## SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Mobile Number

Fax Number
Contact Number

**EMail Address** 

- 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 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 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	29/11/2018 13:53
Date Of Accident	07/09/2018 13:05
Exact Location Of Accident	ANG MO KIO AVENUE 1
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJL6895M
Insured/Policyholder	
Name Of Registered Owner	MOTORWORLD
Co Reg No	53001497A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98154856
Alternative Phone No	OFFICE-98154856
Vehicle Particulars	
Manufacturer	FIAT
Model	_
Exact Purpose for which vehicle was being used at time of accident	WORK
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
Fleet Policy	NO
Policy Number	5047885688-07
Cover Note Number	
Driver	
Name of Driver	LIONG SING YUIN
NRIC No	S0389830Z
Date Of Birth	22/03/1938
Occupation	INDOOR
Date Of Driving Pass	28/01/1961
Driving Experience	57 YEARS AND 7 MONTHS
Gender	MALE

(LOCAL) +65-98154856

OTHERS-98154856

**NOEMAIL** 

**BLK 403 FAJAR ROAD** Address

#09-253

Postcode 670403

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

**General Information of the Accident** 

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

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?

NO

YES Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO 1

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 **BUKIT PANJANG** 

Police Station Address ROAD: 1 SEGAR ROAD, POSTCODE: 677738, COUNTRY: SINGAPORE

Police Station Contact **TEL NO**: 1800-8929999 - **FAX NO**:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

**Circumstances of Accident** 

PLS REFER TO THE POLICE REPORT: T/20181129/2030

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

PC3216U

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category **BUS** 

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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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.
- 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.
- 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 insurers) 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:
  - 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:

Name: NRIC/FIN No.:

Reporting Centre Personnel's Sig

Page 4 of 13

Commercial Commercial

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We declare the foregoing particu	1.			9/4/20
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licyholder's Signature (N: 5300)	Driver's Signature	Report	ing Centre Personnel's Sign	A STATE OF THE STA
te & Time:	(If driver is not the policyho	(der) Name:		
	Date & Time:	NRIC/F	IN No.:	





Police Station Of Origin: Bukit Panjang N.P.C 1 Segar Road #01-05 SINGAPORE 677738 Tel No: 1800-8929999

2 of 3 Report No. T/20181129/2030

# CONTINUATION OF REPORT

Driver	The Control of the Co		ARREST MISSES	ANDLE		
Name	LIONG SING YUIN			ID No		S0389830Z
Related Vehicle	SJL6895M (Car)			Conta	ct No.	98154856
Hospital/Clinic	NIL			Class Drivin Licend Expire	g	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc	the same of the sa	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	

#### Brief Details.

My son namely, Liong Soon Kwong HP: 92728855 is the owner of the car bearing SJL6895M (Blue coloured 'Fiat' vehicle). On 7th September 2018, I was instructed by my son to drive the vehicle to Sungei Kadut.

On 7th September 2018 between morning to afternoon, I picked my son's vehicle from Ang Mo Kio Avenue 1 Carpark (Unknown block number). I then proceed straight to Sungei Kadut to send the car for scrapping.

I do not remember the route that I took to go Sungei Kadut however I affirmed that I was not involved in any accident. It was a smooth journey throughout and I did not hear any horn sounded at me. Upon arriving at Sungei Kadut, I went to Kheng Keng Auto shop and left the said vehicle there. Afterwards my son picked me up. I affirmed that my son's vehicle does not have any damages. There is no camera

On 15th November 2018, my son received a letter from the Traffic Police reference: TP/IP/52365/2018 to inform him that there was an alleged Hit-And-Run accident involving my son's vehicle and a vehicle bearing PC3216U along Ang Mo Kio Avenue 1 at about 1305hrs. I was the driver during that point of time.

