SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number EMail Address

- 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	08/06/2018 11:52
Date Of Accident	06/06/2018 16:50
Exact Location Of Accident	10 ADMIRALTY STREET #06-10 (S)757695
Country/State of Loss	SINGAPORE
C	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBE1424D
Insured/Policyholder	
Name Of Registered Owner	BUGG DESIGN AND SERVICES PTE LTD
Co Reg No	200613429H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-81618093
Vehicle Particulars	
Manufacturer	TOYOTA
Model	DYNA
Exact Purpose for which vehicle was being used at time of accident	WORK
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN1656031701
Cover Note Number	-
Driver	
Name of Driver	CHEN FAN SIONG
NRIC No	S7060956H
Date Of Birth	03/11/1970
Occupation	OUTDOOR
Date Of Driving Pass	19/07/2002
Driving Experience	15 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91093787
Fax Number	

NOEMAIL

BLK 212A PUNGGOL WALK #16-729 Address

Postcode

Was driver an employee of the Insured's Company YES

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

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

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.

0 Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name TRAFFIC POLICE DIVISION HQ

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY: Police Station Address

NO

SINGAPORE

NO

Police Station Contact **TEL NO**: 65470000 - **FAX NO**:

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

Attachment(s)

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

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number UNKNOWN

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category MOBILE EQUIPMENT

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
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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)

Lunderstand, 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 enquirles 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' lawyors/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.

Policyhola Dy mate

Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN					-1-1				
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DECLARATION				-					
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Policyholder's Share or Date & Time:	· oth	Oriver's Sig (If driver is Date & Tim	not the poli	icyholder)		Reporting Name: NRIC/FIN N		inel's Signature	

POLICE REPORT



T/20180607/7001

Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

1 of 3 Report No. T/20180607/7001

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/06/2018 10:25			Vide Report No.: F/20180606/0169	Station Diary No.			
Informa	nt's Partic	ulars		Design to the least of the last of the las			
Name of Informant: CHEN FAN SIONG			Address: APT BLK 212A PUNGGOL WALK #16-729 SINGAPORE 821212				
ID Type / ID No.:			Contact No.:				
NRIC NO / S7060956H			Home/Office: Mobile: 91093787				
Nationality:			Email:				
MALAYSIAN			cfs3787@gmail.com				
Sex: Age: Date of Birth:			Type of Informant:				
Male 47 03/11/1970			Driver				
Race: Chinese			Language: English	Institution / School Name:			
Occupation:			Driving Licence Information:				
PROUCTION MANAGER			Class: 2B,3,4 Date of Expiry:				

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 06/06/2018 16:49	Type of Location Commercial Building	
ADMIRALTY	STREET Street, #06-10, Singapore	757695 (outside c	our unit)		
Weather:		Road Surface:	F	Road Speed Limit:	
				Traffic Volume: Moderate	
Traffic Flow: One Way		Traffic Control: Not Controlled			

Details of Vehicle Involved								
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenge		
GBE1424D	Lorry	ТОУОТА	Dyna 3.0 Diesel Turbo M/T 2WD Lorry	Silver	Slightly Damaged	0		

Details of Vehicle Insurance						
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date		
GBE1424D	CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD.	DMCVSN16560317 01	10/09/2017	09/09/2018		

POLICE REPORT





Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20180607/7001

CONTINUATION OF REPORT

Details of Perso						
Any Pedestrian I				-		
No. of Pedestriar	ns Injured: NIL		Use of Pe	edestriar	Cross	sing: NA
Driver					A DE	STATE OF STREET
Name	CHEN FAN SIONG					S7060956H
Related Vehicle	GBE1424D (Lorry)				ict No.	91093787
Hospital/Clinic	NIL		Class Drivin Licend Expiry	g	Class: 2B,3,4 Date of Expiry: NIL	
Date Treatment	NIL		Date Disc	charge	NIL	
No. of Days granted Medical Leave NIL			Degree o	f Injury	NIL	

Brief Details.

GBE1424D reach office - 11.19am Park outside office unit (address: 10 Admiralty Street, #06-10, Singapore 757695)

Lorry stationary from 11.19am onwards till 1.50pm and 2.35pm to 4.50pm

I went out for lunch 12.45 to 1.50pm. Didn't discover anything.

I drove lorry out to purchase material between 1.50pm to 2.35pm.

So the period of hit and run will be between 2.35pm to 4.50pm when I discover the glass shatters infront of my company lorry.

My Admin girl helped to call in 999 at 5.03PM and subsequently a Traffic Police came.

As this is a hit and run case, we hope that the authority can help us to investigate and find out the driver who did this.

POLICE REPORT



T/20180607/7001

Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20180607/7001

CONTINUATION OF REPORT

Sketch Pla							
Informant	is	not	able	to	provide	sketch	pla

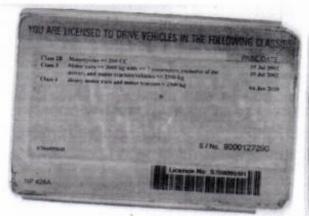
NP168

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 07/06/2018 10:25
Officer In Charge Of Case: TP / TPHQ / MOHAMED SUFIAN BIN SUDIN Contact No.: 65476367	Classification Of Case:
Authentication Stamp	

DRIVING DOC









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