

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	11/02/2019 15:57
Date Of Accident	10/02/2019 19:30
Exact Location Of Accident	ANG MO KIO AVE 5 BLK 602 OPEN CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGA2832P
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Insured/Policyholder

Name Of Registered Owner	LIEW AI TAI
NRIC No	S7372481C
Email Address	ESTHERLIEW@OUTLOOK.COM
Mobile Phone No	(LOCAL) +65-90080393
Alternative Phone No	OFFICE-90080393

Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS 1.5E A
Exact Purpose for which vehicle was being used at time of accident	PARKED
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5072596050-03
Cover Note Number	

Driver

Name of Driver	LIEW AI TAI
NRIC No	S7372481C
Date Of Birth	14/10/1973
Occupation	INDOOR
Date Of Driving Pass	17/06/1996
Driving Experience	22 YEARS AND 7 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90080393
Fax Number	
Contact Number	OFFICE-90080393
Email Address	ESTHERLIEW@OUTLOOK.COM

Address	BLK 602 ANG MO KIO AVENUE 5 #08-2645
Postcode	560602
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	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)	0

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	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO THE ATTACHED POLICE REPORT NO: T/20190210/7010.

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 Witness 1

Name	BERTRAND COLAS
Phone Number	96197177
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GZ6432C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	UNKOWN
NRIC/Passport Number	
Contact Number	

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN


IMPORTANT NOTICE

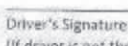
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8. Consent under the Personal Data Protection Act (PDPA)

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.

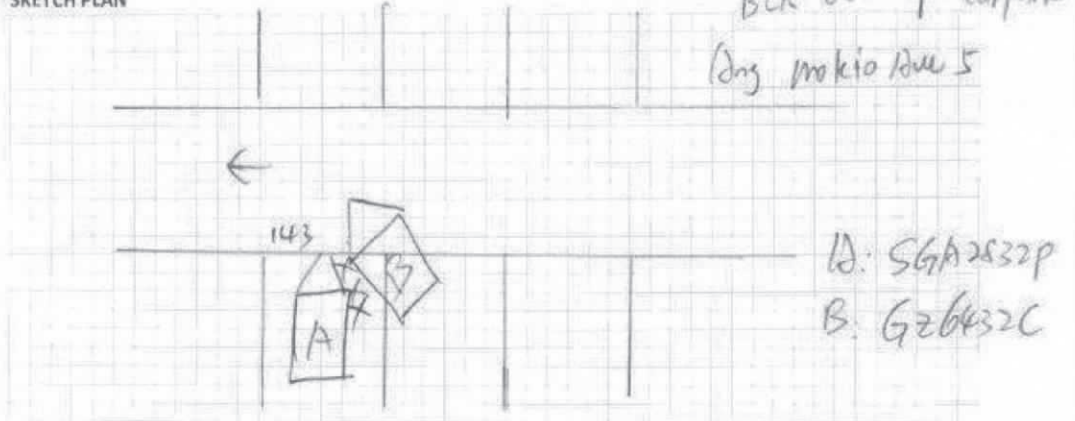

Policyholder's Signature
Date & Time:


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


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

Sketch Plan #2

SKETCH PLAN

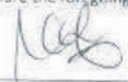


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to attached police report.

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:


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



SINGAPORE POLICE FORCE



T/20190210/7010

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20190210/7010

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/02/2019 22:44	Vide Report No.: F/20190210/0210	Station Diary No.:
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Informant's Particulars

Name of Informant: LIEW AI TAI			Address: APT BLK 602 ANG MO KIO AVENUE 5 #08-2645 SINGAPORE 560602		
ID Type / ID No.: NRIC NO / S7372481C			Contact No.: Home/Office: Mobile: 98699231		
Nationality: SINGAPORE CITIZEN			Email: estherliew@outlook.com		
Sex: Female	Age: 45	Date of Birth: 14/10/1973	Type of Informant: Vehicle Owner		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Ledger and accounts clerk			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 10/02/2019 19:30	Type of Location: Car Park
Location: ANG MO KIO AVENUE 5				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGA2832P	Car	TOYOTA	Vios	Silver	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGA2832P	NTUC Income Insurance Co-Operative Limited	5072596050-03	18/11/2018	17/11/2019



**SINGAPORE
POLICE FORCE**



T/20190210/7010

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20190210/7010

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Vehicle Owner			
Name	LIEW AI TAI	ID No.	S7372481C
Related Vehicle	NIL	Contact No.	98699231
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

It was a hit and run incident that happened in BLK 602 Ang Mo Kio Ave 5 carpark. There was a loud bang heard between 7.25pm to 7.35pm and the witness seen the vehicle (Allweld Engineering Pte Ltd) was involved in the collision. The photos are taken at 7.32pm.



