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 <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	25/07/2018 11:55
Date Of Accident	06/07/2018 20:30
Exact Location Of Accident	BLK 53 CHIN SWEE ROAD MCSP
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SLN4916R
Insured/Policyholder	
Name Of Registered Owner	TAN TECK HUAT
NRIC No	S0971258E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93231213
Alternative Phone No	OTHERS-85265546
Vehicle Particulars	
Manufacturer	TOYOTA
Model	HARRIER-2.0 (A)
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	5090830797-01
Cover Note Number	
Driver	
Name of Driver	LOW HOR YEN
NRIC No	S2010819C

Name of Driver

NRIC No

S2010819C

Date Of Birth

Occupation

Date Of Driving Pass

LOW HOR YE

N2010819C

Driving Experience 39 YEARS AND 5 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-85265546

Fax Number

Contact Number OTHERS-93231213

EMail Address NOEMAIL

Address 83 MEYER ROAD

#14-02

Postcode 437910

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle

_

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident NO COLLISION

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

NO

2

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME: : FRIEND

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name BUKIT MERAH WEST NPC

Police Station Address ROAD: 500 BUKIT MERAH VIEW #01-01, POSTCODE: 159682,

COUNTRY: SINGAPORE

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

? NO

Circumstances of Accident

PLEAE REFER TO POLICE REPORT T/20180710/2076

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Remarks/ Reasons: WITH OWNER

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKK8171Z

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

IMPORTANT NOTICE

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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)

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:
 - 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:
 - 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 policywolder)

Date & Time:

Reporting Centre Personnel's Sign

NRIC/FIN No.

Accident Sketch Plan

SKETCH PLAN				
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	P	10/	2076	
	OHERY)	20/801.		
100				
ECLARATION We declare the foregoing	particulars are true in every res	pect.	21/	Sonhu
licyholder's Signature ite & Time:	Driver's Signature (If driver is not the p Date & Time:	policyholder)	Reporting Centre Person Name: NRIC/FIN No.:	ger designature August Works

POLICE REPORT





1001101207

Police Station Of Origin: Bukit Merah West N.P.C 500 Bukit Merah View #01-01 SINGAPORE 159682

159682 Tel No: 1800-3779999 1 of 3 (Report No. T/20180710/2076)

Date/Time Report Made: 10/07/2018 13:36		products and the second second second	Vide Report No.:	Station Diary No.	
Informant	's Particu	lars	LECTOR FORM		
Name of I	nformant:		Address: 83 MEYER ROAD #14-02 S	SINGAPORE 437910	
ID Type / ID No.: NRIC NO / S2010819C			Contact No.: Home/Office:	Mobile: 85265546	
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age:	Date of Birth: 02/05/1954	Type of Informant: Driver		
Race: Chinese			Language: Institution / School		
Occupation: UNEMPLOYED			Driving Licence Information Class: 3	Date of Expiry:	

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 06/07/2018 20:30	Type of Location CARPARK	
Location: Along Road 1 CHIN SWEE OPEN SPAC Weather:	ROAD	2 CHIN SWEE ROAD Road Surface:	F	Road Speed Limit:	
	Drizzling Wet			Traffic Volume:	
the same of the sa		Traffic Control:	17	failic volutile.	
Drizzling Traffic Flow:		Traffic Control:	1	Moderate Anyone conveyed by	

Details of V	ehicle Invo	lved			O - dillon	No of Passance
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
venicle ivo.	1700	THE STATE OF THE S			Slightly	1
SLN4916R	Car				Damaged	1

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

POLICE REPORT



T/20180710/2076

2 of 3

Report No. T/20180710/2076

Police Station Of Origin: Bukit Merah West N.P.C 500 Bukit Merah View #01-01 SINGAPORE

Tel No: 1800-3779999

CONTINUATION OF REPORT

Driver				ID No.		S2010819C
Name	LOW HOR YEN					
				Conta	ct No.	85265546
Related Vehicle	NIL			-50///		introduction (in the control of the
				Class of		Class: 3
Hospital/Clinic	NIL			Driving Licent Expiry	g ce &	Date of Expiry: NIL
			Date Disc	harge	NIL	
Date Treatment	ent NIL			egree of Injury NIL		
No. of Days gran	nted Medical Leave	NIL	Degree o	· injury		

On 09/07/2018 at about 1839hrs, my friend received a phone call from Traffic Police asking me if he had gotten into an accident on 06/07/2018 at the open space carpark of Chin Swee Road. He remembered that we were at the location but we were not aware that we got into any accident. During that day, I was the driver of the vehicle. I was then advised to lodge a police report.

