

## 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	16/08/2019 10:45
Date Of Accident	22/01/2019 07:30
Exact Location Of Accident	CARPARK NO. AMA61 AT AMK AVE 10 BLK 527
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF650T
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ONLY STAINLESS STEEL ENGINEERING
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91877495
Alternative Phone No	OFFICE-91877495

### Vehicle Particulars

Manufacturer	TOYOTA
Model	-
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	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN3037781800
Cover Note Number	

### Driver

Name of Driver	TOH LYE HENG
NRIC No	S1367876F
Date Of Birth	28/04/1959
Occupation	INDOOR
Date Of Driving Pass	30/03/1980
Driving Experience	38 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91877495
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	-
Postcode	
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
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	TRAFFIC POLICE DIVISION HQ
Police Station Address	<b>ROAD:</b> 10 UBI AVENUE 3 , <b>POSTCODE:</b> 408865 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 65470000 - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

refer attached police report.

#### 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	UNKNOWN
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****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, 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.

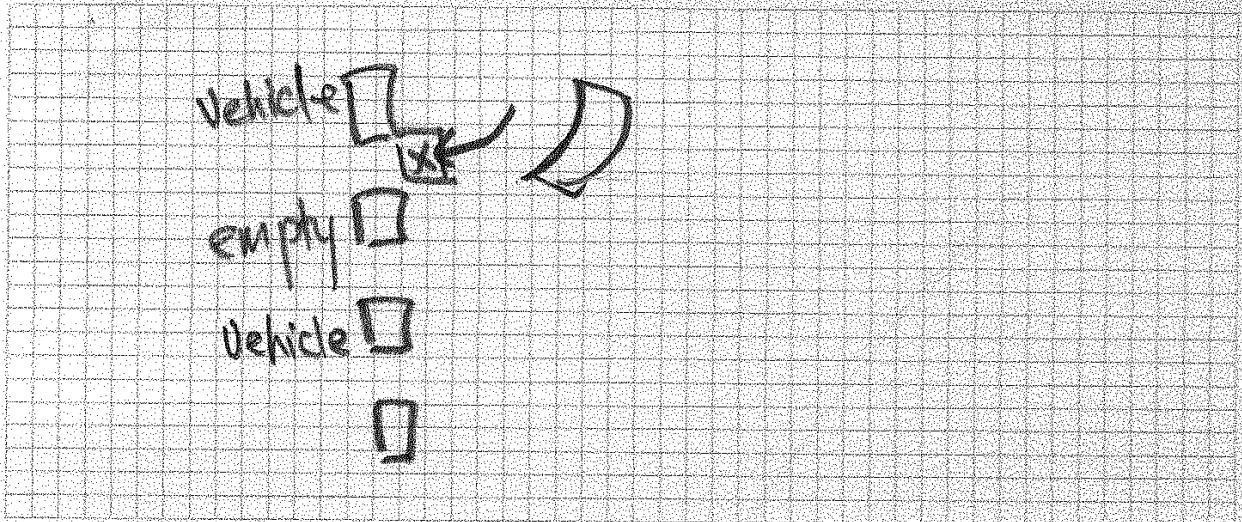
ONLY WINLESS STEEL ENGINEERING  
 Blk 50 Ang Mo Kio Industrial Park 2  
 #1173 Singapore 569559  
 Tel: 482 5511 Fax: 6482 4826  
 HP: 15 3915 CHAN KNG HUA

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.:

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I, Joh Lye Heng the driver of vehicle no GBF6507 as I was reversing to the parking lot I suddenly hit at the parking vehicle as it is slight damage on the bonnet. The vehicle owner at that time is not in vehicle ~~as~~ so I drive off.

I did not aware the accident as I report late.

## DECLARATION

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

白鋼工程  
ONLY STAINLESS STEEL ENGINEERING  
Blk 5056 Ang Mo Kio Industrial Park 2  
#01-1173 Singapore 569559  
Tel: 6482 5566 Fax: 6482 4826

Policyholder's Signature  
Date & Time: 17/5/2015 CHAN KNG HUA

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

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





**SINGAPORE  
POLICE FORCE**

Traffic Police  
10 Ubi Avenue 3  
Singapore 408865  
Tel +65 6547 0000  
Fax +65 6547 4883  
[www.police.gov.sg](http://www.police.gov.sg)

Report No : TP/IP/07347/2019  
Date : 21 June 2019

Toh Lye Heng  
Blk 558 Ang Mo Kio Avenue 10  
#09-1800  
Singapore 560558

**RECIPIENT'S COPY**

**STERN WARNING**


1. Investigations against you, Toh Lye Heng, S1367876F, into the following offence(s):

ALLEGED OFFENCE(S)				
S/No	Offence	Legislation	Date & time committed	Place
1	Careless Driving	Rule 29 of the Road Traffic Rules	22/01/2019 @ 0730 hrs	Ang Mo Kio Avenue 10
2	Failing to stop after an accident	Section 84(1) of the Road Traffic Act Chapter 276		
3	Failing to report an accident within 24hours	Section 84(2) of the Road Traffic Act Chapter 276		

have been completed.

