

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	25/07/2018 13:28
Date Of Accident	24/07/2018 12:35
Exact Location Of Accident	BLK 415 TAMPINES STREET 44 MSCP
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJG7490S
Insured/Policyholder	
Name Of Registered Owner	FOO CHENG THENG
NRIC No	S0270629F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96812846
Alternative Phone No	OTHERS-96812846

Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH
Exact Purpose for which vehicle was being used at time of accident	STATIONARY PARKED
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	5092548041-01
Cover Note Number	DRIVO CLASSIC (E.W)

Driver

Name of Driver	FOO CHENG THENG
NRIC No	S0270629F
Date Of Birth	25/10/1936
Occupation	INDOOR
Date Of Driving Pass	16/11/1957
Driving Experience	60 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96812846
Fax Number	
Contact Number	OTHERS-96812846
Email Address	NOEMAIL

Address 10 TOH AVENUE
Postcode 508036
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 PASIR RIS NEIGHBOURHOOD POLICE CENTRE
Police Station Address ROAD: 1 PASIR RIS DRIVE 4 , POSTCODE: 519457 , COUNTRY: SINGAPORE
Police Station Contact TEL NO: 1800-5852999 - FAX NO: 65855261
Was notice of intended Prosecution given? NO
If Yes, against whom?

Circumstances of Accident

Refer to police report

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 UNKNOWN
Phone Number 97896047
Email Address AZFAR.HASHIM@GMAIL.COM

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKC5278L
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver UNKNOWN
NRIC/Passport Number
Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

INCIDENT MOTORING REPORT (FORM 1)

Report Date & Start Time: 25-07-2018 13:19

Report No: 511

Date: 24-07-2018

Time: 12:35 hrs

Vehicle No: S1674968

Reporting Type: V

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.

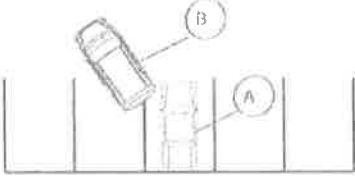

25-07-18 / 13:19
Policyholder's Signature / Date & Time

25-07-18 / 13:19
Driver's Signature (If driver is not the policyholder) / Date & Time

Alan Tang (S098825)
Customer Care Executive
Motor Service Centre

Witnessed by Reporting Centre Personnel

Sketch Plan Pg. 2

SKETCH PLAN



Blk 415 Tampines Street 44 MSCP

Vehicle A: SJG7490S Vehicle B: SKC5278L

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report

Declaration

We declare the foregoing particulars are true in every respect.

 25-07-18 / 13:19
Policyholder's Signature / Date & Time

25-07-18 / 13:19
Driver's Signature (If driver is not the policyholder) / Date & Time

Alan Tang (S098825)
Customer Care Executive
Motor Service Centre

Witnessed by Reporting Centre Personnel



**SINGAPORE
POLICE FORCE**



T/20180725/2032

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

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Report No. T/20180725/2032

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/07/2018 11:30	Vide Report No.:	Station Diary No: 43
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Informant's Particulars

Name of Informant: FOO CHENG THENG			Address: 10 TOH AVENUE SINGAPORE 508036	
ID Type / ID No.: NRIC NO / S0270629F			Contact No.: Home/Office: Mobile: 96812846	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 81	Date of Birth: 25/10/1936	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: Retiree			Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 24/07/2018 12:35	Type of Location: Car Park
Location: Along Road 1 TAMPINES STREET 44 BLK 415 TAMPINES STREET 44 MSCP, LOT 32				
Weather: Clear	Road Surface: Dry	Road Speed Limit:		
Traffic Flow: One Way	Traffic Control: Not Controlled	Traffic Volume: No Traffic		
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
SJG7490S	Car	TOYOTA	WISH 1.8 AUTO	Blue	Slightly Damaged	0
SKC5278L	Car					0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJG7490S	NTUC Income Insurance Co-Operative Limited	5092548041-01	15/07/2018	14/07/2019



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T/20180725/2032

Police Station Of Origin:
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1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

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Report No T/20180725/2032

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	FOO CHENG THENG	ID No.	S0270629F
Related Vehicle	SJG7490S (Car)	Contact No.	96812846
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 24/07/2018 at about 1235hrs, I parked my vehicle bearing the registration number SJG7490S at Blk 415 Tampines Street 44, Lot 32 before going for lunch with my family. There were no cars parked on the left and right side of my car.

At about 1250hrs, I came back to take my car after lunch when a Malay man came forward and gave me a paper stating "Dear owner, at about 12:35pm, a green Toyota Estima plate number SKC5278L, reversed into your front left part of your front bumper and drove off, even after I horned him. You can e-mail me, azfar.hashim@gmail.com". I managed to get his contact number, 97896047. The Malay man did not tell me the description of the driver who hit my car. But he directed me to where the driver parked his car, he brought me to the first deck and I saw the car. I even left a note stating for the owner of the said car to call me at 96812846. However, till date, I did not receive anything from the driver of the said car.

The damages on my vehicle include scratches and slight dents on my front left bumper. I informed my insurance agent and I was advised to make a Police report. I do not have an in-car camera.



**SINGAPORE
POLICE FORCE**



T/20180725/2032

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

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Report No T/20180725/2032

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:
G /
Sgt 2 REGINA LUI YU TING

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
25/07/2018 11:30

Officer In Charge Of Case:
TP / HRT /
SI KALESWARI PALANI
Contact No.: 65476902

Classification Of Case:

Authentication Stamp
NP168

