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 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

	ACCIDENT STATEMENT
Date Of Report	16/05/2018 17:50
Date Of Accident	15/05/2018 19:15
Exact Location Of Accident	FAR EAST PLAZA CARPARK B BASEMENT 1
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLV6175G
Insured/Policyholder	
Name Of Registered Owner	MORIER VALERIE
NRIC No	S7148392D
Email Address	MORIERV@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96732901
Alternative Phone No	OTHERS-96732901
Vehicle Particulars	
Manufacturer	NISSAN
Model	SYLPHY-1.5 4AT (A)
Exact Purpose for which vehicle was being used a time of accident	, ,
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If 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	5098633094
Cover Note Number	15/03/2018 - 14/03/2019
Driver	
Name of Driver	MORIER VALERIE
NRIC No	S7148392D
Date Of Birth	03/12/1971
Occupation	INDOOR
Date Of Driving Pass	10/06/1997
Driving Experience	20 YEARS AND 11 MONTHS

Gender FEMALE

(LOCAL) +65-96732901 Mobile Number (LOCAL) +65-96732901 Fax Number OTHERS-96732901 Contact Number MORIERV@GMAIL.COM **EMail Address**

12 FLORA DRIVE Address

#01-14 506943

Postcode

vas driver an employee of the Insured's Company NO **OWNER**

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

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED Type Of Accident

NO

NO

CLEAR Weather Conditions DRY Road Surface

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?

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) n

Details of Police Action

YES Was the accident reported to the police?

If Yes.Please state which Police Station

PASIR RIS NEIGHBOURHOOD POLICE CENTRE Police Station Name

NO

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

SINGAPORE

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

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

ON THE STATED DATE AT ABOUT 1854HRS. I PARKED MY VEHICLE BEARING THE REGISTRATION NUMBER SLV6175G AT FAR EAST PLAZA CAR PARK B, BASEMENT 1 LOT 35. AT ABOUT 2205HRS, I CAME BACK TO MY VEHICLE AND DISCOVERED A NOTE LEFT ON MY VEHICLE. THE NOTE SAYS "HI VEHICLE OWNER, I WITNESSED A RED LAND/ RANGE ROVER SCRAPINS YOUR RIGHT SIDE OF YOUR CAR WHILE ATTEMPTING TO PARK HIS VEHICLE. I NOTICED RED MARK ON YOUR CAR AFTER HE LEFT. I ALSO NOTICED THAT HE DIDN'T LEAVE A NOTE. SO I REMEMBERED HIS VEHICLE NUMBER SKL2625R, ANYTHING PLEASE CONTACT MYSELF SUFYAN: 9767 8547" TEXTED THE WITNESS AND HE INFORMED ME THAT THE ACCIDENT HAPPENED BETWEEN 1915 HRS - 1930 HRS, WHEN HE WAS WALKING IN FRONT OF MY VEHICLE. HE ALSO INFORMED THAT THE DRIVER WHO HIT MY VEHICLE WAS A CHINESE MAN. I WISH TO INFORM THAT I AM THE OWNER OF THE VEHICLE SLV6175G. MY VEHICLE DOES NOT HAVE AN IN-CAR CAMERA. THE DAMAGES ON MY VEHICLE INCLUDE DENTS, SCRATCHES AND RED PAINT ON THE FRONT RIGHT OF THE BUMPER.

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 Witness 1

Name SUFYAN Phone Number 97678547

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKL2625R

RED LAND/ RANGE ROVER

PRIVATE CAR

Sketch Plan Pg. 1

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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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:
 - 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:
 - 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:

Name: NRIC/FIN No.:

Reporting Centre Personnel's Signature

Page 4 of 17

HORK

Sketch Plan Pg. 2

SKETCH PLAN	A	FAR CAST PLAZA CAP PARK B RASCOURCE 1 Vehicle A - SLV 61756 Vehicle B : SKL 2-6250
DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT	
Refer to GIA Report	4 Police Report.	
	71.	
DECLARATION:		(NURKe
DECLARATION I/We declare the foregoing part	iculars are true in every respect	THE WOOD THE WAY OF THE PROPERTY OF THE PROPER
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.:

