

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 | 14/01/2019 10:04 |
| Date Of Accident | 12/01/2019 11:30 |
| Exact Location Of Accident | CARPARK OF KOPITIAM SQUARE |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------------------|
| Vehicle Registration Number | SJY2728X |
| Insured/Policyholder | |
| Name Of Registered Owner | LEE TECK SUN GEORGE |
| NRIC No | S1393525D |
| Email Address | JOCHRLEE@HOTMAIL.COM |
| Mobile Phone No | (LOCAL) +65-90172465 |
| Alternative Phone No | OTHERS-90172465 |

Vehicle Particulars

| | |
|--|---------------------------|
| Manufacturer | TOYOTA |
| Model | CAMRY 2.0 AUTO ABS AIRBAG |
| 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 | THIRD PARTY |
| Vehicle Category | PRIVATE CAR |

Insurance Company

| | |
|---------------------------|---------------------------------------|
| Name of Insurance Company | INDIA INTERNATIONAL INSURANCE PTE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | D18M9C0001067 |
| Cover Note Number | |

Driver

| | |
|----------------------|----------------------|
| Name of Driver | LEE TECK SUN GEORGE |
| NRIC No | S1393525D |
| Date Of Birth | 22/07/1959 |
| Occupation | INDOOR |
| Date Of Driving Pass | 08/12/1977 |
| Driving Experience | 41 YEARS AND 1 MONTH |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-90172465 |
| Fax Number | |
| Contact Number | OTHERS-90172465 |
| Email Address | JOCHRLEE@HOTMAIL.COM |

| | |
|---|----------------------|
| Address | 3 ELIAS GREEN #04-06 |
| Postcode | 519960 |
| 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 | - |
| | - |
| | - |

General Information of the Accident

| | |
|--------------------|------------|
| Type Of Accident | SIDE SWIPE |
| 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 | SENGKANG NPC |
| Police Station Address | ROAD: 2 SENGKANG SQUARE #01-02 , POSTCODE: 545025 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: - FAX NO: |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

AS PER POLICE REPORT No.F/20190112/2054;

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 | SGF8259D |
| Vehicle Make/Model/Colour | TOYOTA VIOS 1.5E A |
| 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

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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:

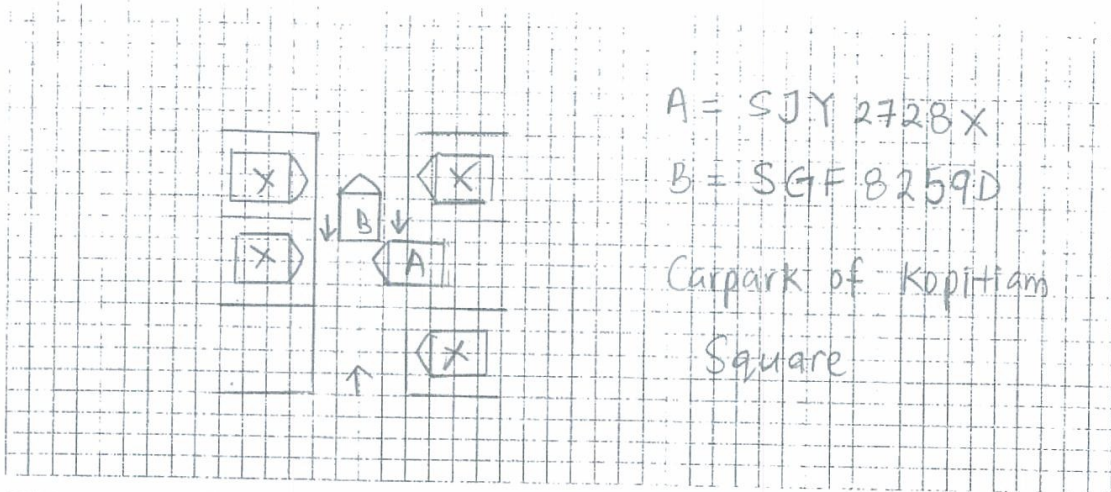
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4
Reporting Centre
Name: **Singapore 415933**
Tel: **67416697** Fax: **67492305**
NRIC/PR No.:
Email: **vackb@singnet.com.sg**

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report

Report NO: F/20190112/0054

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:

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4
Singapore 415933
Reporting Centre Personnel's Signature
Tel: 67416697 Fax: 67492305
Email: vackb@singnet.com.sg



**SINGAPORE
POLICE FORCE**



F/20190112/2054

1 of 2

POLICE REPORT (NP299)

Report No. F/20190112/2054

Police Station Of Origin
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

| | | | | | |
|---|--|--|-----------|-----------------------------|-----------------|
| Date/Time Report Made 12/01/2019 15:17 | | Vide Report No. | | Station Diary No. 81 | |
| Name Of Informant LEE TECK SUN GEORGE | | Address 3 ELIAS GREEN #04-06 SINGAPORE 519960 | | | |
| ID Type / ID No. NRIC NO / S1393525D | | Contact No. Home/Office | | Mobile 90172465 | |
| Nationality SINGAPORE CITIZEN | | Email Address | | | |
| Occupation Retiree | | Sex Male | Age 59 | Date of Birth 22/07/1959 | Race Chinese |
| Institution/School Name | | Language English | | | |
| Date/Time Of Incident 12/01/2019 11:30 | | Location Of Incident 10 SENGKANG SQUARE KOPITIAM SQUARE SINGAPORE 544829 | | | |

Brief details.

On 12 January 2019 at about 1130hrs, I was driving my grey Toyota Camry car bearing registration number: SJY2728X at the carpark of Kopitiam Square located at 10 Sengkang Square when I got involved in a traffic accident with a silver Toyota Vios car bearing registration number SGF8259D.

I was reversing into a carpark lot and the vehicle was in front of me. Before I could complete parking into the lot, the vehicle had reversed onto my vehicle. Both of us then got out of our vehicles and exchanged particulars. Due to the accident, the right front bumper of my vehicle was damaged - the paintwork came

| | |
|--|--------------------------------|
| Signature Of Officer Recording The Report: F / Sr Staff Sgt SITI NORAINI BINTE RAMLI | Signature Of Informant: |
| Signature Of Interpreter: Not applicable | Date/Time: 12/01/2019 15:17 |
| Officer In-Charge Of Case: F / Sengkang N.P.C / SI MOHAMED SALLEH BIN MOHAMED IBRAHIM Contact No.: 63438999 | Classification Of Case: |

Authentication Stamp

SN 085

Signature:

Singapore Police Force



**SINGAPORE
POLICE FORCE**



F/20190112/2054

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20190112/2054

off, there were dents and scratches, the right headlight was broken, the right wheel fender was damaged and the whole bumper was damaged. I do not know what are the internal damages. No one was injured and no other vehicle was involved in the accident. I will be lodging the matter with my insurance company. That is all.

Signature Of Officer Recording The Report:

F / Sr Staff Sgt SITI NORAINI BINTE RAMLI

Signature Of Informant:

George

Signature Of Interpreter:
Not applicable

Date/Time:
12/01/2019 15:17

Officer In-Charge Of Case:
F / Sengkang N.P.C /
SI MOHAMED SALLEH BIN MOHAMED IBRAHIM
Contact No.: 63438999

Classification Of Case:

Authentication Stamp

SN 085

Signature:

Singapore Police Force

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



