### 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	06/09/2018 15:59
Date Of Accident	05/09/2018 16:50
Exact Location Of Accident	JUNC GRANGE RD & PATERSON HILL
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SCH228H
Insured/Policyholder	
Name Of Registered Owner	ERIC LIGA HERMANTO
NRIC No	S2576695D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96351811
Alternative Phone No	OFFICE-96351811
Vehicle Particulars	
Manufacturer	TOYOTA
Model	ALPHARD 2.4A
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	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5045589245-08
Cover Note Number	
Driver	

Name of Driver ERIC LIGA HERMANTO @LIGA HERMANTO

NRIC No S2576695D

Date Of Birth 22/09/1947

Occupation INDOOR

Date Of Driving Pass 23/08/1973

Driving Experience 45 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96351811

Fax Number

Contact Number OFFICE-96351811

EMail Address NOEMAIL

Address 12 MERRYN TERRACE

Postcode 298420

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

-

2

NO

**General Information of the Accident** 

Type Of Accident COLLISION - CROSS JUNCTION

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? NO

Was any injured conveyed to hospital by

ambulance?

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) 1

**Details of Police Action** 

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY

NO

Police Station Address ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY:

SINGAPORE

Police Station Contact TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

**Circumstances of Accident** 

REFER TO POLICE REPORT - T/20180906/2089.

Attachment(s)

Are accident photos available for attachment? YES

Was there any video captured by Car Camera? NO

Was there any audio recorded? NO

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

UNKNOWN

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.
- 6. 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
- 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 (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)
  - (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
- 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.
- 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

for complying with requirements under any regulations, laws or court orders.

holder's Signature

te & Time

Driver's Signature

(If driver is not the policyholder)

Date & Time

Reporting Centre Personnel's Signatur

NRIC/FIN No.:

### **Accident Sketch Plan**

		A. 501422814
		A: SCH2284 B: Unknown
3		
newy 1		
2		
ESCRIBE CIRCUMSTAN		
Hefor to police	report - 1/201809/2019.	
	/	
ECLARATION We declare the foregoing p	articulars are true in every respect.	

### Police Report





Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

1 of 3 Report No. T/20180906/2089

REPORT OF A	TRACEIC	ACCIDENT

	ne Report N 018 15:29	Made:	Vide Report No.:	Station Diary No.:
Informa	nt's Partic	ulars	THE VIEW STREET	
	f Informant: GA HERMA		Address: 12 MERRYN TERRACE	SANNY PARK SINGAPORE 298420
	/ ID No.: O / S25766	95D	Contact No.: Home/Office:	Mobile: 96351811
National INDONE			Email:	
Sex: Male	Age: 70	Date of Birth: 22/09/1947	Type of Informant: Driver	
Race: Chinese	is .		Language: English	Institution / School Name:
Occupat Retiree	ion:		Driving Licence Informati Class: 3	on: Date of Expiry:

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 05/09/2018 16:50	Type of Location: Straight Road	
GRANGE RO ALONG GRA ROAD		TERSON HILL AND I	RWELL BANK ROAD T	WDS BIDEFORD	
Weather:		Road Surface:	R		
		Dry		oad Speed Limit:	
Clear Traffic Flow: One Way Type of Collis		Dry Traffic Control: Not Controlled	1000	raffic Volume:	

Details of V	ehicle Invo	lved	The second second		CALLEGE OF STREET	A STATE OF THE PARTY OF THE PAR
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenge
SCH228H	Car	TOYOTA	ALPHARD	Beige	Condition	0
			2.4A	Doigo		U

Details of Vo	ehicle Insurance	ACCOUNT OF THE PARTY OF	Land St. District	Control -
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SCH228H	NTUC Income Insurance Co-Operative Limited	5045589245-08	05/09/2018	04/09/2019

### **Police Report**





Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 \*\* Report No. T/20180906/2089

### CONTINUATION OF REPORT

Details of Perso	n Involved	5-5207	until and the	Mark S		I SOURCE STORY OF THE
Any Pedestrian I	nvolved: No					
No. of Pedestrian	ns Injured: NIL		Use of Peo	destriar	Cross	ing: NA
Driver		Strain Core		-	. 0.000	The second second
Name	ERIC LIGA HERMA	ANTRO		ID No		S2576695D
Related Vehicle	NIL			Conta	ct No.	96351811
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g ce &	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Disci	The second second	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	

### Brief Details.

ON THE ABOVE MENTIONED DATE TIME AND LOCATION, I WAS AT THE JUNCTION, AND TRAFFIC LIGHT WAS TRAVELLING ALONG THE SAID LOCATION, I WAS AT THE JUNCTION, AND TRAFFIC LIGHT WAS GREEN, SO I PROCEEDED WHEN SUDDENLY A VEHICLE FROM OPPOSITE LEFT SIDE OF THE ROAD HIT ONTO MY LEFT SIDE FRONT PORTIONS, THE VEHICLE DID STOP AND JUST DRIVE OFF TOWARDS RIVER VALLEY ROAD. I DID NOT HAVE THE VEHICLE PLATE NUMBER AND I ONLY KNOW THE VEHICLE BRAND LOOK LIKE (MERCEDES) AND GREY IN COLOUR. THAT'S ALL.

### **Police Report**





Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20180906/2089

CONTINUATION OF REPORT

### Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:	Signature Of Informant:
MUHAMMAD HAZIQ BIN SAIFUDDIN	0
Signature Of Interpreter: Not applicable	Date/Time: 06/09/2018 15:29
	1 1
Officer In Charge Of Case:	Classification Of Case:
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt ESTHER CHONG Contact No.: 65476368	Classification Of Case:

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have





















