, my car was intact.

At about 3.30pm, I came back and discovered that the right front portion of my front bumper was damaged. It was scratched and dented. I then viewed my in car CCTV and saw a white color Porsche car (SKA3939L) had hit onto my car at 2.44pm. This said car was reversing into the parking lot on the right side of my car. After reversing into the parking lot, this car then drove off turning left. Its left rear side of the car had then hit and grazed onto my front right side bumper. The driver had stopped after grazing against my car, however the driver drove off after that.

Police Report





Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457 3 of 3 Report No. T/20180324/2173

Tel No: 1800-5852999

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: G / Sr Staff Sgt WONG TING CHIEN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 24/03/2018 23:21
Officer In Charge Of Case:	Classification Of Case:
TP/HRT/	Chassing act of Case.
SI TAN LEE HWANG DAWN SINGAPORE Contact No.: 65476215	Wa.
Authentication Stamp NP168	