9/7/2018 DeRen At FSA

#### Deregister Temp Transfer Vehicle (Acknowledgement) Vehicle Details

Vehicle No.: SJL6895M

ZFA22300005579096 Chassis No.: Engine No.: 350A10004169498

Deregistration Details

Deregistration Reason: Apply PARF Deregistration Date: 07 Sep 2018 Update Disposal Details 07 Oct 2018 Expiry Date:

Rebate Details

PARF Rebate No./Amount: 1916700QP0000 / \$7,332.00

COE Rebate No./Amount: -

Transaction Details

Business Transaction Ref. 20180907221226447814

Business Transaction Date: 07 Sep 2018 Business Transaction Time: 22:12:26

The above vehicle has been successfully deregistered. Please note that any PARF/COE rebate(s) generated are not allowed to be used until the vehicle has been fully disposed of.

OK

9/7/2018

DeReg At ESA

### Deregister Temp Transfer Vehicle (Confirmation) Vehicle Details

SJL6895M (Temporary Transfer)

First Registration Date: 09 Dec 2008

FIAT

Vehicle Make: Vehicle Model:

DOBLO PANORAMA 14 M ACTIVE

Chassis No:

ZFA22300005579096

Erigine No.:

350A10004169498

IU Label No...

1122637903

Propellant:

Petrol

Road Tax Expiry Date: 08 Dec 2018

Tomporary Start Date: 07 Sep 2018

Temporary End Date:

06 Dec 2018

Deregistration Details

Deregistration Reason: Apply PARF

Deregistration Date:

07 Sep 2018

Amount Payable

Road Tax to be Refunded: \$153.00

Previous

Confirm

Cancel





# Police Report





Police Station Of Origin: Bukit Panjang N.P.C 1 Segar Road #01-05 SINGAPORE 677738 Tel No: 1800-8929999

1 of 3 Report No. T/20181129/2030

## REPORT OF A TRAFFIC ACCIDENT

	ne Report N )18 11:10	/lade:	Vide Report No.:	Station Diary No. 88	
Informa	nt's Partic	ulars	PRODUCTION OF THE PARTY.		
100000000000000000000000000000000000000	Informant: SING YUIN		Address: APT BLK 403 FAJAR ROA	AD #09-253 SINGAPORE 670403	
	/ ID No.: D / S03898	30Z	Contact No.: Home/Office: Mobile: 98154856		
National SINGAP	ity: ORE CITIZ	EN	Email:		
Sex: Male	Age: 80	Date of Birth: 22/03/1938	Type of Informant: Driver		
Race: Chinese			Language: Institution / School N		
Occupat UNEMP			Driving Licence Information Class: 2B,2A,2,3	Date of Expiry:	

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 07/09/2018 13:05	Type of Location Straight Road
Location: Along Road 1 ANG MO KIO Weather:		Road Surface:	R	oad Speed Limit:
Clear		Dry	5	0 Km/h
ACMEDITATION CONTRACTOR CONTRACTO		Traffic Control:	T	raffic Volume:
Traffic Flow: One Way		Not Controlled	30	loderate

Details of V	ehicle Involved			THE REAL PROPERTY.	He W	A STATE OF THE PARTY OF THE PAR
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
PC3216U	Bus/Coach/Mi nibus					0
SJL6895M	Car	FIAT		Blue	No Damage	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

#### **Police Report**





Police Station Of Origin: Bukit Panjang N.P.C 1 Segar Road #01-05 SINGAPORE 677738 Tel No: 1800-8929999

2 of 3 Report No. T/20181129/2030

CONTINUATION OF REPORT

Driver	On the Section of Section 19	1 2 3 3 1 1	10-17-17 HILLS	-		
Name	LIONG SING YUIN			ID No	).	S0389830Z
Related Vehicle	SJL6895M (Car)			Conta	ect No.	98154856
Hospital/Clinic	NIL			Class Drivin Licen Expin	g	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	

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## **Police Report**





Police Station Of Origin: Bukit Panjang N.P.C 1 Segar Road #01-05 SINGAPORE 677738 Tel No: 1800-8929999

3 of 3 Report No. T/20181129/2030

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.

/ *
/Time: 1/2018 11:10
sification Of Case:
40