### SINGAPORE ACCIDENT STATEMENT

# IMPORTANT NOTICE

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	31/12/2018 18:07	
Date Of Accident	30/12/2018 19:10	
Exact Location Of Accident	638C PUNGGOL DRIVE SERVICE ROAD	
Country/State of Loss	SINGAPORE	
C	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLJ510A	
Insured/Policyholder		
Name Of Registered Owner	GOH LIANG MENG	
NRIC No	S7629442I	
Email Address	MERWINGOH@GMAIL.COM	
Mobile Phone No	(LOCAL) +65-92423591	
Alternative Phone No	OTHERS-92423591	
Vehicle Particulars		
Manufacturer	JAGUAR	
Model	XE 2.0 I4D TSS	
Exact Purpose for which vehicle was being used at time of accident	PRIVATE	
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	SOMPO INSURANCE SINGAPORE PTE. LTD.	
Type Of Coverage	COMPREHENSIVE	
Fleet Policy	NO	
Policy Number	D18MTPV01014695	
Cover Note Number	N.A	
Driver		
Name of Driver	GOH LIANG MENG	
NRIC No	S7629442I	
Date Of Birth	15/09/1976	
Occupation	INDOOR	
Date Of Driving Pass	27/05/1995	
Driving Experience	23 YEARS AND 7 MONTHS	
Gender	MALE	
Mobile Number	+65-92423591	
Fax Number	and the fall	

OTHERS-92423591

MERWINGOH@GMAIL.COM

Address

NIL

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

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### **General Information of the Accident**

Type Of Accident

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

Weather Conditions

CLEAR

Road Surface

WET

# 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

NO

ambulance?

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 Police Report Ref: T/20181230/2084 lodged at Punggol NPC. On the 30/12/2018 at about 1945hrs, I walked back to my vehicle that was parked along the service road, near Blk 638C, Punggol Drive, and I noticed two dents on both doors on the driver's side of my car. I decided to view the in car camera and I saw a comfort delgro taxi, reversing into my car and drive off. The Comfort Delgro taxi number is visible partially is SH774. I will be contacting Comfort Delgro to check with them on the vehicle number of the taxi. The driver did not leave any number or note to let me know of the accident that occurred.

### Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

# **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number

SH7748M

Vehicle Make/Model/Colour

HYUNDA I40 1.7 CRDI F/L

**Details Of Properties** 

HIT AND RUN

Vehicle Category

TAXI

Name of Driver

Mairie di Dilvei

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

### SKETCH PLAN

### IMPORTANT NOTICE

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- 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 insurance companies.

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  7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the dentire and to copies of the report being made available afforcased.
- 8. Consent under the Personal Data Protection Act (PDPA)

Consent under the Personal Data Protection Act (PUPA)
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 at insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the 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/suthority (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:

- (ii) 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
  (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 Insuers and/or GIA to their third party service providers or agents
- (including they lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

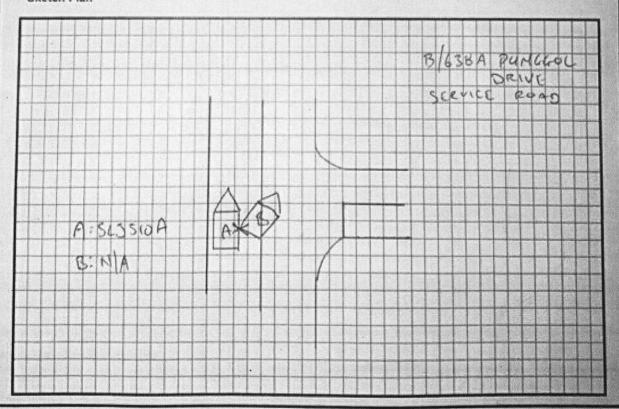
**VERIFIED BY AJAX MARS** REPORTING OFFICER

> Muhammad Faizal Bin Pabila

Policyholder's Signiture | Date & Time | Driver's Signature (If driver is not the policyholder) / Date & Time | Witnessed by Reporting Centre

Personnel

# Sketch Plan







1 of 3

Report No. T/20181230/2084



Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999

Date/Time Report Made: 30/12/2018 21:12		fade:	Vide Report No.:	Station Diary No. 78
Informat	nt's Partici	itars		
	Informant: NG MENG		Address: APT BLK 213A PUNGGO 821213	DL WALK #13-745 SINGAPORE
ID Type / ID No.: NRIC NO / S7629442!		121	Contact No.: Home/Office:	Mobile: 92423591
National SINGAP	ity: ORE CITIZ	EN	Email:	
Sex: Male	Age: 42	Date of Birth: 15/09/1976	Type of Informant: Driver	
Race: Chinese			Language;	Institution / School Name:
Occupation: Information technology project manager		ogy project	Driving Licence Information Class:	Date of Expiry:

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 30/12/2018 19:10	Type of Location Straight Road
Location: Along Road 1 PUNGGOL D BLK 638C, PL Weather:				
Clear		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume:
Type of Collisio Moving Vehicle	on: Against - Parked Ve	hicle		Anyone conveyed by ambulance:

ARTHUR OF A	chicle Invo	NA60			A STATE OF THE STA
/enicle No	Type	Make	Model	Color	Condition No of Passann
SLJ510A	Car	JAGUAR	XE 2.0 I4D	White	Slightly 0 Damaged

L'Eleks of V	ohicle insurance		12 (0.00) (0.00)	
vahisia No	Insurance Company	Insurance No	Effective	
SLJ510A	TENET SOMPO INSURANCE PTE.	D18MTPV0101469		
	LLTD.	5	14/10/2010	13/10/2019



Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999 T/20181230/2084

2 of 3 Report No. T/20181230/2084

CONTINUATION OF REPORT

# **Brief Details.**

On the 30/12/2018 at about 1945hrs, I walked back to my vehicle that was parked along the service road, near Blk 638C, Punggol Drive, and I noticed two dents on both doors on the driver's side of my car. I decided to view the in car camera and I saw a comfort delgro taxi, reversing into my car and drive off. The Comfort Delgro taxi number is visible partially is SH774. I will be contacting Comfort Delgro to check with them on the vehicle number of the taxi. The driver did not leave any number or note to let me know of the accident that occurred



Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999



3 of 3 Report No. T/20181230/2084

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 / Sr Staff Sgt JASINTHA D/O SUDHAGAR	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 30/12/2018 21:12
Officer in Charge Of Case: TP / HRT / Sr Staff Sgt ESTHER CHONG Contact No.: 65476368	Classification Of Case:
Singapore Police Force	