

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	05/07/2018 16:57
Date Of Accident	04/07/2018 21:50
Exact Location Of Accident	HOLLAND AVENUE HOLLAND VILLAGE OPEN CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKP6766U
Insured/Policyholder	
Name Of Registered Owner	NG LUNG KHENG
NRIC No	S1552364F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97537955
Alternative Phone No	OTHERS-97537955

Vehicle Particulars

Manufacturer	LEXUS
Model	ES300H
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	ETIQA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	M0007593
Cover Note Number	

Driver

Name of Driver	NG WEY KEEN
NRIC No	S9005131H
Date Of Birth	09/02/1990
Occupation	INDOOR
Date Of Driving Pass	22/12/2008
Driving Experience	9 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92964661
Fax Number	
Contact Number	
E Mail Address	WEYKEENNG@GMAIL.COM

Address	26 JALAN LEMPENG #01-08
Postcode	128805
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	-
	-
	-

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 [OTHER]	CLEMENTI N.P.C
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

ATTACHED POLICE REPORT NO. T/20180705/2023

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO WITH OWNER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJH8778B
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)	



SINGAPORE POLICE FORCE



T/20180705/2023

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

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Report No. T/20180705/2023

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/07/2018 10:05		Vide Report No.:		Station Diary No.: 20	
Informant's Particulars					
Name of Informant: NG WEY KEEN			Address: 26 JALAN LEMPENG #01-08 SINGAPORE 128805		
ID Type / ID No.: NRIC NO / S9005131H			Contact No.: Home/Office: Mobile: 92964661		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 28	Date of Birth: 09/02/1990	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Business development executive			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 04/07/2018 21:50	Type of Location: Car Park
Location: Along Road 1 HOLLAND AVENUE Holland village open carpark				
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
SJH8778B	Car					0
SKP6766U	Car	LEXUS		White	Slightly Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

Report No. T/20180705/2023

CONTINUATION OF REPORT

Driver			
Name	NG WEY KEEN	ID No.	S9005131H
Related Vehicle	SKP6766U (Car)	Contact No.	92964661
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 04/07/2018 at about 2130hrs, I parked my vehicle bearing the registration number SKP6766U at the open carpark of Holland Village in one of the parking lot which I could not remember the lot number. On the same night at about 2245hrs, I came back to my vehicle and discovered there was a scratch at my left front side bumper of my vehicle. I then played back my in build car camera and it reveal that on 04/07/2018 at about 2150hrs, there was a vehicle bearing the registration number SJH8778B was doing a reverse parking beside my vehicle. And while doing so, the vehicle had hit onto my left front bumper.

After the hit, the driver came out from his vehicle and made a check and after which, the driver went into his vehicle and reverse into the parking lot beside me. The video also reveal that he went out from his vehicle and about 10 minutes later, he came back and drove off his vehicle. I wish to state that the driver just left without putting any form of notification to indicate that he had hit onto my vehicle. I wish to add on that I had save my SD card which captured the incident.



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POLICE FORCE**



T/20180705/2023

Police Station Of Origin:
Clementi.N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

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Report No. T/20180705/2023

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 MUHAMMAD RAFIQ KHAN BIN DAUD

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / HRT /
SI ABDUL KAREEM BIN ABDUL HAGUE
Contact No.: 65476079

Signature Of Informant:

Date/Time:
05/07/2018 10:05

Classification Of Case:

Authentication Stamp
NP168

SN 37

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:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 05.07.2018

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



SKETCH PLAN

A - SKP 6766 U

B - SJH 8778 B

reverse

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Attached police report no. 7/20180705/2023

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: 05.07.2018

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

