

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	28/06/2018 12:34
Date Of Accident	27/06/2018 09:00
Exact Location Of Accident	JUNCTION OF CANTONMENT LINK/CANTONMENT ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLV9493T
Insured/Policyholder	
Name Of Registered Owner	CHAN CHIOU KIONG @LAI CHIOU KIONG
NRIC No	S1806148A
Email Address	PETER@MAIER.COM.SG
Mobile Phone No	(LOCAL) +65-98527881
Alternative Phone No	OFFICE-98527881

Vehicle Particulars

Manufacturer	TOYOTA
Model	PRIUS
Exact Purpose for which vehicle was being used at time of accident	DRIVING GRAB
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5098099127
Cover Note Number	

Driver

Name of Driver	CHAN CHIOU KIONG @LAI CHIOU KIONG
NRIC No	S1806148A
Date Of Birth	31/05/1967
Occupation	OUTDOOR
Date Of Driving Pass	21/09/1994
Driving Experience	23 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98527881
Fax Number	
Contact Number	OFFICE-98527881
Email Address	PETER@MAIER.COM.SG

Address	BLK 90 TANGLIN HALT ROAD #31-326
Postcode	141090
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	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: : PASSENGER GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ALEXANDRA NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 46-2 COMMONWEALTH DR , POSTCODE: 140462 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4739999 - FAX NO: 64713569
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180627/2172

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	SLP8579T
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)

Accident Sketch Plan

SKETCH PLAN

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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:

28/6/18

Driver's Signature

(If driver is not the policyholder)

Date & Time:

28/6/18

Reporting Centre Personnel's Signature

Name:

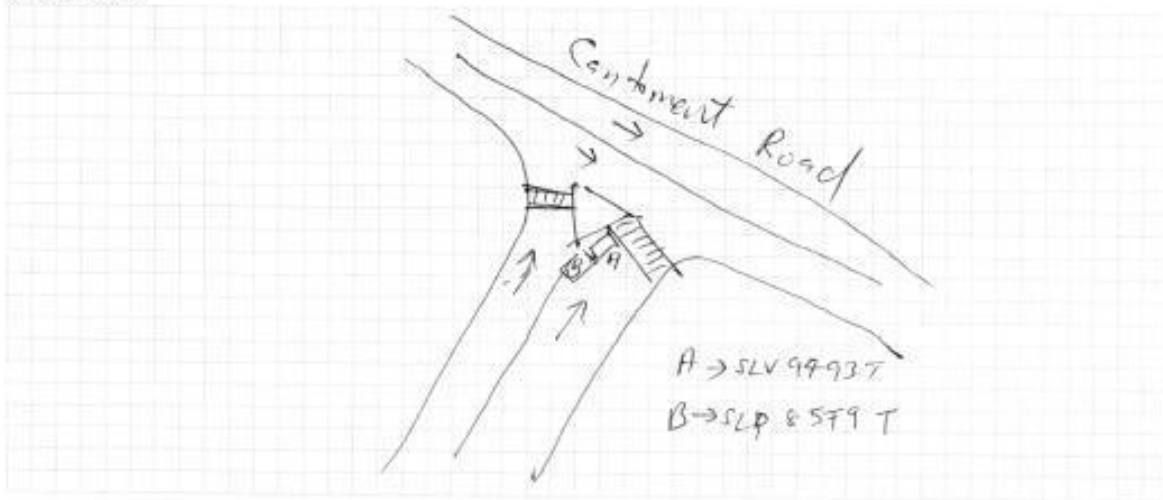
NRIC/FIN No.:

28/06/2018

Roshini Wintars

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS Refer to Police Report
7/20180627/2172

DECLARATION

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

Policyholder's Signature

Date & Time:

28/6/18

Driver's Signature

(If driver is not the policyholder)

Date & Time:

28/6/18

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No:

28/06/2018

Resdi w...

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180627/2172

1 of 3

Police Station Of Origin:
Alexandra NPP
46 Tanglin Halt Road #01-328 SINGAPORE
140462
Tel No: 1800-4739999

Report No. T/20180627/2172

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/06/2018 19:19	Vide Report No.:	Station Diary No.: 47
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Informant's Particulars

Name of Informant: CHAN CHIOU KIONG			Address: APT BLK 90 TANGLIN HALT ROAD #31-326 SINGAPORE 141090	
ID Type / ID No.: NRIC NO / S1806148A			Contact No.: Home/Office: Mobile: 98527881	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 51	Date of Birth: 31/05/1967	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: GRAB DRIVER			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: 27/06/2018 09:00	Type of Location: Bend
Location: Along Road 1 Traveling Toward Road 2 CANTONMENT LINK CANTONMENT ROAD Cantonment Link towards Cantonment Road, before Zebra Crossing				
Weather: Drizzling		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Pedestrian Crossing	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLP8579T	Car	TOYOTA	VIOS	Grey		0
SLV9493T	Car	TOYOTA	PRIUS AUTO	Black	Slightly Damaged	1

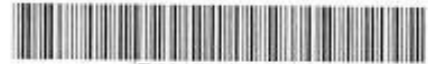
Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLV9493T	NTUC Income Insurance Co-Operative Limited	5098099127	12/02/2018	11/02/2019

POLICE REPORT



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T/20180627/2172

Police Station Of Origin:
Alexandra NPP
46 Tanglin Halt Road #01-328 SINGAPORE
140462
Tel No: 1800-4739999

2 of 3

Report No. T/20180627/2172

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	CHAN CHIEW KIONG	ID No.	S1806148A
Related Vehicle	SLV9493T (Car)	Contact No.	98527881
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 the 27/06/2018, at about 9am, I was driving my vehicle, SLV9493T, along Cantonment Link towards Cantonment Road as I was sending my Grab passenger to International Plaza. Before reaching the zebra-crossing, 01 vehicle, SLP8579T, behind me changed to the right lane. However while the other vehicle change lane, it hit onto my rear bumper and I felt my car shake. I stopped and made a check on my vehicle and discovered scratch mark on my rear right bumper. I notice that the other vehicle did not stop to check and drove off. I then immediately took picture of the other vehicle. The Grab passenger, namely Giffin Lee (Contact: 83136013), also witnessed the whole accident. No one was injured during the whole accident.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20180627/2172

3 of 3

Police Station Of Origin:
Alexandra NPP
46 Tanglin Halt Road #01-328 SINGAPORE
140462
Tel No: 1800-4739999

Report No. T/20180627/2172

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:

D /

Sgt 3 NG YONG XIN, ALESTER

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

27/06/2018 19:19

Officer In Charge Of Case:

TP / HRT /

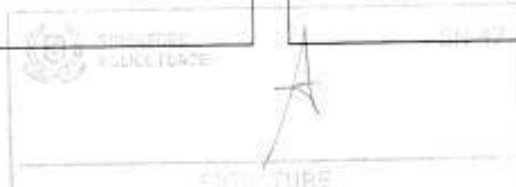
SI ABDUL KAREEM BIN ABDUL HAGUE

Contact No.: 65476079

Classification Of Case:

Authentication Stamp

NP168



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