On 06/07/2018 at about 2030hrs, I parked my car at B/52 Chin Swee Road open space carpark, I then left the location to eat dinner at the location and also purchase some groceries at Sheng Shiong Supermarket. I then went back to my car at around 2130hrs and subsequently drove off from the location. At that point of time, I did not find anything amiss.

After the phone call, I then went to check my vehicle and realized that there was a bit of paint scratch mark on the rear left side of my vehicle.

The vehicle I was driving is a white colored Toyota Harrier.

POLICE REPORT





Police Station Of Origin: Bukit Merah West N.P.C 500 Bukit Merah View #01-01 SINGAPORE 159682 Tel No: 1800-3779999 3 of 3 Report No. T/20180710/2076

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 <u>report number</u> as reference.

Signature Of Officer Recording The Report: D / Sgt 2 LIM PEI HAO	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 10/07/2018 13:36
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp NP168	\$11.41

LETTER



Our Ref: MT/CA/TP/001/1003223-001/RD/VU

16 Jul 2018

TAN TECK HUAT BLK 90 #08-432 REDHILL CLOSE SINGAPORE 150090

Dear Policyholder

CLAIM NUMBER: MT/1003223-001 ACCIDENT INVOLVING SLN4916R / SKK8171Z on 6 Jul 2018

We would like to inform you that a claim has been made against your motor policy.

We need to respond to this claim within seven days. We would appreciate it if you could provide us:

- a. additional evidence, if any, such as accident photographs, video clips or witnesses' statement
- b. information on whether you are making a claim against the other party

We wish to remind you that under this motor insurance policy, you are required to report the accident, whether there is damage or not, within 24 hours or the next working day after the accident at any of our reporting centres. If you have not done so, please report this accident to us immediately. Otherwise, we regret to inform you that we may not be able to handle the claim on your behalf.

You need not respond to us if you have already reported the accident and do not have any further information.

We wish to remind you not to admit liability, make offer or payment without informing us and getting our approval. If you are making a claim against another party or have instructed your workshop or lawyers to act on your behalf, please update us on the developments. This is important as any liability undertaken by you may have serious implication on the third party claim against you, and may result in us not being able to handle the claim for you.

If you have any queries, please contact our Customer Service Officers at 6788 6616 or email us at motor@income.com.sg.

Yours sincerely

Goh Peng Hong Manager

Motor Insurance

LETTER



十大.

Traffic Police Singapore Police Force 10, Ubi Avenue 3 Singapore 406865 Tel: 6547 0000

Tel: 6547 0000 Fax: 6547 6259

Date: 10 Jul 2018

Your Ref

Our Ref

: TP/IP/38649/2018

TAN TECK HUAT APT BLK 90 REDHILL CLOSE #08-432 SINGAPORE 150090

交警正在調查一等交通事故.

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Dear Sir / Madam,

CASE OF TRAFFIC ACCIDENT ALONG CHIN SWEE ROAD ON 07 JUL 2018 @ 12.46 AM

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Please be informed that Traffic Police is investigating into the above matter and will update you the status in due course.

- 2 IF you have not lodged a Police Report of a Traffic Accident (NP168) in respect of the said accident which is now required for police investigation, please do so as soon as possible at the nearest police station, Neighbourhood Police Centre (NPC), Neighbourhood Police Post (NPP) or online via Singapore Police Force Electronic Police Centre (http://www.police.gov.sg/epc).
- Please note that the information given by you in the Police Report of a Traffic Accident (NP168) will be carefully considered. You may not be called upon for an interview if the information in the Police Report is sufficient for our investigation. However, if you have any further information or other evidence (such as CCTV footages) which you have not stated in your report and which you think will assist in the investigation, you are advised to contact the Investigation Officer within 2 weeks of this letter to arrange for an appointment.
- 4 You may contact the Investigation Officer SHAHRUL NIZAM at his / her office number; 65476904 or the supervisor MOHD JAMAL BIN MARZUKI at 65476354 if you have any further queries.
- 5 Thank you.

Yours faithfully,

TAN CHEE SING (ASP) CHIEF INVESTIGATION OFFICER INVESTIGATION BRANCH TRAFFIC POLICE

This is computer generated and does not require a signature.

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A FORCE FOR THE NATION



































