

## 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	26/06/2018 10:23
Date Of Accident	25/06/2018 18:55
Exact Location Of Accident	UBI ROAD 1
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG1938J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	NEO SHIH SIANG (LIANG XINXIANG)
NRIC No	S7214358B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91418938
Alternative Phone No	OTHERS-90121966

### Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS
Exact Purpose for which vehicle was being used at time of accident	ENGINE SWITCHED OFF, STATIONARY BY THE ROAD SIDE
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	5094394014
Cover Note Number	DRIVO PREMIUM

### Driver

Name of Driver	EE CHENG HOH
NRIC No	S7271717A
Date Of Birth	01/06/1972
Occupation	INDOOR
Date Of Driving Pass	07/07/1994
Driving Experience	23 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90121966
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 310 #14-123 CANBERRA ROAD
Postcode	750310
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	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)	2
Passenger 1	NAME: : PASSENGER GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	SEMBAWANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 4 SEMBAWANG CRESCENT , POSTCODE: 757633 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5549999 - FAX NO: 68522499
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

My vehicle A was stationary by the roadside, engine switched off and hazard light on. After about 2 minutes, I realised that vehicle B sounded it's horn and high beam at me. Just then, vehicle B drove past my vehicle A on my right and side swiped into the right wing mirror of my vehicle A. Vehicle B slowed down after collision but sped off thereafter without stopping. I tried to catch up with vehicle B at the nearby traffic light but driver of vehicle B turned left and went off.

#### 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 OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC1926L
Vehicle Make/Model/Colour	BLUE COMFORT TAXI
Details Of Properties	
Vehicle Category	TAXI
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

INCOME MOTOR SERVICE CENTRE

Report Date & Start Time: 26-06-2018 / 10:17

Report No: MT/

D.O.A: 25-06-2018

Vehicle No: SLG1938J

Reporting Type:

Time: 2 hrs

### SKETCH PLAN

#### IMPORTANT NOTICE

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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 interested parties.
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) 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.

26-06-18 / 10:17

Policyholder's Signature / Date & Time

26-06-18 / 10:17

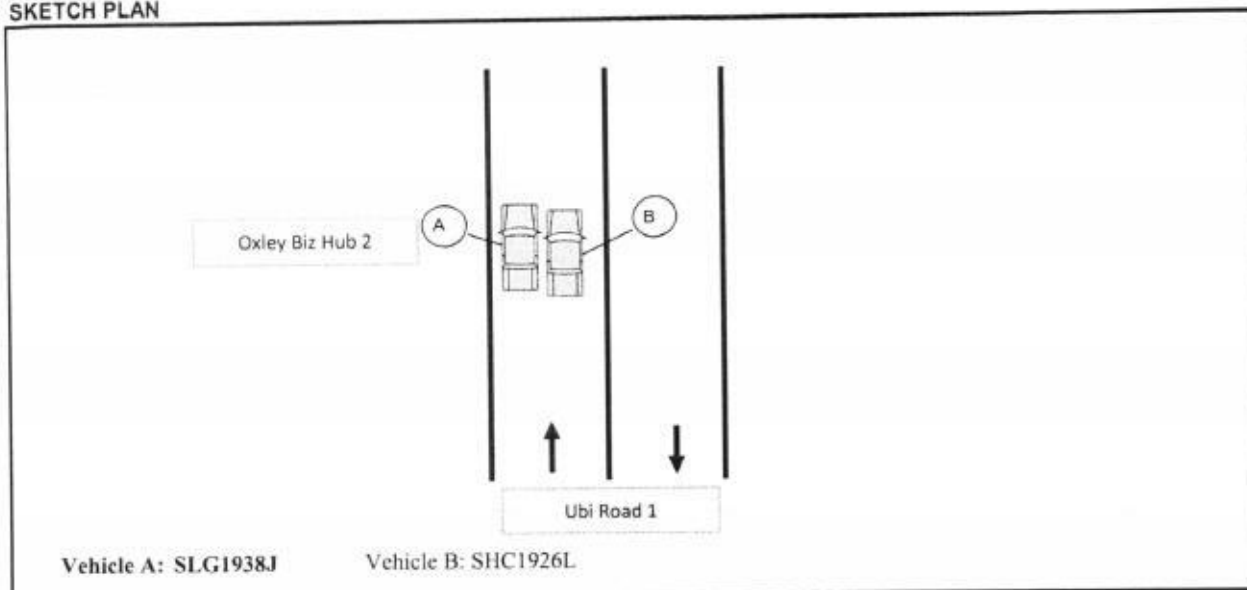
Driver's Signature (If driver is not the policyholder) / Date & Time

