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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	31/05/2018 11:08
Date Of Accident	30/05/2018 13:30
Exact Location Of Accident	1 SENANG CRESCENT
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLF7033K
Insured/Policyholder	
Name Of Registered Owner	SOH GIM TIAN
NRIC No	S1579272H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96931319
Alternative Phone No	OFFICE-96931319
Vehicle Particulars	
Manufacturer	HONDA
Model	VEZEL 1.5X CVT ABS D/AIRBAG 2WD 5DR
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	5099784250
Cover Note Number	
Driver	
Name of Driver	SU YONGWEN
NRIC No	S9405969J

Name of Driver

NRIC No

S9405969J

Date Of Birth

26/02/1994

Occupation

INDOOR

Date Of Driving Pass

30/09/2015

Driving Experience 2 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-81250330

Fax Number

Contact Number OFFICE-81250330

EMail Address NOEMAIL

Address BLK 771 WOODLANDS DRIVE 60

#10-174

Postcode 730771

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured CHILDREN

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company 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

ambulance?

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)

0

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name WOODLANDS EAST N.P.C

Police Station Address ROAD: 3 WOODLANDS DRIVE 63 , POSTCODE: 737890 , COUNTRY:

SINGAPORE

NO

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT - T/20180530/2145.

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 GQ5742L

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

Accident Sketch Plan

SKETCH PLAN

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- 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.
- 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:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

Accident Sketch Plan

olicyholder's Signature ste & Time:	Driver's Signature (If driver is not the policyholder)	Reporting Centre Personnel's Signature
ECLARATION We declare the foregoing part	iculars are true in every respect.	Λ
/		
Refer to police	e report- 7/20/80530/2145	S
	h-8253)	
	_	g: GasayaL
	Sounds A A	A: SLF7033K
	0 0	

Police Report





Police Station Of Origin: Woodlands East N.P.C. 3 Woodlands Drive 63 SINGAPORE 737890 Tel No: 1800-7679999 1 of 3 Report No. T/20180530/2145

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/05/2018 19:29		Made:	Vide Report No.:	Station Diary No.: 142		
Informa	nt's Partic	ulars	Selection of the select	THE RESERVE OF THE PARTY OF		
Name of Informant: SU YONGWEN			Address: APT BLK 771 WOODLANDS DRIVE 60 #10-174 SINGAPORE 730771			
ID Type / ID No.: NRIC NO / S9405969J		69J	Contact No.: Home/Office:	Mobile: 81250330		
National SINGAP	ity: PORE CITIZ	ŒN	Email:			
Sex: Male	Age: 24	Date of Birth: 26/02/1994	Type of Informant: Driver	: :		
Race: Chinese			Language:	Institution / School Name:		
Occupation: Project Executive			Driving Licence Information: Class: 3	Date of Expiry:		

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 30/05/2018 13:30	Type of Location Straight Road	
Location: Along Road 1 SENANG CR Outside 1 Se					
Weather: Ro		Road Surface: Dry		Road Speed Limit:	
		Traffic Control: Not Controlled		Traffic Volume: No Traffic	
One Way		1101 00111101100		NO Hallic	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GQ5742L	Lorry					0
SLF7033K	Car				Slightly Damaged	0

Details of Person Involved	PART SHE WAS DEADED AND THE PART OF THE PA
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

Police Report





T/20180530/2145

Police Station Of Origin: Woodlands East N.P.C.

3 Woodlands Drive 63 SINGAPORE 737890

Tel No: 1800-7679999

Report No. T/20180530/2145

Driver		1 3 2 3	11 101 101	WASHING THE	9.5	SCAPE CHECKS
Name	SU YONGWEN		ID No		S9405969J	
Related Vehicle	SLF7033K (Car)		Conta	ct No.	81250330	
Hospital/Clinic	NIL			Class Drivin Licent Expire	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL Date D			charge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o			

CONTINUATION OF REPORT

Brief Details.

On the 30/05/2018 at about 1040hrs, I parked my vehicle along the road of Senang Crescent. It was outside 1 Senang Crescent Building. Subsequently, I left to a nearby coffee shop to drink coffee.

On the same day at about 1350hrs, I came back to my vehicle and discovered that the rear driver side of my car was dented and cracked. I was then approached by a foreign worker who informed that one lorry hit my vehicle at about 1332hrs and had left the place. I managed to retrieve the CCTV footage from the management of 2 Senang Crescent. From the CCTV footage, I was able to retrieve the lorry's plate number. No one was injured in the accident as shown in the CCTV footage.

Police Report





Police Station Of Origin: Woodlands East N.P.C. 3 Woodlands Drive 63 SINGAPORE 737890 Tel No: 1800-7679999 3 of 3 Report No. T/20180530/2145

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: J / Staff Sgt TOH ZI GUI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 30/05/2018 19:29 .
Officer In Charge Of Case: TP / HRT / SSI GOH GEOK LYE Contact No.: 65476148	Classification Of Case:
Authentication Stamp	



