**SINGAPORE
POLICE FORCE**



T/20190210/7010

3 of 3

Report No. T/20190210/7010

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
RAZIZ BIN TAHAR
Contact No.: 65476200


Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
10/02/2019 22:44

Classification Of Case:

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7372481C




Name
LIEW AI TAI
廖爱娣

Race
CHINESE

Date of birth
14-10-1973

Country/Place of birth
MALAYSIA

Sex
F



REPUBLIC OF SINGAPORE DRIVING LICENCE


Licence Number: S7372481C

Name
LIEW AI TAI


Birth Date: 14 Oct 1973
Issue Date: 06 Aug 2004



5713020



NRIC No. S7372481C



Date of Issue
10-03-2017


Address
APT BLK 602 ANG MO KIO AVENUE 5
#08-2645
SINGAPORE 560602

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

		PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	17 Jun 1996
Class 3	Motor Cars of unladen weight not exceeding 3000 kg with not more than 7 passengers, exclusive of the driver; and Motor Tractors and other Motor Vehicles of unladen weight not exceeding 2500 kg	17 Jun 1996

NP 428A

Licence No: S7372481C



THE SCHEDULE

Private Car Insurance Policy

This Policy sets out the terms of a contract between NTUC Income Insurance Co-operative Limited (INCOME) and you (the Policyholder named in the schedule to this Policy).

The statements, information and declaration provided by you at the time of proposal shall form the basis of this contract. We (INCOME) will provide the insurance set out in this Policy in respect of events occurring during the Period of Insurance shown in the Schedule and any further period for which we may accept a renewal premium.

The provision of this insurance is subject to:

1. any Endorsement specified as operative in the Schedule
2. the Conditions and General Exclusions of this Policy, and
3. the payment of the premium specified in the Schedule.

This Policy, the Schedule and the Certificate of Insurance are to be read together as one document.

GST Reg No. M4-0003030-8

Policy Number	: 5072596050-03
The Policyholder	: LIEW AI TAI BLK 602 #08-2645 ANG MO KIO AVENUE 5 SINGAPORE 560602

Period of Insurance	: 18 Nov 2018 To 17 Nov 2019
Sum Insured	: Market Value of Insured Vehicle at Time of Loss
Premium (inclusive GST)	: S\$563.67

Interest Insured

Cover Type	: Third Party, Fire & Theft	
Primary Driver	: LIEW AI TAI	
Named Driver (1)	: SIM SEOW KIAH	
Named Driver (2)	: N/A	
Make/Model	: TOYOTA/VIOS	Capacity : 1500cc
Registration Number	: SGA2832P	Registration Year : 2005
Chassis Number	: MR053HY4204156662	Off-peak Car : No
Repair at Owner's Preferred Workshop	: No	Insure with COE : Yes
Excess (Section 1)	: N/A	NCD Entitlement : 50%
Excess (Section 2)	: N/A	NCD Protection : No
Additional Excess	: N/A	Loyalty Discount : 5%
Unnamed Driver Excess	: N/A	
Hire Purchase Company	: N/A	

Memo A : N/A

Endorsement Operative : M2

Agency	: DIRECT BUSINESS DEPT (00000600280)
Date of Issue	: 26 Oct 2018 16:51 hrs
Reprint	: 26 Oct 2018 16:52 hrs

DUTY OF DISCLOSURE

We would remind you that you must disclose to us, fully and faithfully, the facts you know or ought to know, otherwise you may not receive any benefit from your Policy.

Signed in Singapore by order of the Board of Directors



Chief Executive



GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE
 6 Raffles Quay #18-00, Singapore 048580
 Phone: +65 6224 0010 Fax: +65 6224 0030
 Operating Hours: Monday to Friday 9am to 5pm
 GST Registration No: M400017735

RECORDS MANAGEMENT CENTRE

Third Party Insurer Enquiry

Our Ref No: GR-19-021253
 Date of Request: 11/02/2019
 Your Ref No: Online Purchase

Chew Goon Motor
 Blk 10 Ang Mo Kio Industrial Park 2A
 #01-15/16 & 17, AMK Autopoint
 Singapore 568047

Dear Sir/Madam,

Enquiry Date: 11/02/2019
 Enquiry By: Sam Yuen Sen
 TP Vehicle No: GZ6432C
 Accident Date: 10/02/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
GZ6432C	QBE Insurance (Singapore) Pte Ltd	15/07/2018-14/07/2019	62246633

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

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GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE
 6 Raffles Quay #18-00, Singapore 048580
 Phone: +65 6224 0010 Fax: +65 6224 0030
 Operating Hours: Monday to Friday 9am to 5pm
 GST Registration No: M400017735

RECORDS MANAGEMENT CENTRE

TAX INVOICE

Our Ref No: GR-19-021253
 Date of Request: 11/02/2019
 Your Ref No: Online Purchase

Chew Goon Motor
 Blk 10 Ang Mo Kio Industrial Park 2A
 #01-15/16 & 17, AMK Autopoint
 Singapore 568047

Dear Sir/Madam,

Enquiry Date: 11/02/2019
 Enquiry By: Sam Yuen Sen
 TP Vehicle No: GZ6432C
 Accident Date: 10/02/2019

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque