

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 | 18/06/2018 18:19 |
| Date Of Accident | 14/06/2018 22:40 |
| Exact Location Of Accident | BUKIT BATOK ST 32 CARPARK |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|---------------------------|
| Vehicle Registration Number | SLW3422H |
| Insured/Policyholder | |
| Name Of Registered Owner | SARWANI BINTE MOHD SAKUAN |
| NRIC No | S7937459H |
| Email Address | NANIE_W@HOTMAIL.COM |
| Mobile Phone No | (LOCAL) +65-83181017 |
| Alternative Phone No | OTHERS-83181017 |

Vehicle Particulars

| | |
|--|------------------|
| Manufacturer | HONDA |
| Model | SHUTTLE 1.5G CVT |
| 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 | REPORTING ONLY |
| 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 | 5097999897 |
| Cover Note Number | |

Driver

| | |
|----------------------|---------------------------|
| Name of Driver | SARWANI BINTE MOHD SAKUAN |
| NRIC No | S7937459H |
| Date Of Birth | 06/12/1979 |
| Occupation | INDOOR |
| Date Of Driving Pass | 12/06/2007 |
| Driving Experience | 11 YEARS AND 0 MONTHS |
| Gender | FEMALE |
| Mobile Number | (LOCAL) +65-83181017 |
| Fax Number | |
| Contact Number | OTHERS-83181017 |
| Email Address | NANIE_W@HOTMAIL.COM |

| | |
|---|---|
| Address | BLK 315 BUKIT BATOK STREET 32 #01-89 |
| Postcode | 850315 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | OWNER |
| Vehicle Registration Number of Driver's Own Vehicle | - - - |
| Insurance Company of Driver's Own Vehicle | - - - |

General Information of the Accident

| | |
|--------------------|------------|
| Type Of Accident | SIDE SWIPE |
| 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) | 0 |

Details of Police Action

| | |
|---|--|
| Was the accident reported to the police? | YES |
| If Yes, Please state which Police Station | |
| Police Station Name | BUKIT BATOK NEIGHBOURHOOD POLICE CENTRE |
| Police Station Address | ROAD: 21 BUKIT BATOK EAST AVE 4 , POSTCODE: 659840 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: 1800-6659999 - FAX NO: 66655793 |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

PLS REFER TO THE POLICE REPORT : T/20180615/2018

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 | SKF6782A |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | |
| NRIC/Passport Number | |
| Contact Number | |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |

No. Of Passenger (Including Driver)

Sketch Plan

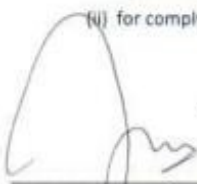
SKETCH PLAN

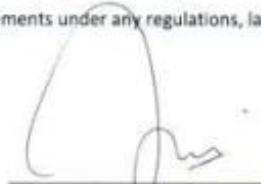
IMPORTANT NOTICE

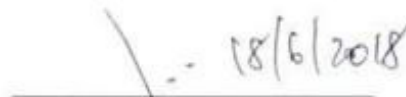
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

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.


Policyholder's Signature
Date & Time:

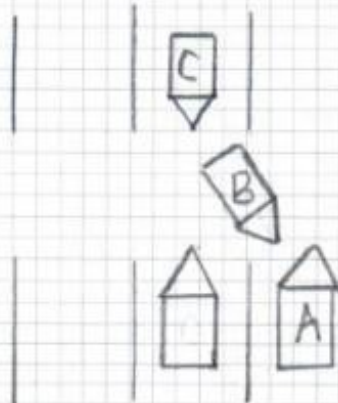

Driver's Signature
(If driver is not the policyholder)
Date & Time:


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

Sketch Plan #2

SKETCH PLAN

A. SLW 3422 H
B. SKF 6782 A
C. SLN 582 X



Along Road 1
BUKIT BATOK STREET
32 car Park

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Pls Refer to the Police Report -
T/20180615/2018

DECLARATION

I/We declare the foregoing particulars are true in every respect.

