#### 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 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

The Name of the State of the St	ACCIDENT STATEMENT
Date Of Report	22/01/2019 13:25
Date Of Accident	22/01/2019 07:30
Exact Location Of Accident	BLK 527 ANG MO KIO AVE 10 OPEN SPACE CAR PARK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHD6426A
Insured/Policyholder	
Name Of Registered Owner	SMRT TAXIS PTE LTD
Co Reg No	198905369K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-80000000
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	PRIUS TAXI-1.8 (A)
Exact Purpose for which vehicle was being used a 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	THIRD PARTY
Vehicle Category	TAXI
Insurance Company	
Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-18090213MFSH
Cover Note Number	
Driver	
Name of Driver	LIEW SER CHONG
NRIC No	S1243785D
Date Of Birth	10/06/1957
Occupation	OUTDOOR
Date Of Driving Pass	27/12/1978
Driving Experience	40 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-80000000
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address 626

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own

ehicle

-

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

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

Was any body injured in the Accident? NO
Was any injured conveyed to hospital by ambulance?

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)

**Details of Police Action** 

Was the accident reported to the police?

YES

0

If Yes, Please state which Police Station

Police Station Name HOUGANG NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 60 HOUGANG AVE 9 , POSTCODE: 538775 , COUNTRY:

SINGAPORE

Police Station Contact TEL NO: 1800-4890999 - FAX NO: 63128989

Was notice of intended Prosecution given?

If Yes, against whom?

## Circumstances of Accident

REFER TO POLICE REPORT - T/20190122/2031 On 22/01/2019 at about 0730hrs I parked my Taxi SHD6426A at Blk 527 Ang Mo Kio Avenue 10, Cheng San Market open carpark unknown lot. After which I secured my vehicle and left to the market. At about 0735hrs I returned back to my vehicle and discovered the front right side of my vehicle bumper was dented and headlight broken. There was also some scratches. I did not know what happened. There was also no note left on my vehicle. I immediately drove to my Taxi company SMRT located at Woodlands Avenue 9. The staff checked the CCTV footage and informed me that a lorry had hit onto my vehicle earlier and left without stopping. As such I was advised to lodge a Traffic Accident Report on Hit and Run to the police by my company staff. I do not have the details of the other vehicle at the moment. My company staff gave me the CCTV footage to hand it over to the Traffic Police for their follow up.

#### Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? YES

Remarks/ Reasons: FILE TOO LARGE

Was there any audio recorded? NO

# DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBF650T Vehicle Make/Model/Colour TOYOTA

**Details Of Properties** 

Vehicle Category COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

### Sketch Plan Pg. 1

### SKETCH PLAN

#### IMPORTANT NOTICE

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- 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.
- 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:
  - (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

M 78/1/28

Name:

NRIC/FIN No.:

CETCH PLAN	e nje ji nji njenjenjenje emejenjenje	Andrew Andrew Sandrey Control	
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REFER TO P	OUCE REPORT - 7	120190122/2031	
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LARATION			
declare the foregoing partie	culars are true in every respect.		
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holder a Signature	Driver's Signature	Reporti	ng Centre Personnel's Signature
& Time:	(If driver is not the policyho	older) Name:	P centre Letachinet 2 Signature
	Date & Time:	NRIC/FI	N No.:





Date of Expiry:

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

1 of 3 Report No. T/20190122/2031

Chinese

Occupation: Taxi driver

REPORT	OF A TRAFFI	CACCIDENT		
Date/Time Report Made: 22/01/2019 11:02		Vide Report No.:	Station Diary No.	
Informa	int's Partic	ulars		
Name of Informant: LIEW SER CHONG  ID Type / ID No.: NRIC NO / S1243785D  Nationality: SINGAPORE CITIZEN		Address: APT BLK 626 HOUGA 530626	NG AVENUE 8 #11-154 SINGAPORE	
		Contact No.: Home/Office:	Mobile: 97285068	
		Email:		
Sex: Male	Age: 61	Date of Birth: 10/06/1957	Type of Informant: Driver	
Race:		Language:	Institution / School Name:	

Driving Licence Information:

English

Class: 3,4

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 22/01/2019 07:30	Type of Location Car Park
Location: Along Road 1 ANG MO KIO Blk 527, Ang I Weather: Clear		neng San Market/Food Road Surface: Dry	court, Open carpark	Road Speed Limit:
Traffic Flow: One Way	90	Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collisi Moving Vehicl	on: e Against - Parked Ve	hicle		Anyone conveyed by ambulance:

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHD6426A	Car	TOYOTA	Prius Hybrid	Parket Asset Springer	Slightly	0

#### Sketch Plan Pg. 4





T/20190122/2031

Police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775

Report No. T/20190122/2031

2 of 3

Tel No: 1800-4890999

CONTINUATION OF REPORT

## Brief Details.

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Police Station Of Origin: Hougang N.P.C

60 Hougang Avenue 9 SINGAPORE 538775

Tel No: 1800-4890999

3 of 3 Report No. T/20190122/2031

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 TAI YOONG CHAN, DOMINIQUE	Signature of Informant:	
Signature Of Interpreter: Not applicable	Date/Time: 22/01/2019 11:02	
Officer In Charge Of Case: TP / HRT / SI ABDUL KAREEM BIN ABDUL HAGUE	Classification Of Case:	
Contact No.: 65476079	SN 085	
	Signature. W.	
Singapor	e Police Force	