# Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 17/01/2019 14:08

#### 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 <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

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	ACCIDENT STATEMENT
Date Of Report	17/01/2019 13:40
Date Of Accident	13/01/2019 12:10
Exact Location Of Accident	BUKIT BATOK WEST AVENUE 8
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GX2833R
Insured/Policyholder	
Name Of Registered Owner	VAPOUR AIR-CONDITIONING ENGINEERING
Co Reg No	53086104J
Email Address	VAPOURAIRCON@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-96199191
Vehicle Particulars	
Manufacturer	TOYOTA
Model	REGIUS ACE SUPER GL DARK PRIME
Exact Purpose for which vehicle was being used at time of accident	PTE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5080488200.02

Policy Number 5080488209-02

Cover Note Number

#### Driver

Name of Driver

LOH KIM LENG

NRIC No

S7814866G

Date Of Birth

Occupation

OUTDOOR

Date Of Driving Pass

LOH KIM LENG

O7814866G

OUTDOOR

22/04/1999

Driving Experience 19 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96774705

Fax Number

**Contact Number** 

EMail Address NOEMAIL

Address BLK 984D BUANGKOK LINK #04-33

Postcode 537984

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**

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

NO

YES

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 1

#### **Details of Police Action**

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name HOUGANG NEIGHBOURHOOD POLICE POST

Police Station Address ROAD: BLK 357 HOUGANG AVENUE 7 #01-805, POSTCODE: 530357,

**COUNTRY: SINGAPORE** 

Police Station Contact TEL NO: 1800-2869999 - FAX NO: 63822066

Was notice of intended Prosecution given? NO

If Yes, against whom?

#### **Circumstances of Accident**

On 13/01/2019 at about 1210hrs, I had parked my vehicle (Registration Number: GX2833R) at Lot Number 27 at Blk 176 Bukit Batok West Avenue 8 open carpark and everything is intact at that point of time, On the same day at about 1250hrs, I went back to the carpark to retrieved my vechicle and realized that my front side bumper was totally damage, I then call for police assistance and shortly traffic police came " to the accident scene, I then informed them about the incident and they advice me to lodge a police report vide case number J/20190113/0091. As I had installed the in-car CCTVfootages in my vehicle, I am ableto retrieved the accident footages. From the said video, I saw that vehicle (Registration Number: SJZ91 G) hat hit on the front side bumper and subsequently drive off from the location. I had also pass the footages to the TP officers for their investigation.

#### 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 SJZ91G

Vehicle Make/Model/Colour MERCEDES BENZ BLACK

**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)

#### Accident Sketch Plan

#### SKETCH PLAN

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- 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 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:
  - 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:
  - 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 5lg

Date & Time:

Orlver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Reg. No. 53085104.

### **Accident Sketch Plan**

SKETCH PLAN	DOA: 13-1-19	A = GX 2833R	B=SJZ91G
Open	Car Park At BIK	175 Bt. Batok Wes	it Aved
	Reversing	BD	
	MSTANCES OF THE ACCIDEN		
Refer to	the attached Police	Report No: 7/201	90113/2086
	· · · · · · · · · · · · · · · · · · ·		
DECLARATION  I/We declare the filter  \$ 330861	No me	respect.	John Jan
Policyholder's San ON Date & Time:	Driver's Signa	ture of the policyholder)	Reporting Centre Personnel's Signature Name:

SIAKME SARREPORGOVIE VS

### Police Report





1 of 3

Report No. T/20190113/2086

Police Station Of Origin: Hougang NPP 357 Hougang Avenue 7 #01-805 SINGAPORE 530357 Tel No: 1800-2869999

DEDODT	OF A	TRAFFIC	ACCIDENT
KEPUKI	UFA	INAFFIC	MODIFIER

Date/Time Report Made: 13/01/2019 17:33		lade:	Vide Report No.: J/20190113/0091	Station Diary No.: 37	
Informa	nt's Particu	ılars			
Name of Informant: LOH KIM LENG			Address: APT BLK 984D BUANGKOK LINK #04-33 SINGAPORE 537984		
ID Type / ID No.: NRIC NO / S7814866G			Contact No.: Home/Office:	Mobile: 96774705	
National	ity: ORE CITIZ	EN	Email:		
Sex: Male	Age: 40	Date of Birth: 27/05/1978	Type of Informant: Driver	A	
Race: Chinese			Language: English	Institution / School Name:	
Occupation: AIRCON TECHNICIAN			Driving Licence Information: Class: 2B,3,4,5	Date of Expiry:	

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 13/01/2019 12:15	Type of Location Car Park
Location: Along Road 1 BUKIT BATO Openspace c	K WEST AVENUE 8			
Weather: Clear	ar por N	Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:	Traffic Control:	
I ramic Flow:				1

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GX2833R	Van				Seriously Damaged	0
SJZ91G	Car					0

#### **Police Report**





Police Station Of Origin: Hougang NPP 357 Hougang Avenue 7 #01-805 SINGAPORE 530357 Tel No: 1800-2869999 2 of 3 Report No. T/20190113/2086

CONTINUATION OF REPORT

#### Brief Details.

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### **Police Report**





Police Station Of Origin: Hougang NPP 357 Hougang Avenue 7 #01-805 SINGAPORE 530357 Tel No: 1800-2869999 3 of 3 Report No. T/20190113/2086

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 / Sgt 2 MUHAMMAD SYAFIQ BIN ROSMANJA	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 13/01/2019 17:33
Officer In Charge Of Case:	Classification Of Case:
Sr Staff Sgt IRMAN BIN MOHAMAD SAID Contact No.: 65476145	A SN
Authentication Stamp NP168	Sometime: MD























