

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	17/05/2018 17:32
Date Of Accident	16/05/2018 15:20
Exact Location Of Accident	TPE(SLE)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLK5145H
Insured/Policyholder	
Name Of Registered Owner	JASON LIMO SERVICES
Co Reg No	53354660E
Email Address	JASONKCX@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-90223184

Vehicle Particulars

Manufacturer	JAGUAR
Model	XF 3.0L AT ABS D/AIRBAG 2WD 4DR

Exact Purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to your vehicle? YES

If No, Please state action to be taken

Vehicle Category	PRIVATE CAR
------------------	-------------

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMHCSN1745941700
Cover Note Number	

Driver

Name of Driver	AHMAD HAKIM CHAI BIN MUHAMED NIZAM CHAI
Passport No/FIN	931022-01-5031
Date Of Birth	22/10/1993
Occupation	OUTDOOR
Date Of Driving Pass	09/07/2017
Driving Experience	0 YEAR AND 10 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-94277131
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL

Address	47 JALAN PULAI MESRA 17 BANDAR BARU KANGKAR PULAI 81300 JOHOR BAHRU
Postcode	81300
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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	RAINING
Road Surface	WET

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 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)	2
Passenger 1	NAME: : DHARMA ENG GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	SENGKANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 2 SENGKANG SQUARE #01-02 SINGAPORE , POSTCODE: 545025 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800 - 3438999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

On 16/05/2018 at about 1520hrs, I was driving a rental vehicle SLK5145H along TPE(SLE) on lane 1. It was raining heavily and the road was wet. While driving along the road, suddenly I felt an impact from the rear left side of my car. My car started to steer out of control to the right and as a result, my car hit onto the railing on the right. I then managed to steer the car to the left and onto the road shoulder. The vehicle which had hit onto my car did not stop and fled. I made a check on my passenger who was fine. At the road shoulder, traffic police and EMAS was called for assistance. The vehicle sustained damages to both left and right side. The engine bay was also damaged. The vehicle was then towed by EMAS. Upon arrival of traffic police, I was informed to lodge a traffic accident report.

Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	UNKNOWN
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

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.

JASON LIMO SERVICES
Co Reg No: 53354860E

Policyholder's Signature
Date & Time:

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

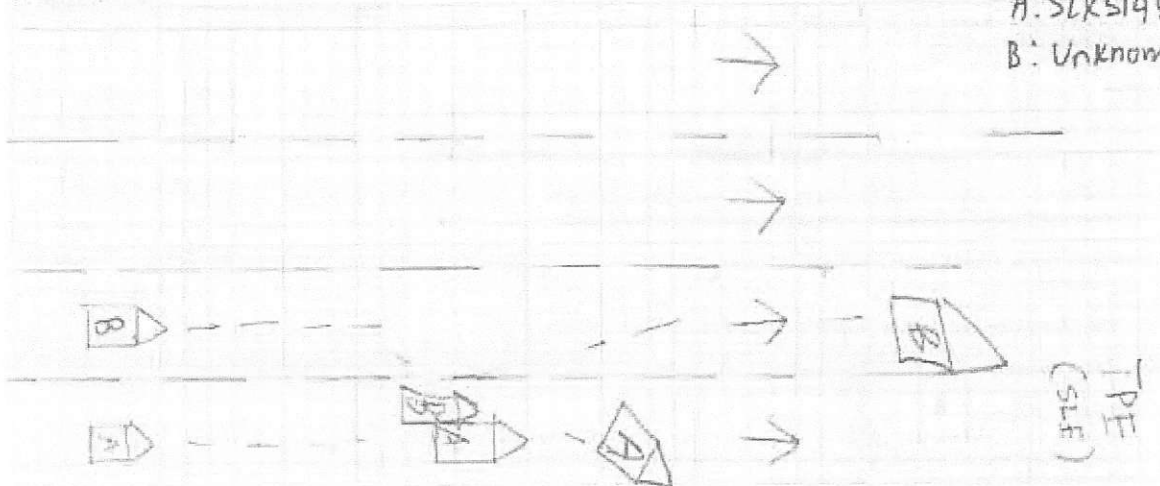
Reporting Centre Personnel's Signature
Name: Cassandra
NRIC/FIN No.: 63229391W



Accident Sketch Plan

SKETCH PLAN

DOA: 16-5-2018
A: SLK5145H
B: Unknown



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to Police Report No. T/20180517/2020.