CARD SketchPaled in Vi-





Report No T/20180515/2194

1 of 3

Policia Station Of Origin:

Partir Ris N.P.C

1 Presid Ris Drive 4 #01-01 SINGAPORE

519497

Tel No. 1800-5852999

REPO DE A TRAFFIC ACCIDENT

Date Report Made: 15/05/2018 23:27

Vide Report No.: Station Diary No.: 136

Infor at's Particulars Name of informant: Address: 12 FLORA DRIVE #01-14 SINGAPORE 506943

MORIER /ALERIE Contact No.:

Home/Office: Mobile: 96732901

Email: Nationality: SINGAPORE CITIZEN

Date of Birth: Type of Informant: Age:

Sex: Driver Female 46 03/12/1971

Institution / School Name: Race: Language: English Eurasian Or cupation: Driving Licence Information: **TEACHER**

Class: Date of Expiry:

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 15/05/2018 19:15	Type of Location Car Park	
Weatतिक्षेत		Road Surface:		Road Speed Limit:	
Clear of a		Dry			
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic	
One Way					

Vinicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKL2625R	Car					0
SLV6175G	Car	NISSAN	SYLPHY 1.5L 4AT ABS D/AB 2WD 4DR	Silver	Slightly Damaged	0

Delois of Vehicle Insurance			
Vehici No. Insurance Company	Insurance No	Effective	Expiry Date





2 of 3 Report No. 1/20 : 3515/2194

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 A	ehicle Insurance	I Company	Transcond	Laster Burn
Vehicle No	Insurance Company	Insurance No	Effective	Expir Date
Total Control of the	NTUC Income Insurance Co-Operative	5098633094	15/03/2018	14/03/2019
32701730	Limited			

Any Pedestrian Ir	volved: No		EUT20				
No. of Pedestrians Injured: NIL Use			Use of Pe	of Pedestrian Crossing: NA			
Driver		01.000		100 A 100 A	Paris I	- 1 100001°2	
Name	MORIER VALERIE			ID No.		S7148392l	
Related Vehicle	SLV6175G (Car)			Conta	ct No.	96732901	
Hospital/Clinic	NIL			Class Drivin Licend Expir	g ce &	Class: 3 Minimum Date of Expire. NIL	
Date Treatment	ent NIL Dat		Date Dis	charge	NIL	WAS C	
			Degree o	of Injury	NIL		

On 15/05/2018 at about 1845hrs, I parked my vehicle bearing the registration number SLV6178© at Far East Plaza Carpark B, Basement 1, Lot 35.

At about 2205hrs, I came back to my vehicle and discovered a note left on my vehicle. The note says "Hi vehicle owner, I witnessed a Red Land/Range Rover scrapins your right side of your car while attempting to park his vehicle. I noticed red marks on your car after he left. I also noticed that he didn't leave a note. So, I remembered his vehicle number SKL2625R. Anything pls contact myself Sufyan: 97678547" texted the witness and he informed me that the accident happened between 1915hrs - 1930hrs, when he was walking in front of my vehicle. He also informed that the driver who hit my vehicle was a Chinese Man.

I wish to inform that I am the owner of the vehicle SLV6175G. My vehicle does not have accommodate amera. The damages on my vehicle include dents, scratches and red paint on the front right of the imper.

3.53

POLICE REPORT Pg. 3





Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457 Tel No: 1800-5852999 3 of 3 Report No T/20180515/2194

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

the certificate with you now, please fax a copy to 6	35474885 stating the report number as reference.
Signature Of Officer Recording The Report: G / Sgt 2 REGINA LUI YU TING	Signature Of Informant
Signature Of Interpreter: Not applicable	Date/Time: 15/05/2018 23:27
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt ESTHER CHONG	Classification Of Case:
Contact No.: 65476368	
Authentication Stamp	78
1	

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have

Hi Venicle OWIER,

I Witnessed & Red

Land/Range Rover

Scrapins your right

Side of your Car

While attempting to pack

his venicle. I not ced

red makes on your car

after he left. I also notifed

finat he dight leave a note.

So, I remembored his

levicle number

Skl 2625R.

anything of corract myselft

Suryan: 97678547