

## 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	25/03/2019 17:00
Date Of Accident	23/03/2019 13:15
Exact Location Of Accident	BASEMENT CARPARK OF 1 ORCHARD BLVD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGJ559U
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHUA SIEW YEN
NRIC No	S1164031A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97819980
Alternative Phone No	OTHERS-97668590

### Vehicle Particulars

Manufacturer	BMW
Model	320I-2.0 (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	THIRD PARTY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	B27831179
Cover Note Number	

### Driver

Name of Driver	YAN ZHENG WEI, CHRISTOPHER
NRIC No	S8922116A
Date Of Birth	30/05/1989
Occupation	INDOOR
Date Of Driving Pass	11/11/2008
Driving Experience	10 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97668590
Fax Number	
Contact Number	
Email Address	CHRISYANZW@GMAIL.COM

Address	37 LEEDON ROAD
Postcode	267853
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	10 UBI AVENUE 3
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> - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT AS PER ATTACHED.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGS181C
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

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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.

x   
Policyholder's Signature  
Date & Time: 25/03/19  
5:25pm

GIA 1st Enquiry Station, 9/3

  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 25/03/19  
5:25pm

  
Reporting Centre Personnel's Signature  
Name: Melody Teoh  
NRIC/FIN No.: S8526524E

## Sketch Plan #2

### SKETCH PLAN

Car A: SG55594  
Car B: SG5181C

1 Orchard Boulevard, Camden Medical Centre  
S24864A


### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

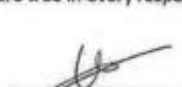
On 23rd March 2014, on or about the time between 9:15am to 1:15pm, my vehicle (SG55594) ("Car A") was parked at 1 Orchard Boulevard, Camden Medical Centre, S24864A.

A vehicle ~~SG5~~ (SG5181C) ("Car B") was parking and reversed into my vehicle, Car A. There was no note left behind to contact the driver. However, there is video footage from my front dashcam clearly showing the accident.

### DECLARATION

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

  
Policyholder's Signature  
Date & Time: 25/03/14  
5:25pm  
GIAIANG S-0936472

  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 25/03/14  
5:25pm

  
Reporting Centre Personnel's Signature  
Name: Melody Teoh  
NRIC/FIN No.: S8526524E

# Police Report



**SINGAPORE  
POLICE FORCE**



T/20190326/7005

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

1 of 3

Report No. T/20190326/7005

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/03/2019 11:28		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: YAN ZHENG WEI, CHRISTOPHER			Address: 37 LEEDON ROAD SINGAPORE 267853		
ID Type / ID No.: NRIC NO / S8922116A			Contact No.: Home/Office: Mobile: 97668590		
Nationality: SINGAPORE CITIZEN			Email: chrisyanzw@gmail.com		
Sex: Male	Age: 29	Date of Birth: 30/05/1989	Type of Informant: Vehicle Owner		
Race: Chinese			Language: English		Institution / School Name:
Occupation: DIRECTOR			Driving Licence Information: Class: Date of Expiry:		

## General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 23/03/2019 11:00	Type of Location: Car Park
Location:  ORCHARD BOULEVARD				
Weather: Inside a carpark		Road Surface: Dry	Road Speed Limit: 5 Km/h	
Traffic Flow: One 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
SGJ559U	Car	BMW	320i GT	Blue	Slightly Damaged	0
SGS181C	Car			Black		0

## Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGJ559U	MSIG INSURANCE (SINGAPORE) PTE. LTD.	B27831179SMP	26/12/2018	26/12/2019

## Police Report



**SINGAPORE  
POLICE FORCE**



T/20190326/7005

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

2 of 3

Report No. T/20190326/7005

### CONTINUATION OF REPORT

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Vehicle Owner</b>			
Name	YAN ZHENG WEI, CHRISTOPHER	ID No.	S8922116A
Related Vehicle	NIL	Contact No.	97668590
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.

My vehicle, SGJ559U ("My Vehicle"), was parked at 1 Orchard Boulevard, Camden Medical Centre, Singapore 248649 (the "Office") on Saturday 23rd March 2019, from the time of 9:15am to around 1:15pm.

After parking My Vehicle, I went into the office and did not return to My Vehicle until after I had finished work at around 1:15pm. When I returned to My Vehicle, the on-board dash camera alerted me that there had been a collision or event during the period that I was in the office.

I subsequently checked the footage from the camera and it was recorded that some point during the aforementioned time period, the driver of vehicle number SGS181C ("Offending Vehicle"), was attempting to park in the lot in front of my vehicle. While doing so, the offending vehicle struck the front of my vehicle. There was no note left by the driver and the offending vehicle was no longer in the vicinity.

## Police Report



**SINGAPORE  
POLICE FORCE**



T/20190326/7005

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

3 of 3

Report No. T/20190326/7005

### 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 /  
IRMAN BIN MOHAMAD SAID  
Contact No.: 65476145

Authentication Stamp  
NP168

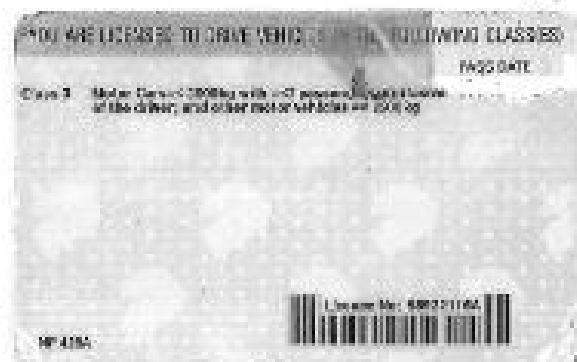
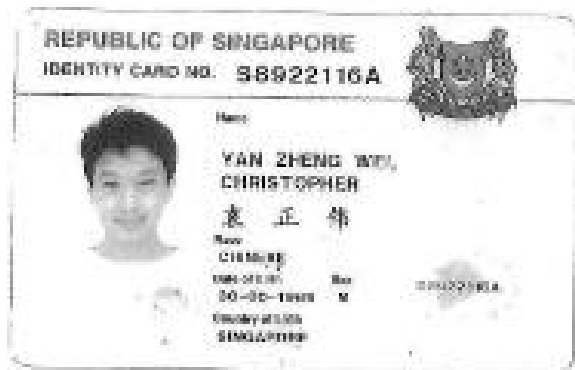
Signature Of Informant:  
The identity of the person making this report has  
been authenticated by SingPass. No signature is  
required.

