

## 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	05/05/2018 17:23
Date Of Accident	11/04/2018 09:30
Exact Location Of Accident	B3 CARPARK OF TAN TOCK SENG HOSPITAL
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKB3126K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	WAN CHONG CHUEN PATRICK
NRIC No	S1227976J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97529784
Alternative Phone No	OFFICE-97529784

### Vehicle Particulars

Manufacturer	SUZUKI
Model	APV 7-SEATER
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	PRIVATE CAR

### Insurance Company

Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPPHQ18-002670
Cover Note Number	

### Driver

Name of Driver	GOH BOON BOON
NRIC No	S1240462Z
Date Of Birth	27/07/1957
Occupation	INDOOR
Date Of Driving Pass	29/01/1996
Driving Experience	22 YEARS AND 2 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97529784
Fax Number	
Contact Number	
Email Address	MAGICWAN@SINGNET.COM.SG

Address	BLK 646 JALAN TENAGA #07-111 SINGAPORE 410646
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	NO COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
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 [OTHER]	POTONG PASIR NPP
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT - T/20180424/2047 LODGED AT POTONG PASIR NPP. ON 11/04/2018 AT ABOUT 0930HRS I WAS DRIVING THE FAMILY CAR (SKB3126K) UNDER MY HUSBAND WAN CHONG CHUEN PATRICK'S NAME. I WAS AT B3 CARPARK OF TAN TOCK SENG HOSPITAL TRYING TO FIND A PARKING SPACE. AT THAT POINT IN TIME, I RECALLED THERE WERE 2 CARS IN FRONT OF MY CAR AND THEY TRIED TO PARK INTO A PARKING LOT BUT WERE UNABLE TO. WHEN BOTH OF THE CAR DROVE OFF. I TRIED TO REVERSE INTO THE LOT. HOWEVER, PRIOR TO DOING SO, I ASSESSED FROM MY SIDE MIRROR THAT MY CAR WAS NOT ABLE TO FIT. AS SUCH, I DROVE OFF TO FIND ANOTHER LOT SOMEWHERE ELSE. ON 24/04/2018 AT ABOUT 1157HRS, I RECEIVED A CALL FROM TRAFFIC POLICE (65476368) INFORMING THAT SOMEONE HAD LODGED A REPORT OF HIT-AND-RUN AGAINST ME CLAIMING THAT I HIT THEIR CAR AT TAN TOCK SENG HOSPITAL. THE IO PROVIDED THE VEHICLE NUMBER OF THE CAR AS SBZ8128C AND INSTRUCTED ME TO LODGE A POLICE REPORT ON THE MATTER. I HAVE A FRONT AND REAR FACING IN-CAR CAMERA THAT SHOULD BE WORKING AT THAT POINT IN TIME. HOWEVER, I HAVE NOT CHECKED THE FOOTAGE YET. I WISH TO STATE THAT I DID NOT HIT ONTO ANY VEHICLE AS THERE WERE NO SCRATCH OR DENT MARK ON MY VEHICLE. I AM LODGING THIS REPORT TO FACILITATE TRAFFIC POLICE INVESTIGATIONS.

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SBZ8128C
Vehicle Make/Model/Colour	B.M.W./730LI LED
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	UNKNOWN DRIVER
NRIC/Passport Number	

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 1

## Sketch Plan

### SKETCH PLAN

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4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of 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 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.
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 Insurers who have insured vehicle(s) involved in this accident (all Insurers 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/postal packages); and/or
    - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
  - (b) all Insurers 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.

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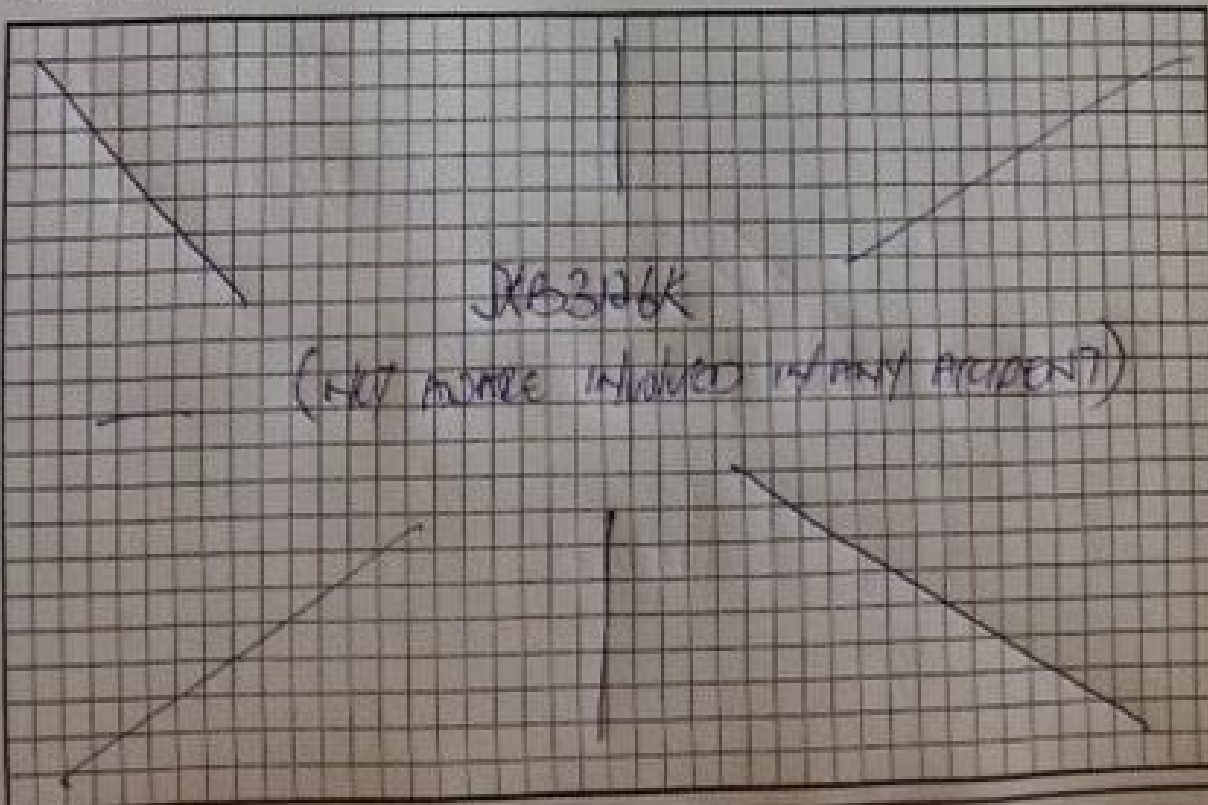
VERIFIED BY AJAX MARS  
REPORTING OFFICER  
MOHAMED SHAREL  
BIN SATAR

