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 17:58
Date Of Accident	05/09/2018 21:00
Exact Location Of Accident	INFRONT OF NO:108 KAMPONG JAVA ROAD
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SKJ8977X
Insured/Policyholder	
Name Of Registered Owner	POH GEK CHOO PATRICIA
NRIC No	S1654639I
Email Address	DEBRA.POH.HITOMI@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98505196
Alternative Phone No	OTHERS-87821411
Vehicle Particulars	
Manufacturer	BMW
Model	3281
Exact Purpose for which vehicle was being used at time of accident	CAR WAS PARKED
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	5091682624-01
Cover Note Number	
Dulyan	

Driver

Name of Driver POH GEK CHOO PATRICIA

 NRIC No
 \$1654639I

 Date Of Birth
 12/09/1964

 Occupation
 INDOOR

 Date Of Driving Pass
 04/05/1987

Driving Experience 31 YEARS AND 4 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-98505196

Fax Number

Contact Number OTHERS-87821411

EMail Address DEBRA.POH.HITOMI@GMAIL.COM

12 SPRINGWOOD HEIGHT Address

118000 Postcode

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

1

NO

NO

General Information of the Accident

Type Of Accident HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

Weather Conditions **CLEAR** DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident? NO

Was any body injured in the Accident? NO

Number of vehicles involved in the accident

Was any injured conveyed to hospital by NO ambulance?

Was any other material or property damaged?

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

0 Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name KAMPONG JAVA NEIGHBOURHOOD POLICE CENTRE

ROAD: 21 KAMPONG JAVA ROAD, POSTCODE: 228892, COUNTRY: Police Station Address

SINGAPORE

Police Station Contact TEL NO: 1800-2959999 - FAX NO: 63918499

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180905/2160

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? NO Was there any audio recorded? NO

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
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- 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 liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 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
- (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.

on behalf of Policyholder's Signature

Date & Time

6 SEPT 18

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

SKETCH PLAN MKNOWN C DESCRIBE CIRCUMSTANCES OF THE ACCIDENT DECLARATION I/We declare the foregoing particulars are true in every respect. on behalfot, the. Policyholder's Signature Driver's Signature Date & Time: (if driver is not the policyholder) Name: Date & Time: NRIC/FIN No.:





1 of 3

Police Station Of Origin: Kampong Java N.P.C 21 Kampong Java Road SINGAPORE 228892 Tel No: 1800-2959999

Ipong Java N.P.Č
Report No. T/20180905/2160
Eampong Java Road SINGAPORE

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/09/2018 21:58		fade:	Vide Report No.:	Station Diary No.: 323	
Informan	t's Partice	ulars	Francisco de la compansión de la compans		
Name of Informant: POH DEANNA SAYURI			Address: APT BLK 520 SERANGOON NORTH AVENUE 4 #02-184 SINGAPORE 550520		
ID Type / ID No.: NRIC NO / S9019926I			Contact No.: Home/Office:	Mobile: 81334660	
Nationality SINGAPO	y: DRE CITIZ	EN	Email:		
Sex: Female	Age: 28	Date of Birth: 02/06/1990	Type of Informant: Next of Kin to Car Owner		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: BANKER			Driving Licence Information: Class:	Date of Expiry:	

Type of Accident	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 05/09/2018 21:00	Type of Location Straight Road	
Location: Along Road 1 KAMPONG J					
13.00000000000000		Road Surface: Dry		Road Speed Limit:	
		Traffic Control:		Traffic Volume:	
Traffic Flow: Two Way		Not Controlled		No Traffic	

Details of V	ehicle Invo	lved	E CELEBRATION	Self-September		and the same of
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SKJ8977X	Car	BMW	328	Brown	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Explry Date
SKJ8977X	NTUC Income Insurance Co-Operative Limited	5091682624-01	29/06/2018	28/06/2019





2 of 3

Police Station Of Origin: Kampong Java N.P.C 21 Kampong Java Road SINGAPORE 228892

Report No. T/20180905/2160

Tel No: 1800-2959999

CONTINUATION OF REPORT

Brief Details.

I am lodging this report on behalf of my aunty as she is currently overseas. On the 04/09/2018 at 7.40 am My sister have parked my auntie's, SKJ8977X, along Kampong Java Road in front of my grandmother's house at Number 108. She secured the vehicle and left thereafter.

On the 05/09/2018, at about 9 pm, I returned to my grandmother's house and noticed that there were scratches and a deep dent along the left side of the fender and front passenger car door. At that time there were no vehicles that had just parked or leaving the area.

I then informed my auntie through a text message and she informed me to lodge a police report on her behalf. I believed that another vehicle might have hit onto my auntie's car and fled off. My auntie's car has no in car camera and there is no CCTV on any of the neighbor's house or along the road.





Police Station Of Origin: Kampong Java N.P.C 21 Kampong Java Road SINGAPORE

3 of 3 Report No. T/20180905/2160

228892 Tel No: 1800-2959999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: E / Staff Sgt NURSYAIMA BINTE ABDUL AZIZ	cle's Insurance Certificate to this report. If you die 65474885 stating the report number as refere Signature Of Informant:	nce.
Signature Of Interpreter: Not applicable	Date/Time: 05/09/2018 21:58	
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt ESTHER CHONG Contact No.: 65476368	Classification Of Case;	
Authentication Stamp	SN 167	

































