

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	21/06/2018 17:30
Date Of Accident	21/06/2018 13:40
Exact Location Of Accident	CARPARK IN FRONT OF BLK 542 SERANGOON NORTH AVE 4
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKR5197H
Insured/Policyholder	
Name Of Registered Owner	TAN PUAY HOE
NRIC No	S1780301H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93691747
Alternative Phone No	OFFICE-93691747

Vehicle Particulars

Manufacturer	MAZDA
Model	3
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	5097344945
Cover Note Number	

Driver

Name of Driver	TAN PUAY HOE
NRIC No	S1780301H
Date Of Birth	13/05/1966
Occupation	INDOOR
Date Of Driving Pass	14/08/1986
Driving Experience	31 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93691747
Fax Number	
Contact Number	OFFICE-93691747
Email Address	NOEMAIL

Address BLK 542 #08-33 SERANGOON NORTH AVENUE 4
 Postcode 550542
 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 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? 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 ANG MO KIO SOUTH NEIGHBOURHOOD POLICE CENTRE
 Police Station Address ROAD: 81 ANG MO KIO AVE 3 , POSTCODE: 569929 , COUNTRY: SINGAPORE
 Police Station Contact TEL NO: 1800-4519999 - FAX NO: 65535679
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

REFER POLICE REPORT (ATTENDED BY: JAMES NG)

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 Witness 1

Name LAWRENCE'S DAUGHTER
 Phone Number 96788193
 Email Address

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBD6868D
 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)



SINGAPORE POLICE FORCE



T/20180621/2149

Police Station Of Origin:
Ang Mo Kio South N.P.C
81 Ang Mo Kio Avenue 3 SINGAPORE
569929
Tel No: 1800-4519999

1 of 3

Report No. T/20180621/2149

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/06/2018 17:09		Vide Report No.:	Station Diary No.: 67
Informant's Particulars			
Name of Informant: TAN PUAY HOE		Address: APT BLK 542 SERANGOON NORTH AVENUE 4 #08-33 SINGAPORE 550542	
ID Type / ID No.: NRIC NO / S1780301H		Contact No.: Home/Office: Mobile: 93691747	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 52	Date of Birth: 13/05/1966	Type of Informant: Vehicle Owner
Race: Chinese		Language: English	Institution / School Name:
Occupation: COMPANY SALES MANAGER		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 21/06/2018 13:40	Type of Location: Car Park
Location: Along Road 1 SERANGOON NORTH AVENUE 4				
Open Carpark infront of Blk 542 Serangoon North Ave 4				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
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
GBD6868D	Lorry					0
SKR5197H	Car	MAZDA	3	Brown	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKR5197H	NTUC Income Insurance Co-Operative Limited	JM6BM42A8F0166 176	12/02/2018	11/02/2019



**SINGAPORE
POLICE FORCE**



T/20180621/2149

Police Station Of Origin:
Ang Mo Kio South N.P.C
81 Ang Mo Kio Avenue 3 SINGAPORE
569929
Tel No: 1800-4519999

3 of 3

Report No. T/20180621/2149

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 /

Sr Staff Sgt NURULHUDA BINTE OMAR

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / HRT /

Sr Staff Sgt ESTHER CHONG

Contact No.: 65476368

Signature Of Informant:

Date/Time:

21/06/2018 17:09

Classification Of Case:

SN 085

Authentication Stamp

NP168



Singapore

Force



**SINGAPORE
POLICE FORCE**



T/20180621/2149

Police Station Of Origin:
Ang Mo Kio South N.P.C
81 Ang Mo Kio Avenue 3 SINGAPORE
569929
Tel No: 1800-4519999

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Report No. T/20180621/2149

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Vehicle Owner			
Name	TAN PUAY HOE	ID No.	S1780301H
Related Vehicle	SKR5197H (Car)	Contact No.	93691747
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 21/06/2018 at 1300hrs, I parked my car SKR5197H at the open space carpark in front of my block, everything was in order.

On 21/06/2018 at 1430hrs, my neighbor Lawrence Hp: 96788193 from unit #08-03 called my wife to inform that his daughter had witnessed lorry GBD6868D had collided with my parked car while reversing and drove off at about 1340hrs. His daughter had also took photos of the lorry which was driven by a male Chinese driver.

The front right bonnet of my car was dented and scratched.

SKETCH PLAN

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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:

21 JUN 2018

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

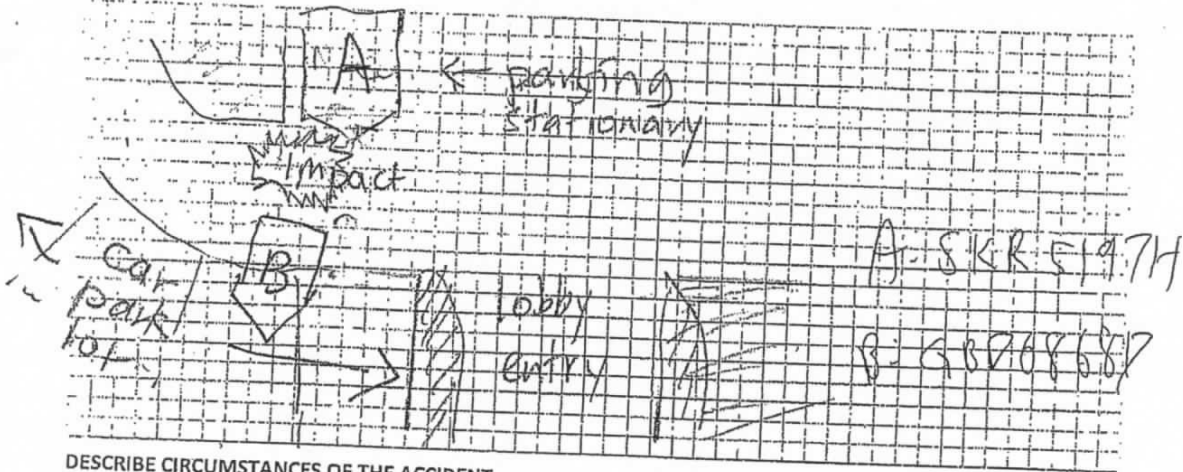
Name:

NRIC/FIN No.:

NG WING KIN JAMES
S7927881E



SKETCH PLAN

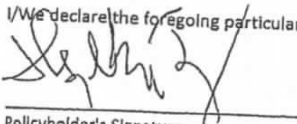


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer
Police
Report

DECLARATION

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



Policyholder's Signature
Date & Time:

21 JUN 2018

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



Reporting Centre Personnel's Signature
Name: NG WING KIN JAMES
NRIC/FIN No.: S7927881E