

video

Date of Accident : 06/04/18. Accident Time: 14:35 (24-HR-Format)  
Accident Place : Upper East Coast Road opp Shell petrol  
Vehicle. No. (Car Plate No.) : <sup>Kiosk</sup> SKW3399J Make/Model: H - Benz  
Insurance Company : AXA Policy No: GA083388 | 1  
Owner or Company Name / IC No. : S7934632B - Foo Say Ngiam.  
Owner or Company Contact No. : 82183399 Owner's Hp \_\_\_\_\_ Company Tel \_\_\_\_\_  
DRIVER'S Name / IC No. : Foo Tzee Juet.  
DRIVER'S Date Of Birth : 04/07/1949. DRIVER'S License Pass Date 21/07/1971.  
Relationship of Owner & Driver : Spouse / Parents / Children / Sibling / Employee / Others: \_\_\_\_\_  
DRIVER'S Address : 33A Jalan Baiduri Singapore 42843.  
DRIVER'S Contact No. / Alt No. : 1) 93375539. 2) \_\_\_\_\_  
DRIVER'S Occupation : INDOOR / OUTDOOR (e.g. working inside or outside office)  
Email Address : \_\_\_\_\_  
Weather & Road Surface : CLEAR & DRY / RAINING & WET / AFTER RAIN & WET  
Reporting Type : Reporting Only / Claim Other Party / Claim Own Insurance  
Number of Passengers (Including Driver): No driver & passenger.  
Was there any video Captured by car camera: YES / NO.  
Exact purpose for which vehicle was being used at the time of accident: Private use / Work purpose  
Any Injury (If YES, Pls state): No injury.

**Other Party Driver's Particular (if any)**

Vehicle. No: <u>Em 948T, (AYA)</u>	Vehicle. No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

\* NEW - Passenger's name & gender:

*[Signature]*

## SKETCH PLAN

### 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 liability**.
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. 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.
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.

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

Refer to attached.


## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to attached. Police report

## DECLARATION

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

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.:

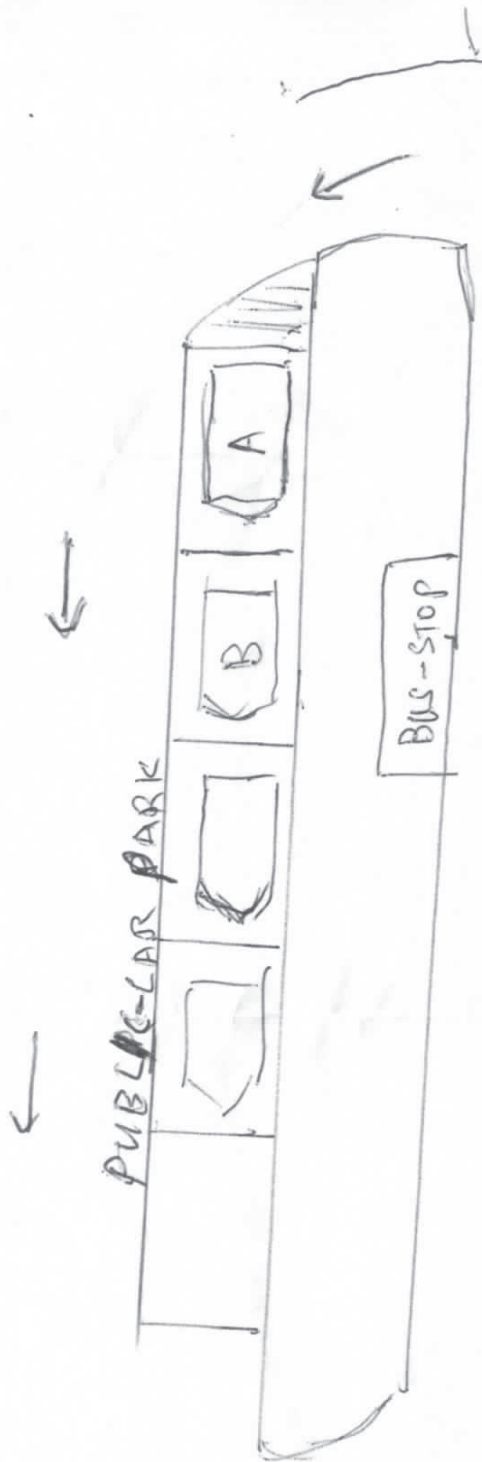


SHOP HOUSES (CRESCENDO BUILDING)

A = SKV 3399J

B = EM 998T

JLN TUA KONG



UPPER EAST COAST ROAD



06/09/2018  
1435 hrs.

*[Signature]*



# SINGAPORE POLICE FORCE



T/20180412/2145

Police Station Of Origin:  
Marine Parade N.P.C  
300 Marine Parade Road SINGAPORE  
449296  
Tel No: 1800-4428999

1 of 3

Report No. T/20180412/2145

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 12/04/2018 18:25		Vide Report No.:		Station Diary No.: 71	
<b>Informant's Particulars</b>					
Name of Informant: FOO TWEE JUAT			Address: 33A JALAN BAIDURI SINGAPORE 428413		
ID Type / ID No.: NRIC NO / S0090526G			Contact No.: Home/Office: Mobile: 93375539		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 68	Date of Birth: 04/07/1949	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Retiree			Driving Licence Information: Class: 3 Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 06/04/2018 14:35	Type of Location: Car Park
Location: Along Road 1 UPPER EAST COAST ROAD opposite Shell Petrol Kiosk				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
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
EM998T	Car	PORSCHE		White		0
SKV3399J	Car	MERCEDES BENZ		Red	Slightly Damaged	0

<b>Details of Person Involved</b>	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20180412/2145

Police Station Of Origin:  
Marine Parade N.P.C  
300 Marine Parade Road SINGAPORE  
449296  
Tel No: 1800-4428999

2 of 3

Report No. T/20180412/2145

**CONTINUATION OF REPORT**

<b>Driver</b>				
Name	FOO TWEE JUAT		ID No.	S0090526G
Related Vehicle	SKV3399J (Car)		Contact No.	93375539
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 6/04/2019 at about 1415hrs, I parked my car at the public carpark along Upper East Coast Road opposite Shell Petrol Kiosk. Nothing was amiss. I then came back to my car at about 1530hrs but did not notice anything. However, on 11/04/2018, my maid was washing my car when she realized that the front bumper was caved in. I made a check on the damage and believed that something might have knocked onto my car as I was not involved in any accident. I then backtracked to the day that I drove out the car and checked through the in-car CCTV and discovered that a car, EM998T, had knocked onto my car while reversing. The driver then just left after knocking onto my car.



**SINGAPORE  
POLICE FORCE**



T/20180412/2145

Police Station Of Origin:  
Marine Parade N.P.C  
300 Marine Parade Road SINGAPORE  
449296  
Tel No: 1800-4428999

3 of 3

Report No. T/20180412/2145

**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 HUANG JINYING, EVELYN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / HRT /

SI KALESWARI PALANI

Contact No.: 65476902

Signature Of Informant:

Date/Time:

12/04/2018 18:25

Classification Of Case:

Authentication Stamp

NP168

SINGAPORE  
POLICE FORCE

SIGNATURE