

## 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	07/03/2019 16:23
Date Of Accident	23/02/2019 15:00
Exact Location Of Accident	NO 154 EAST COAST RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLK6772R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LCRF PTE LTD
Co Reg No	201624597K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-62414992

### Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL-1.5 HYBRID (A)
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	PRIVATE HIRE

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999995004
Cover Note Number	

### Driver

Name of Driver	GOH CHOON MENG
NRIC No	S1686007G
Date Of Birth	13/04/1965
Occupation	OUTDOOR
Date Of Driving Pass	11/06/1983
Driving Experience	35 YEARS AND 8 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-93277138
Fax Number	
Contact Number	
EMail Address	NOEMAIL
Address	NOADDRESS
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	PAID DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	NO COLLISION
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE SEE ATTACHED SKETCH

#### 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	SJG3399A
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

### Sketch Plan #2

SKETCH PLAN

Sketch not available.

Ummmm

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I received an email from Lion City Rental informing me to report an accident that has occurred on 23/2/19 at around 1900 hrs along 154 East Coast Road.

To my best recalled, I did not have any incident with any motor vehicle on that day.

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.:

FORM 101 (2-2018) (Rev. 1-2018)



**SINGAPORE  
POLICE FORCE**



L/20190307/2068

1 of 2

**POLICE REPORT (NP299)**

Report No. L/20190307/2068

Police Station Of Origin  
Woodlands East N.P.C.  
3 Woodlands Drive 63 SINGAPORE 737890  
Tel No: 1800-7679999

Date/Time Report Made 07/03/2019 16:33		Vide Report No.		Station Diary No. 162	
Name Of Informant GOH CHOON MENG		Address APT BLK 712 YISHUN AVENUE 5 #05-158 SINGAPORE 760712			
ID Type / ID No. NRIC NO / S1686007G		Contact No. Home/Office		Mobile 93277138	
Nationality SINGAPORE CITIZEN		Email Address			
Occupation GRAB DRIVER		Sex Male	Age 53	Date of Birth 13/04/1965	Race Chinese
Institution/School Name		Language English			
Date/Time Of Incident 07/03/2019 10:05		Location Of Incident JURONG WEST STREET 81 SINGAPORE			

**Brief details.**

On 7/3/2019 at about 1009hrs, I received a message from my car rental company stating that I had a road traffic accident (Hit and Run) with a vehicle on the 23 February 2019 at about 1500hrs at 154 East Coast Road. I recalled the day, time and location, I did not receive any traffic accident on that day.

Subsequently, my rental car company made a check on my vehicle for any dents, scratches or body paint rework. However, they did not discover anything suspicious. So my company advise me to lodge a police report to state that there was no such accident happened on that day itself.

Signature Of Officer Recording The Report: L / MUHAMMAD AMIRRUDDIN BIN ABDULLAH
Signature Of Interpreter: Not applicable
Officer In-Charge Of Case: L / Woodlands Police Divisional Investigation Branch / Insp TAN QI FANG Contact No.: 64660000


Signature Of Informant: 
Date/Time: 07/03/2019 16:33
Classification Of Case:

**Authentication Stamp**



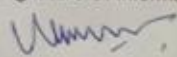


I wish to state that I recalled driving on that day itself and there was no traffic accident. I also did not recall any accident for the past few weeks. I am unable to get the in-car camera footage as the footage will be removed every day if I do not save it.

Signature Of Officer Recording The Report:  
L / MUHAMMAD AMIRRUDDIN BIN ABDULLAH 

Signature Of Interpreter:  
Not applicable

Officer In-Charge Of Case:  
L / Woodlands Police Divisional Investigation Branch /  
Insp TAN QI FANG  
Contact No.: 64660000

Signature Of Informant:  


Date/Time:  
07/03/2019 16:33

Classification Of Case:

Authentication Stamp





**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Number: **S1686007G**

Name: **GOH CHOON MENG**

Birth Date: **13 Apr 1965**

Issue Date: **01 Nov 2012**

00211971401



**REPUBLIC OF SINGAPORE**

**IDENTITY CARD NO. S1686007G**

Name: **GOH CHOON MENG**

吴春明

Race: **CHINESE**

Date of Birth: **13-04-1965**

Country of Birth: **SINGAPORE**

Sex: **M**

S1686007G



**Land Transport Authority**


**VOCATIONAL LICENCE**

Licence No: **S1686007G**

Name: **GOH CHOON MENG**

Issue Date: **10/8/2011**

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check the status of this vocational licence



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

	EFFECTIVE DATE
Class 2B Motorcycles <= 200 cc	25 Oct 1986
Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver, and other motor vehicles <= 2500kg	11 Jun 1983

NP 420A

Licence No: S1686007G

0493970

S1686007G

APT. BLK 712 YISHUN AVENUE 5 #05-156  
SINGAPORE 760712

NRIC No: S1686007G Date: 24/03/2010 No: 6502175

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
02	TAXI VI	27/01/1996



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo

