

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 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	07/01/2019 13:46
Date Of Accident	06/01/2019 11:00
Exact Location Of Accident	BLK 668 CHANDER ROAD CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SME2876X
Insured/Policyholder	
Name Of Registered Owner	MATCHING CARS SERVICES
Co Reg No	53253668A
Email Address	AHZI0119@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90903233
Alternative Phone No	OFFICE-98856147

Vehicle Particulars

Manufacturer	HONDA
Model	FIT-1.3 G F-PACKAGE (A)
Exact Purpose for which vehicle was being used at time of accident	
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	5091942894-01
Cover Note Number	

Driver

Name of Driver	YANG YANG
Passport No/FIN	G1510261L
Date Of Birth	20/01/1992
Occupation	INDOOR
Date Of Driving Pass	13/07/2017
Driving Experience	1 YEAR AND 5 MONTHS
Gender	MALE
Mobile Number	+65-97743276
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	50 NANYANG CRES 07-44
Postcode	637598
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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 (including own vehicle) involved in the accident	
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO TRAFFIC POLICE REPORT T/20190106/2042

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	SLH9249G
Vehicle Make/Model/Colour	TOYOTA CAMRY
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)	

SKETCH PLAN

Blk 668
Chander Road
Chaparral

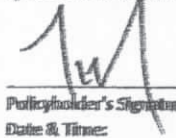
A: SME 2870X (SME 10/1/11 - PXP 1/1/11)
B: SLH9249G

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

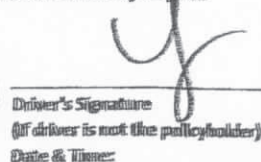
Refer to Traffic Police Report T/20190106/2042.

DECLARATION

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


Policyholder's Signature
Date & Time:




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


Reporting Centre Personnel's Signature
Name: Stephanie Lin
ARAC/FDS No.:

GLS/ATC Sketch Plan Form V3

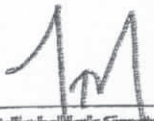


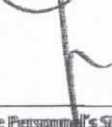
SKETCH PLAN

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 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. 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, regulations, 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: Stephanie Lin NAME/ID No.:
---	---	--	---



**SINGAPORE
POLICE FORCE**



T/20190106/2042

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

1 of 3

Report No. T/20190106/2042

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/01/2019 13:03		Vide Report No.:		Station Diary No.: 49
Informant's Particulars				
Name of Informant: YANG YANG		Address: 17 JURONG WEST AVENUE 5 #07-28 SINGAPORE 649491		
ID Type / ID No.: FIN NO / G1510261L		Contact No.: Home/Office: Mobile: 97743276		
Nationality: CHINESE		Email:		
Sex: Male	Age: 26	Date of Birth: 20/01/1992	Type of Informant: Vehicle Owner	
Race: Chinese		Language:	Institution / School Name:	
Occupation: RESERCHER		Driving Licence Information: Class: 2A Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 06/01/2019 11:00	Type of Location: Car Park
Location: Along Road 1 BELILIOS ROAD BLK 668 CARPARK				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Colour	Condition	No. of Passengers
SLH9249G	Car					0
SME2876X	Car				Slightly Damaged	0

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



**SINGAPORE
POLICE FORCE**



T/20190106/2042

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

2 of 3

Report No. T/20190106/2042

CONTINUATION OF REPORT

Vehicle Owner			
Name	YANG YANG		ID No. G1510261L
Related Vehicle	SME2876X (Car)		Contact No. 97743276
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 2A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 06/01/2018 at about 1100hrs, I parked my vehicle bearing the registration number SME2876X at parking lot number 24 at block 668 Chander Road. My vehicle was parked head in. On 06/01/2018 at about 1125hrs, upon returning to my vehicle, I was informed by 01 male subject Indian, Male(unknown name and contact number) that earlier at about 1100-1120hrs, 01 vehicle-bearing the registration number SLH9249G collided with the rear right side of my vehicle while the vehicle was trying to park beside my lot. The vehicle SLH9249G subsequently reverse and left the carpark without making a check after the driver realized that he had collided with my vehicle.

I made a check on my vehicle and it sustained scratches and dent at the rear right side of my vehicle where the right rear wheel was located at. I wish to state that there is CCTV camera installed at the car park. This was the first time such incident happened. I do not have any suspect in mind.



**SINGAPORE
POLICE FORCE**



T/20190106/2042

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

3 of 3

Report No. T/20190106/2042

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:

J/

Sgt 1 SOH XUAN YI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

06/01/2019 13:03

Officer In Charge Of Case:

TP / HRT /

SI KALESWARI PALANI

Contact No.: 65476902

Classification Of Case:



[> Back to OneMotoring](#)

Enquire Transfer Fee

Enquire Transfer Fee

Vehicle Details			
Vehicle No. :	SME2876X		
Vehicle Type :	R11 - Private Hire (Self-Drive) Station Wagon/Jeep/Land Rover		
Vehicle Attachment 1 :	No Attachment		
Vehicle Scheme :	Normal		
Vehicle Make :	HONDA		
Vehicle Model :	FIT 1.3G F- PACKAGE		
Chassis No. :	GK31045371		
Propellant :	Petrol		
Engine No. :	L13B1054176		
Engine Capacity :	1317 cc		
Maximum Power Output :	73.0 kW (97 bhp)		
Maximum Laden Weight :	1295 kg		
Unladen Weight :	1020 kg		
Year Of Manufacture :	2014		
Original Registration Date :	16 Oct 2014		
Lifespan Expiry Date :	-		
COE Category :	A - Car up to 1600cc & 97kW (130bhp)		
Quota Premium :	\$63,880.00		
COE Expiry Date :	15 Oct 2024		
Road Tax Expiry Date :	15 Apr 2019		
PARF Eligibility Expiry Date :	15 Oct 2024		
Inspection Due Date :	15 Oct 2019		
Intended Transfer Date :	07 Jan 2019		
CO2 Emission :	132.00 (g/km)		
CEV/VES Rebate Utilised Amount :	\$8,112.00		
CO Emission :	-		
HC Emission :	-		
NOx Emission :	-		
PM Emission :	-		
Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use Enquire Road Tax Payable for fee(s) payable.			
Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.			
Amount Payable			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee :	25.00	-	25.00
Total Amount Payable :			25.00

You may print this page for reference.

[OK](#)
[Print](#)