2. After careful consideration of the facts of the case, and with the concurrence of the Attorney-General's Chambers, you are warned to refrain from any criminal conduct. If you commit any offence in future, the same leniency may not be shown towards you.

3. If you have any clarification, you may contact the Investigation Officer, SI Abdul Kareem at office number: 6547 6079.

  
**CHEW SOOK YENG, ASP**  
for HEAD INVESTIGATION  
TRAFFIC POLICE  
SINGAPORE POLICE FORCE

21 June 2019  
Date



**SINGAPORE  
POLICE FORCE**

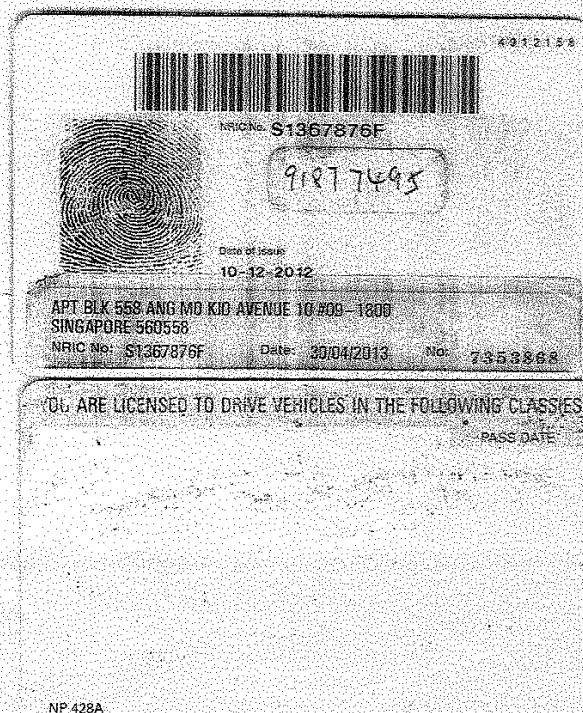
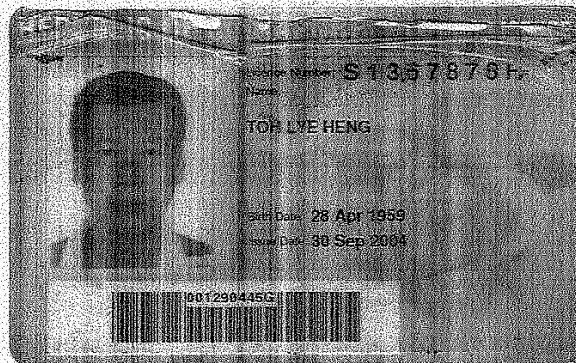
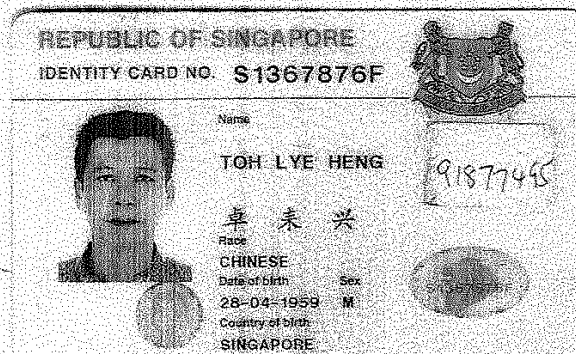
Traffic Police  
10 Ubi Avenue 3  
Singapore 408665  
Tel +65 6547 0000  
Fax +65 6547 4883  
[www.police.gov.sg](http://www.police.gov.sg)

**NOTE**

1. This stern warning is issued to you because while an assessment that you have committed the offence(s) listed in paragraph 1 has been made, a decision has been taken not to prosecute you in court for the offence(s).
2. This stern warning:
  - (a) does not amount to a conviction for an offence or a finding of guilt by a court of law;
  - (b) does not mean that you now have a criminal record of the offence(s) listed in paragraph 1;<sup>1</sup>
  - (c) will not be raised by the Prosecution as a criminal record against you in any future court matters for purposes of enhancing a sentence; and
  - (d) does not affect any of your legal rights, interests, or liabilities.

---

<sup>1</sup> As defined in the Registration of Criminals Act (Cap 268, 1985 Rev Ed.)





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo