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.:

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20180615/2018

Police Station Of Origin:
Bukit Batok N.P.C
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999

2 of 3

Report No. T/20180615/2018

CONTINUATION OF REPORT

| | | | |
|-----------------------------------|------------------------------|--|---------------------------------|
| Details of Person Involved | | | |
| Any Pedestrian Involved: No | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | |
| Vehicle Owner | | | |
| Name | SARWANI BINTE MOHAMED SAKUAN | ID No. | S7937459H |
| Related Vehicle | SLW3422H (Car) | Contact No. | 83181017 |
| 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 14/06/2018 at about 03:30pm, I parked my car, a midnight blue coloured Honda Shuttle bearing registration plate number SLW3422H. There were no damages to my car when I parked it. At about 10:40pm, I heard a loud sound. A neighbor came over to inform me that my car had been damaged. I went down to the carpark to make a check on my car. I discovered that the front left bumper was dented, and the front left portion was out of alignment and detached. The front right rim and tyre were also damaged as the impact had caused my car to shift and hit the kerb. There also appears to be scratch marks to the underside of the car which may have been caused when my car was pushed up the kerb by the impact. It was quite dark and I could not make out any other damages at this point of time. I have an in-vehicle camera inside my car which captured the incident. It showed that a car bearing registration plate number SKF6782A had hit into the left front side of my car. After hitting my car, the car reversed and hit into my neighbour's car, bearing registration plate number SLN582X. I did not manage to speak to the driver of the vehicle, because moved off and parked at another block after the accident. My husband tried to speak to her about the damage, but also did not manage to speak to her personally. She was heard shouting out loud that she can pay for the damages caused. She was then led away by the police.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Police Report



**SINGAPORE
POLICE FORCE**



T/20180615/2018

1 of 3

Report No. T/20180615/2018

Police Station Of Origin:
Bukit Batok N.P.C
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|-------------------------------------|--------------------------|
| Date/Time Report Made: 15/06/2018 03:24 | Vide Report No.: J/20180614/0286 | Station Diary No.: 32 |
|--|-------------------------------------|--------------------------|

Informant's Particulars

| | | | | |
|---|------------|------------------------------|--|----------------------------|
| Name of Informant: SARWANI BINTE MOHAMED SAKUAN | | | Address: APT BLK 315 BUKIT BATOK STREET 32 #01-89 SINGAPORE 650315 | |
| ID Type / ID No.: NRIC NO / S7937459H | | | Contact No.: Home/Office: Mobile: 83181017 | |
| Nationality: SINGAPORE CITIZEN | | | Email: | |
| Sex: Female | Age: 38 | Date of Birth: 06/12/1979 | Type of Informant: Vehicle Owner | |
| Race: Boyanese | | | Language: English | Institution / School Name: |
| Occupation: Admin Exec | | | Driving Licence Information: Class: 3 Date of Expiry: | |

General Information of the Accident

| General Information of the Accident | | | | |
|---|---------------------------|----------------------|--|-------------------------------|
| Type of Accident: | Non-Injury Hit and Run | Drink Drive: No | Date/Time of Accident: 14/06/2018 22:40 | Type of Location: Car Park |
| Location: Along Road 1 BUKIT BATOK STREET 32 | | | | |
| Weather: Clear | | Road Surface: Dry | Road Speed Limit: | |
| Traffic Flow: | | Traffic Control: | Traffic Volume: | |
| Type of Collision: Moving Vehicle Against - Parked Vehicle | | | Anyone conveyed by ambulance: No | |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|------|------|-------|-------|-------------------|-----------------|
| SKF6782A | Car | | | | | 0 |
| SLN582X | Car | | | | | 0 |
| SLW3422H | Car | | | | Seriously Damaged | 0 |

Police Report



**SINGAPORE
POLICE FORCE**



T/20180615/2018

Police Station Of Origin:
Bukit Batok N.P.C
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999

2 of 3

Report No. T/20180615/2018

CONTINUATION OF REPORT

| | | | |
|-----------------------------------|------------------------------|--|---------------------------------|
| Details of Person Involved | | | |
| Any Pedestrian Involved: No | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | |
| Vehicle Owner | | | |
| Name | SARWANI BINTE MOHAMED SAKUAN | ID No. | S7937459H |
| Related Vehicle | SLW3422H (Car) | Contact No. | 83181017 |
| 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.

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Police Report



**SINGAPORE
POLICE FORCE**



T/20180615/2018

3 of 3

Report No. T/20180615/2018

Police Station Of Origin:
Bukit Batok N.P.C
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999

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 /

Sgt 3 AIMAN AMIRUDDIN BIN SODIN

SN H 4

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

15/06/2018 03:24

Officer In Charge Of Case:

TP / HRT /

Sr Staff Sgt ESTHER CHONG

Contact No.: 65476368

Classification Of Case:

Authentication Stamp

NP168