Date/Time:  
26/03/2019 11:28

Classification Of Case:



# Identification Card



Identification Card

1333514



NRIC No. **S1164031A**

Blood Group **O+** Date of issue **08-10-1993**



37 LEEDON ROAD  
SINGAPORE 267853


NRIC No: S1164031A Date: 05/01/2009 No: 6111215

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

	PASS DATE
<b>Class 3</b> Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	<b>14 Jan 1982</b>

NP 428A

Licence No: S1164031A



**REPUBLIC OF SINGAPORE**  
**IDENTITY CARD NO. S1164031A**



Name  
**CHUA SIEW YEN**



Race  
**CHINESE**

Date of Birth  
**03-10-1955**

Country of Birth  
**SINGAPORE**

Sex  
**F**



**REPUBLIC OF SINGAPORE DRIVING LICENCE**



Licence Number **S1164031A**  
Name  
**CHUA SIEW YEN**

Birth Date: **03 Oct 1955**  
Issue Date: **16 Dec 2002**



Accident Photo



Accident Photo

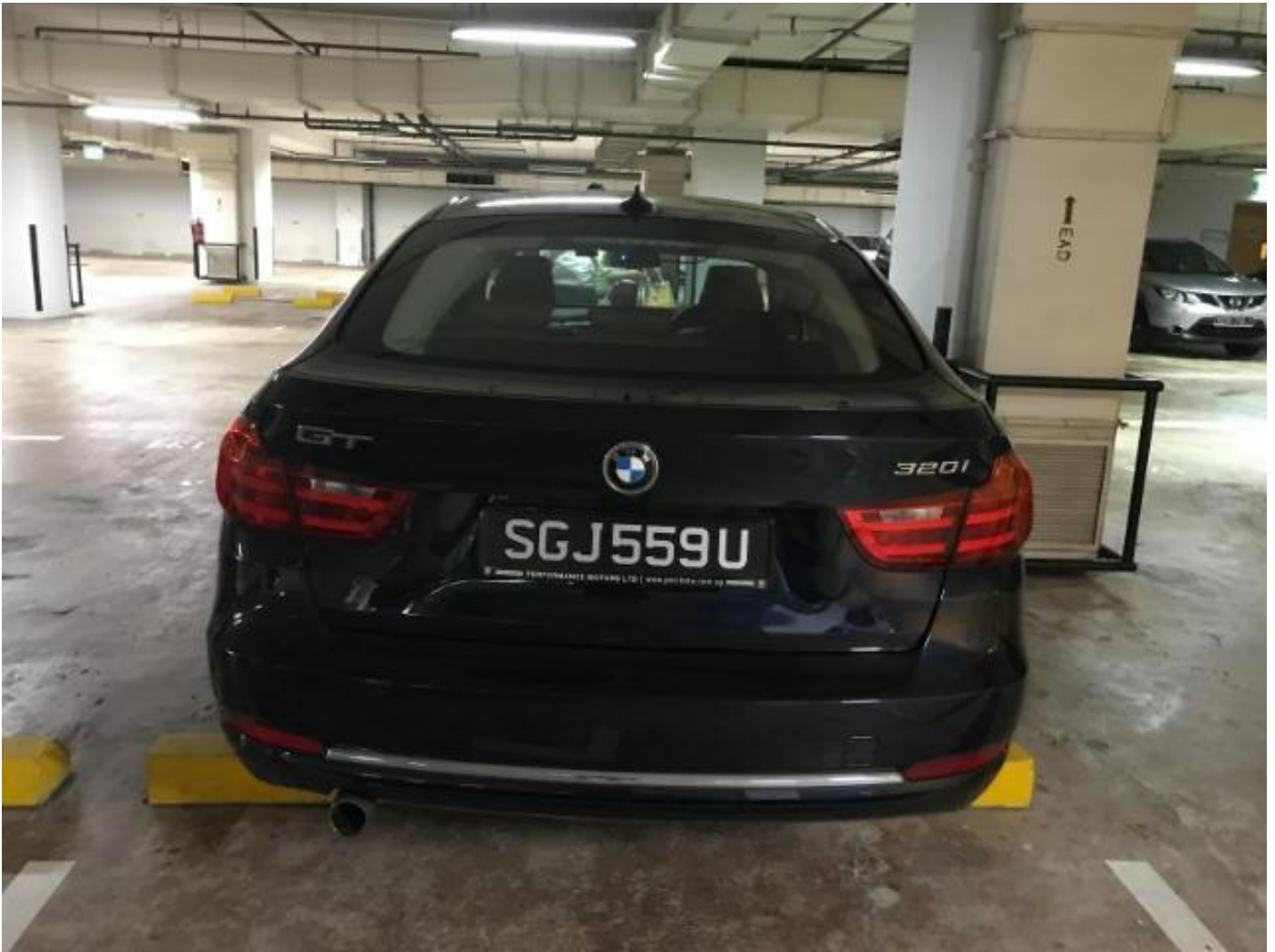




Accident Photo



Accident Photo



Accident Photo





Accident Photo



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