

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	03/01/2019 14:47
Date Of Accident	10/12/2018 13:30
Exact Location Of Accident	TAMPINES RD (OPEN CARPARK AT HEARTLAND MALL)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJQ9459T
Insured/Policyholder	
Name Of Registered Owner	TAN CHIN HIN (CHEN ZHENXING)
NRIC No	S7341550J
Email Address	SAM563_@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-87192978
Alternative Phone No	OTHERS-87192978

Vehicle Particulars

Manufacturer	HONDA
Model	ACCORD 2.4L
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5088377865-01
Cover Note Number	

Driver

Name of Driver	CHEN WEIMING SAM
NRIC No	S9018019C
Date Of Birth	30/05/1990
Occupation	INDOOR
Date Of Driving Pass	27/06/2013
Driving Experience	5 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87192978
Fax Number	
Contact Number	OTHERS-87192978
Email Address	NOEMAIL

Address	BLK 25 HOUGANG AVENUE 3 #10-448
Postcode	530025
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - BROTHER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO PARKED VEHICLE
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	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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	HOGANG N.P.C
Police Station Address	ROAD: 60 HOUGANG AVE 9 SINGAPORE 538775 , POSTCODE: 538775 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT : T/20181217/2212

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	SMA7293R
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)

Sketch Plan

SKETCH PLAN

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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.

Policyholder's Signature
Date & Time:

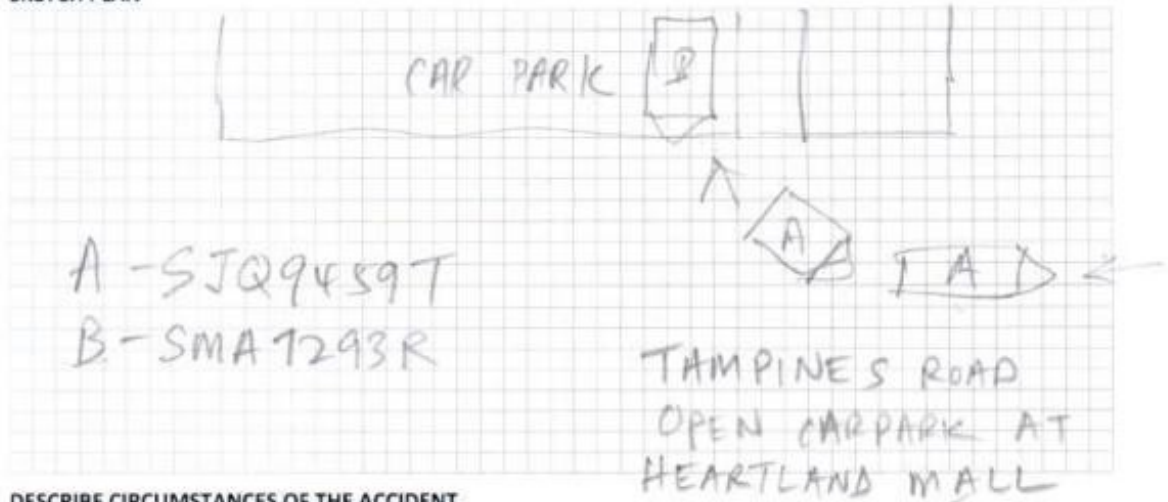
Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

01/01/2019 10:00 AM

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

plc Refer to the Police Report
T/20181217/2212

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:
NRIC/FIN No.:

SPR0008, 20180401/0001/0001/0001

 **SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No. T/20181217/2212

2 of 3

CONTINUATION OF REPORT

Driver Name	CHEN WEIMING SAM	ID No.	S9018019C
Related Vehicle	SJQ9459T (Car)	Contact No.	87192978
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Medical Treatment	NIL	Date Discharge	NIL
Days granted Medical Leave	NIL	Degree of Injury	NIL

Details.
 10/12/2018 at about 2000hrs, my brother told me that I was involved in an accident while driving h
 10/12/2018. He was notified by a letter from Traffic Police and told me to lodge an accident re
 s I know I did not remember getting into an accident on 10/12/2018.