Alan Tang (S098825)  
Customer Care Executive  
Motor Service Centre

Witnessed by Reporting Centre Personnel

## Sketch Plan Pg. 2

### SKETCH PLAN




### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My vehicle A was stationary by the roadside, engine switched off and hazard light on. After about 2 minutes, I realised that vehicle B sounded its horn and high beam at me. Just then, vehicle B drove past my vehicle A on my right and side swiped into the right wing mirror of my vehicle A. Vehicle B slowed down after collision but sped off thereafter without stopping. I tried to catch up with vehicle B at the nearby traffic light but driver of vehicle B turned left and went off.


### Declaration

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

26-06-18 / 10:17  
Policyholder's Signature / Date & Time

  
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/20180626/2121

1 of 3

Police Station Of Origin:  
Sembawang N.P.C  
4 Sembawang Crescent SINGAPORE  
757633  
Tel No: 1800-5549999

Report No. T/20180626/2121

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 26/06/2018 16:10	Vide Report No.:	Station Diary No.: 60
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**Informant's Particulars**

Name of Informant: EE CHENG HOH			Address: APT BLK 310 CANBERRA ROAD #14-123 SINGAPORE 750310		
ID Type / ID No.: NRIC NO / S7271717A			Contact No.: Home/Office:		Mobile: 90121966
Nationality: MALAYSIAN			Email:		
Sex: Male	Age: 46	Date of Birth: 01/06/1972	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: GRAB DRIVER			Driving Licence Information: Class: 2B,3		Date of Expiry:

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 25/06/2018 18:55	Type of Location: Straight Road
Location: Along Road 1 UBI ROAD 1				
Near entrance of Oxley Biz Hub 2				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHC1926L	Taxi	HYUNDAI				0
SLG1938J	Car	TOYOTA	Altis	Red	Slightly Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLG1938J	NTUC Income Insurance Co-Operative Limited	5094394014	21/09/2017	22/09/2018



**SINGAPORE  
POLICE FORCE**



T/20180626/2121

2 of 3

Police Station Of Origin:  
Sembawang N.P.C  
4 Sembawang Crescent SINGAPORE  
757633  
Tel No: 1800-5549999

Report No. T/20180626/2121

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	EE CHENG HOH	ID No.	S7271717A
Related Vehicle	SLG1938J (Car)	Contact No.	90121966
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,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 25/06/2018 at about 1855hrs, I had stopped my vehicle, SLG1938J, by the road side along Ubi Road 1 to check my handphone. I had switched off my engine and also turned on my hazard light. Subsequently, one vehicle, SHC1926L, honked towards me and then high beam towards me. The said vehicle was on the same lane as me and as it is a wide road, I thought he could drive pass me. However, as he was driving pass my vehicle, he side swiped onto my right side mirror. The said driver had initially slowed down however he continued to drive afterwards. I immediately alighted from my vehicle to try and gave chase as I saw the vehicle had stopped at the nearby traffic light. I had also shouted for the driver to stop however to no avail. However, the light turned green and the vehicle continued driving. The side mirror cover is damaged and a partial of the side signal light cover was broken. I am unsure on the cost of damage.





**SINGAPORE  
POLICE FORCE**



T/20180626/2121

3 of 3

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4 Sembawang Crescent SINGAPORE  
757633  
Tel No: 1800-5549999

Report No. T/20180626/2121

**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 /

Staff Sgt FATIN AZRIN BINTE AHAD

Signature Of Interpreter:

Not applicable

Signature Of Informant:

Date/Time:

26/06/2018 16:10

Officer In Charge Of Case:

TP / HRT /

Sr Staff Sgt ESTHER CHONG

Contact No.: 65476368

Classification Of Case:

SN 085

Authentication Stamp  
NP168



Signature:

**Singapore Police Force**