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 <u>truthful and accurate</u> 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 aforesaid

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	ACCIDENT STATEMENT
Date Of Report	13/03/2019 15:02
Date Of Accident	12/03/2019 14:10
Exact Location Of Accident	NEWTON CIRCUS (ROUNDABOUT)
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLH4260E
Insured/Policyholder	
Name Of Registered Owner	GRAB RENTALS PTE LTD
Co Reg No	201617200G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-66550005
Vehicle Particulars	
Manufacturer	TOYOTA
Model	PRIUS HYBRID 1.8 CVT
Exact Purpose for which vehicle was being used at time of accident	HIRE AND REWARD
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 HIRE
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	A29114756MKF_
Cover Note Number	
Driver	
Name of Dubon	OFF HALLIENO

Name of Driver SEE HAI HENG
NRIC No S1482746C
Date Of Birth 08/09/1960
Occupation OUTDOOR
Date Of Driving Pass 10/10/1979

Driving Experience 39 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-92705283

Fax Number
Contact Number

EMail Address HENGEMAIL12345@GMAIL.COM

Address

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

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

NO

2

2

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)
Passenger 1

NAME: : P1

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

POLICE STATION NAME [OTHER] MACPHERSON N P P

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT: T/20190312/2150. On 12/3/2019 at around 1410 hrs, I was driving my vehicle (SLH4260E) together with one paassenger towards Bukit Timah road from Clemenceau Avenue. I was at the roundabout on the 3rd lane going towards 2nd exit (Bukit Timah road). The 4th lane was mean for vehicle turning to the 1st exit(Scotts road). Just when Scotts road was directly on my left, one vehicle from my left (4th lane) did a dangerous lane changing towards my lane, causing a slight collision with my vehicle. I then stopped my vehicle immediately however the vehicle drove off without stopping. I then realized tht my vehicle front left bumper was badly scratched. Due to heavy traffic, I could not managed to catch up with the vehicle. After alighting the passenger, I headed to GRAB office to view the in car camera footage from my vehicle and discovered that the vehicle who has collided with me has the plate number SMC6842C. I wish to state that the whole incident was captured by my in car camera.

Attachment(s)

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

Remarks/ Reasons: RETRIEVING

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SMC6842C

Vehicle Make/Model/Colour PORSCHE /CAYENNE 3.6 A

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)

UNKNOWN DRIVER

UNKNOWN

SKETCH PLAN

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 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.
- 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 awyers/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.

VERIFIED BY AJAX MARS REPORTING OFFICER MOHD FADZLY BIN ISMAIL

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

Witnessed by Reporting Centre Personnel

Sketch Plan



POLICE REPORT





1 of 3

Report No. T/20190312/2150

Police Station Of Origin: MacPherson NPP 54 Pipit Road #01-82/84 SINGAPORE 370054

Tel No: 1800-7449999

REPORT OF	A TRAFFIC	ACCIDENT
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Station Diary No.: Date/Time Report Made: Vide Report No.: 32

12/03/20	19 17:27				
Informa	nt's Partice	ulars	4.5		
Name of Informant: SEE HAI HENG			Address: APT BLK 48 CIRCUIT ROAD #07-739 SINGAPORE 37004		
	Type / ID No.: IC NO / S1482746C		Contact No.: Home/Office:	Mobile: 92705283	
Nationali	ty: ORE CITIZ	EN	Email:	il:	
Sex: Male	Age: 58	Date of Birth: 08/09/1960	Type of Informant: Driver	Institution / School Name:	
Race: Chinese			Language:	Institution / School Hams	
Occupation: GRAB			Driving Licence Information: Class: 2B,3	ion: Date of Expiry:	

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 12/03/2019 14:10	Type of Location: Roundabout	
CLEMENCEA BUKIT TIMAH At the rounda Weather:	ROAD	Road Surface:		Road Speed Limit:	
Clear Fraffic Flow:		Traffic Control:	THE PARTY	Traffic Volume: Heavy	
				Anyone conveyed by	

Details of Vo	SINCIG IIIVO		Model	Color	Condition	No of Passeng
Vehicle No.	Type	Make	Model	COIOI	Condition	140 OF F GOODING
SLH4260E	Car				9 300	1
	-				11 11 11	0
SMC6842C	Car			The state of the s		Section 1

POLICE REPORT





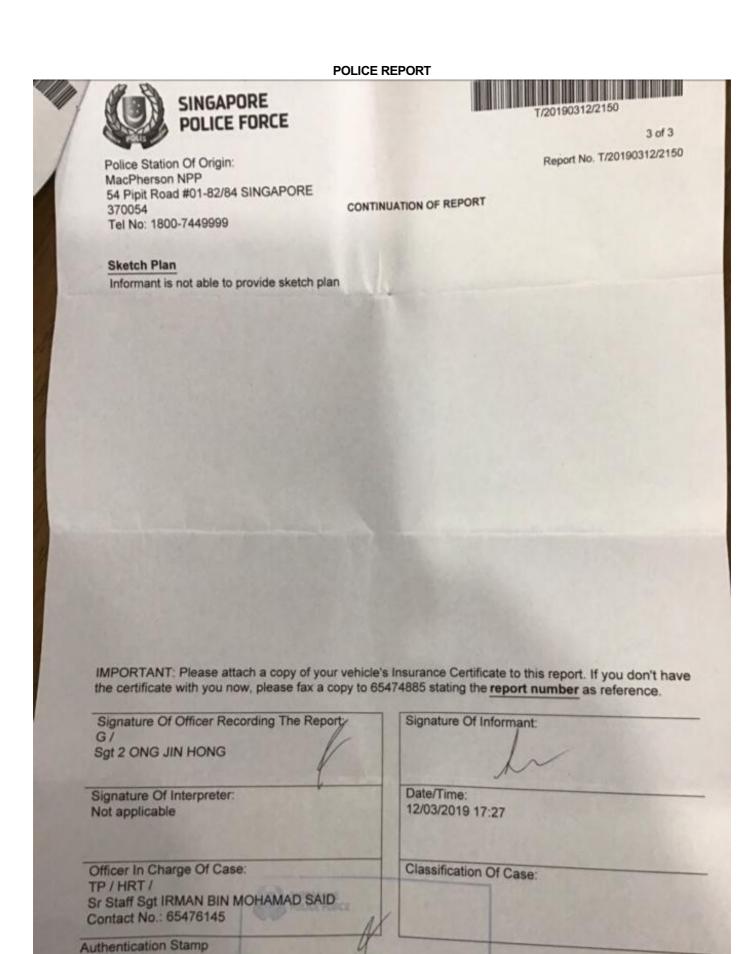
2 of 3

Report No. T/20190312/2150

Police Station Of Origin: MacPherson NPP 54 Pipit Road #01-82/84 SINGAPORE 370054 Tel No: 1800-7449999

CONTINUATION OF REPORT

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NP168

Accident Photo



Accident Photo



Accident Photo