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre  
Personnel

#### Sketch Plan



# Police Report



**SINGAPORE  
POLICE FORCE**



T/20180424/2047

1 of 3

Police Station Of Origin:  
Potong Pasir NPP  
142 Potong Pasir Avenue 3 #01-240  
SINGAPORE 350142  
Tel No: 1800-2829999

Report No. T/20180424/2047

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/04/2018 13:43	Vide Report No.:	Station Diary No.: 27
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### Informant's Particulars

Name of Informant: GOH BOON BOON	Address: APT BLK 646 JALAN TENAGA #07-111 SINGAPORE 410646		
ID Type / ID No.: NRIC NO / S1240462Z	Contact No.: Home/Office: Mobile: 97529784		
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Female	Age: 60	Date of Birth: 27/07/1957	Type of Informant: Driver
Race: Chinese	Language: English	Institution / School Name:	
Occupation: Other accounting clerks (eg cost clerk)	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: 11/04/2018 09:30	Type of Location: Car Park
Location: Along Road 1 JALAN TAN TOCK SENG B3 Carpark of Tan Tock Seng Hospital				
Weather: n/a	Road Surface: Dry		Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Not Controlled		Traffic Volume: Heavy	
Type of Collision: unsure	Anyone conveyed by ambulance: No			

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SBZ8128C	Car	BMW		Grey		0
SKB3126K	Car	SUZUKI	APV 7-SEATER 1.6 5DR GLX AT ABS D/AIRBAG	Red	No Damage	0



# Police Report



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T/20180424/2047

Police Station Of Origin:  
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SINGAPORE 350142  
Tel No: 1800-2829999

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Report No. T/20180424/2047

## CONTINUATION OF REPORT

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	GOH BOON BOON	ID No.	S1240462Z
Related Vehicle	SKB3126K (Car)	Contact No.	97529784
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 11/04/2018 at about 0930hrs I was driving the family car (SKB3126K) under my husband WAN CHONG CHUEN PATRICK's name. I was at B3 carpark of Tan Tock Seng Hospital trying to find a parking space. At that point in time, I recalled there were 2 cars in front of my car and they tried to park into a parking lot but were unable to. When both of the car drove off, I tried to reverse into the lot. However, prior to doing so, I assessed from my side mirror that my car was not able to fit. As such, I drove off to find another lot somewhere else.

On 24/04/2018 at about 1157hrs, I received a call from Traffic Police (65476368) informing that someone had lodged a report of hit-and-run against me claiming that I hit their car at Tan Tock Seng Hospital. The IO provided the vehicle number of the car as SBZ8128C and instructed me to lodge a police report on the matter.

I have a front and rear facing in-car camera that should be working at that point in time. However, I have not checked the footage yet. I wish to state that I did not hit onto any vehicle as there were no scratch or dent mark on my vehicle. I am lodging this report to facilitate Traffic Police investigations.

Police Report



**SINGAPORE  
POLICE FORCE**



T/20180424/2047

Police Station Of Origin:  
Potong Pasir NPP  
142 Potong Pasir Avenue 3 #01-240  
SINGAPORE 350142  
Tel No: 1800-2829999

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Report No. T/20180424/2047

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:  
E /  
Sgt 2 TAN YILONG

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
24/04/2018 13:43

Officer In Charge Of Case:  
TP / HRT /  
Sr Staff Sgt ESTHER CHONG  
Contact No.: 65476368

Classification Of Case:



SN 057

Authentication Stamp  
NP168

SIGNATURE

Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



**Accident Photo**





Accident Photo



Identification Card

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1240462Z



Name  
GOH BOON BOON  
吳 文 雯

Race  
CHINESE

Date of birth  
27-07-1957

Sex  
F

Country/Place of birth  
SINGAPORE





Identification Card



Driving License



Driving License