Policyholder

1 NUMBER: MT/1023786-001
ACCIDENT INVOLVING SJQ9459T / SMA7293R on 10 Dec 2018

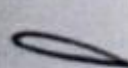
refer to our letter of 13 Dec 2018.

have yet to receive your report on the accident. We would like to inform you that under your motor insurance policy, you have to report within 24 hours or the next working day after the accident, even if there is no damage to your vehicle. If you have not done so, please report the accident to any of our reporting centres immediately. Otherwise, we may not be able to handle the claim on your behalf.

we reserve the rights to seek recovery from you and/or your driver if we are bound by law or statute to settle the third party injury claim.

If you have any queries, please contact Serene Lim at 6430 7926 or email us at motor@income.com.sg

sincerely



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo




Accident Photo



Police Report

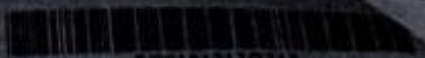
SINGAPORE POLICE FORCE		Barcode				
Police Station Of Origin Hougang N.P.C. 60 Hougang Avenue 9 SINGAPORE 538775 Tel No. 1800-4890999		Report No. 1501812799012				
REPORT OF A TRAFFIC ACCIDENT						
Date/Time Report Made 17/12/2018 22:26		Vide Report No.				
Station Diary No. 193						
Informant's Particulars						
Name of Informant CHEN WEIMING SAM		Address APT BLK 25 HOUGANG AVENUE 3 #10-448 SINGAPORE 530025				
ID Type / ID No. NRIC NO / S9018019C		Contact No. Home/Office: Mobile: 87192978				
Nationality SINGAPORE CITIZEN		Email:				
Sex: Male	Age: 28	Date of Birth: 30/05/1990	Type of Informant: Driver			
Race: Chinese	Language: English		Institution / School Name:			
Occupation: UNEMPLOYED	Driving Licence Information: Class 3		Date of Expiry:			
General Information of the Accident						
Type of Accident: Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 10/12/2018 13:30	Type of Location: Car Park			
Location: Along Road 1 TAMPINES ROAD						
Open carpark at Heartland Mall						
Weather:	Road Surface: Dry	Road Speed Limit:				
Traffic Flow:	Traffic Control:	Traffic Volume:				
Type of Collision:	Anyone conveyed by ambulance: No					
Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passen
SJQ9459T	Car	HONDA	Accord	Black		0
SMA7293R	Car					0
Details of Person Involved						
Any Pedestrian Involved: No						
No. of Pedestrians Injured: NIL				Use of Pedestrian Crossing: NA		

Police Report



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999



T/20181217/2212

2 of 3

Report No: T/20181217/2212


CONTINUATION OF REPORT

Driver:			
Name	CHEN WEIMING SAM	ID No.	S9018019C
Related Vehicle	SJQ9459T (Car)	Contact No.	87192978
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Medical Treatment	NIL	Date Discharge	NIL
Days granted Medical Leave	NIL	Degree of Injury	NIL

Details:

12/2018 at about 2000hrs, my brother told me that I was involved in an accident while driving h
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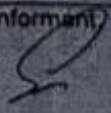
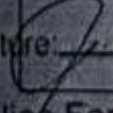
Police Report

 **SINGAPORE POLICE FORCE**
Police Station Of Origin:
Sembawang P. S. C.
60 Sembawang Avenue 2 SINGAPORE 556778
Tel No: 1800-4890999


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 MUHAMMAD SABRIL AMIN BIN SURAMIN	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 17/12/2018 22:26
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt TAN JEOK LENG Contact No: 65476144	Classification Of Case: 

Authentication Stamp
VP168

 **Singapore Police Force**