

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	03/09/2018 15:19
Date Of Accident	01/09/2018 12:35
Exact Location Of Accident	BUYONG RD TWDS CTE BEFORE ORCHARD RD JUNCTION
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLH4338R
Insured/Policyholder	
Name Of Registered Owner	ALL DIRECTION SERVICES
Co Reg No	53345785L
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93693001
Alternative Phone No	OFFICE-93693001

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS 1.6 CVT
Exact Purpose for which vehicle was being used at time of accident	CHAUFFEUR
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5085297931-01
Cover Note Number	

Driver

Name of Driver	HO HUAT HENG
NRIC No	S0153448C
Date Of Birth	04/12/1951
Occupation	OUTDOOR
Date Of Driving Pass	22/07/1971
Driving Experience	47 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-93693001
Fax Number	
Contact Number	OTHERS-93693001
Email Address	NOEMAIL

Address	BLK 601 HOUGANG AVENUE 4 #04-123
Postcode	530601
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	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	YES
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: : NIL GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	HOGANG N.P.C
Police Station Address	ROAD: 60 HOUGANG AVE 9 SINGAPORE 538775 , POSTCODE: 538775 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT : T/20180901/2094

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKJ3823P
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) 2

Passenger 1

NAME: : NIL

GENDER: : FEMALE

DETAILS OF INJURED PERSON 1

Name HO HUAT HENG

Approximate Age

Injuries Sustain SLIGHT

Injured person in which vehicle? SLH4338R

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance?

Address

Postcode

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 (POPA)**

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:

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

... 3/9/2018

Sketch Plan #2

SKETCH PLAN

(A) 3LH 4338 R.
(B) 3KJ 3893 P



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report No:
T/20180901/2094

DECLARATION

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


Policyholder's Signature
Date & Time:


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

~~...~~ 3/9/2018
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20180901/2094

2 of 3

Report No. T/20180901/2094

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

CONTINUATION OF REPORT

Brief Details.

On 01/09/2018 at about 1235hrs, I was driving along Buyong Road and as I was turning along the bend while still in my own lane, one vehicle, SKJ3823P, came from the left lane and cut into the lane I was in and swipe against the side of my vehicle.

The driver then gestured me to stop by the side of the road which I did. When I approached him and asked him to come down, he refused to and drove off.

I managed to get hold of his car plate number.

Due to the accident, the whole left side of my vehicle was being scratched. There was no one injured. There was no police or ambulance at scene.

I have in-built camera installed in the front and rear of my vehicle and it captured the whole incident.

NOTICE OF COMPLIANCE

This is to confirm that Ho Huat Heng (HP: 93693001) NRIC no. S0153448C, has reported to the Police on a non-injury traffic accident which occurred at Buyong Road on 01/09/2018 at about 1235hrs involving the following vehicles: SLH4338R (Informant's vehicle) & SKJ3823P (Other party's vehicle).

If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with compliance under Sec 84(2) of the Road Traffic Act, Cap 276.



Ho Huat Heng
Date: 01/09/2018
S/D: 96
Police Post/Unit: Hougang NPC

Name of Issuing Officer: Sgt T130214 Mark

HOUANG NPC
60 HOUANG AVE 5
SINGAPORE 538775
TEL: 1800-4890999

Original - to be issued to informant
Duplicate - to be retained at police post or unit

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T/20180901/2094

2 of 3

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Police Report



SINGAPORE
POLICE FORCE



T/20180901/2094

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

3 of 3

Report No. T/20180901/2094

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 / Sgt 3 PHUA JIA JUN, MARK 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 01/09/2018 14:30
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp NP168  Signature:  Singapore Police Force	SN 085