

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	16/02/2019 12:06
Date Of Accident	15/02/2019 18:55
Exact Location Of Accident	CHURCH COMPOUND AT 50 OPHIR ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKZ4958T
Insured/Policyholder	
Name Of Registered Owner	NONIS RONEY JOHN
NRIC No	S1366842F
Email Address	RONEYNONIS@YMAIL.COM
Mobile Phone No	(LOCAL) +65-97966277
Alternative Phone No	OTHERS-97966277

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL-1.5 X A (A)
Exact Purpose for which vehicle was being used at time of accident	CAR WAS 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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5077316954-03
Cover Note Number	

Driver

Name of Driver	NONIS RONEY JOHN
NRIC No	S1366842F
Date Of Birth	27/05/1959
Occupation	INDOOR
Date Of Driving Pass	21/12/1979
Driving Experience	39 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-97966277
Fax Number	
Contact Number	OTHERS-97966277
Email Address	RONEYNONIS@YMAIL.COM

Address	BLK 94E BEDOK NORTH AVENUE 4 #04-1433
Postcode	464094
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	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	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	KAMPONG JAVA NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 21 KAMPONG JAVA ROAD , POSTCODE: 228892 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2959999 - FAX NO: 63918499
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190215/2188

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	PC4109P
Vehicle Make/Model/Colour	
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)

Accident Sketch Plan

SKETCH PLAN

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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.

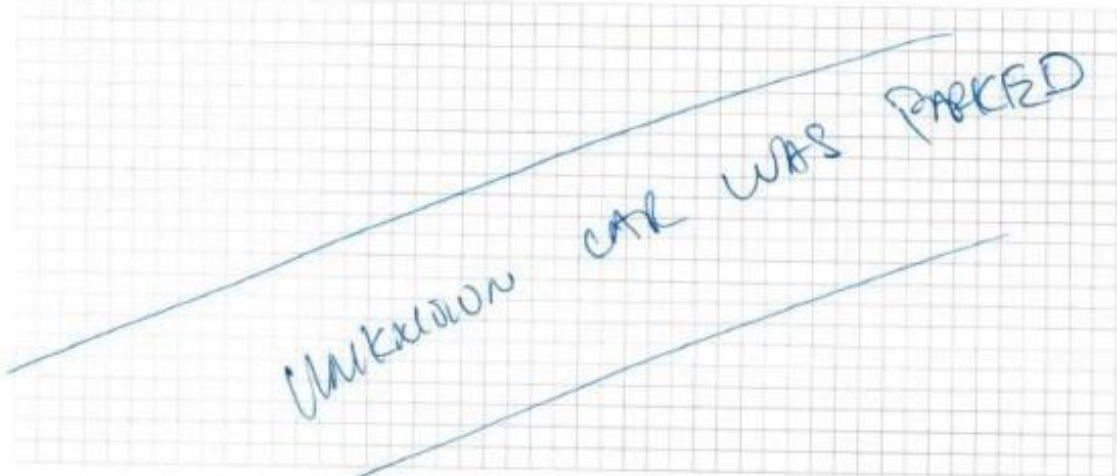
Policyholder's Signature
Date & Time:

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

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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Handwritten text in blue ink across the grid lines: "PLS REFER TO POLICE REPORT 7/20/90215/2188"

DECLARATION

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

Policyholder's Signature
Date & Time:

[Signature]

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

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

[Signature] 16/05/2019
Rashid Luthras

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190215/2188

Police Station Of Origin:
Kampong Java N.P.C
21 Kampong Java Road SINGAPORE
228892
Tel No: 1800-2959999

1 of 3

Report No. T/20190215/2188

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/02/2019 20:25	Vide Report No.:	Station Diary No.: 534
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Informant's Particulars

Name of Informant: NONIS RONEY JOHN			Address: APT BLK 94E BEDOK NTH AVE 4 #04-1433 SINGAPORE 464094		
ID Type / ID No.: NRIC NO / S1366842F			Contact No.: Home/Office: Mobile: 97966277		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 59	Date of Birth: 27/05/1959	Type of Informant: Driver		
Race: Eurasian			Language:	Institution / School Name:	
Occupation: SUPERINTENDENT OF KEPPEL FELS			Driving Licence Information: Class: 2B,3		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 15/02/2019 18:55	Type of Location: Car Park
Location: OPHIR ROAD Our Lady of Lourdes church at No 50 Ophir Road				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Hit and Run			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
PC4109P	Van	TOYOTA		White		0
SKZ4958T	Car	HONDA	VEZEL 1.5X A	White	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKZ4958T	NTUC Income Insurance Co-Operative Limited	5077316954-03	25/01/2019	24/01/2020

POLCE REPORT



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T/20190215/2188

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Tel No: 1800-2959999

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Report No. T/20190215/2188

CONTINUATION OF REPORT

Brief Details.

On 15/02/2019 at about 1840 hrs, I Parked my vehicle, SKZ 4958 T at one of the lot at 50 Mt ophir Road (Our Lady of Lourdes church). At around 1905 hrs, I came back to my car and discovered a dent at the rear of my vehicle. I then checked in car camera and it show that one motor van bearing the vehicle no: PC4109 P, White Toyota van reversed and hit onto the rear of my vehicle at 1855hrs -1858hrs, the said van had left before I come back. I am making this report for investigation. I wish to state that there is CCTV in the church compound, however I not sure is it focusing at the area where I parked my vehicle.

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190215/2188

Police Station Of Origin:
Kampong Java N.P.C
21 Kampong Java Road SINGAPORE
228892
Tel No: 1800-2959999

3 of 3

Report No. T/20190215/2188

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: E / Sr Staff Sgt ONG CHEOW LONG	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 15/02/2019 20:25
Officer In Charge Of Case: TP / HRT / SI KALESWARI PALANI Contact No.: 65476902	Classification Of Case:
Authentication Stamp NP168 SIGNATURE	

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