My vehicle still at the Traffic Police compound hence no photos can be taken.

DECLARATION

I/We declare that the above statements are true in every respect.

JASON LIMO SERVICES
Co Reg No: 53354860E

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name: Cassandra
NRIC/FIN No: 632293912



Police Report



**SINGAPORE
POLICE FORCE**



T/20180517/2090

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

1 of 3

Report No: T/20180517/2090

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/05/2018 15:24		Vide Report No.:		Station Diary No.: 90
Informant's Particulars				
Name of Informant: AHMAD HAKIM CHAI BIN MUHAMED NIZAM CHAI		Address: 47 JALAN PULAI MESRA 17 BANDAR BARU KANGKAR PULAI, 81300 JOHOR BAHRU		
ID Type / ID No.: NEW MALAYSIAN IC / 931022015031		Contact No.: Home/Office: Mobile: 94277131		
Nationality: MALAYSIAN		Email:		
Sex: Male	Age: 24	Date of Birth: 22/10/1993	Type of Informant: Driver	
Race:		Language:	Institution / School Name:	
Occupation: EXECUTIVE		Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Government Property	Drink Drive: No	Date/Time of Accident: 16/05/2018 15:20	Type of Location: Straight Road
Location: Along Road 1 TAMPINES EXPRESSWAY SELETAR EXPRESSWAY 13.3KM				
Weather: Heavy rain		Road Surface: Wet	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume: Light	
Type of Collision: Moving Vehicle Against - Road Divider/Kerb/Railings			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLK5145H	Car				Seriously Damaged	1

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

Police Report



**SINGAPORE
POLICE FORCE**



T/20180517/2090

2 of 3

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

Report No: T/20180517/2090

CONTINUATION OF REPORT

Driver			
Name	AHMAD HAKIM CHAI BIN MUHAMED NIZAM CHAI		ID No. 931022015031
Related Vehicle	SLK5145H (Car)		Contact No. 94277131
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Passenger			
Name	DHARMA ENG		ID No. G0182701X
Related Vehicle	SLK5145H (Car)		Contact No. 81418585
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 15/05/2018 at about 1520hrs, I was driving a rental vehicle SLK5145H along TPE(SLE) on lane 1. It was raining heavily and the road was wet. While driving along the road, suddenly I felt an impact from the rear left side of my car. My car started to steer out of control to the right and as a result, my car hit onto the railing on the right. I then managed to steer the car to the left and onto the road shoulder. The vehicle which had hit onto my car did not stop and fled.

I made a check on my passenger who was fine. At the road shoulder, traffic police and EMAS was called for assistance. The vehicle sustained damages to both left and right side. The engine bay was also damaged. The vehicle was then towed by EMAS.

Upon arrival of traffic police, I was informed to lodge a traffic accident report.

Police Report



SINGAPORE
POLICE FORCE



T/20180517/2090

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

3 of 3

Report No. T/20180517/2090

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:

F /

Staff Sgt MUHAMMAD SYAZWAN BIN
MOHAMAD YASIN

Signature Of Interpreter

Not applicable

Officer In Charge Of Case:

TP / AEIT /

SSI-2 YEO GEAK ENG CECILIA

Contact No.: 65476404

Signature Of Informant:

Date/Time:

17/05/2018 15:24

Classification Of Case:

Authentication Stamp
NP168



Signature:

Singapore Police Force

SN 085