

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	30/04/2019 17:41
Date Of Accident	06/04/2019 09:45
Exact Location Of Accident	AMOY STREET FOOD CENTRE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLU2323C
Insured/Policyholder	
Name Of Registered Owner	GAN CHYE GIM (YAN CAIJIN)
NRIC No	S7442762F
Email Address	GAN_LOUIS@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-96823236
Alternative Phone No	OTHERS-96823236

Vehicle Particulars

Manufacturer	BMW
Model	520D
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	REPORTING ONLY
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	5097528889-01
Cover Note Number	

Driver

Name of Driver	GAN CHYE GIM (YAN CAIJIN)
NRIC No	S7442762F
Date Of Birth	24/12/1974
Occupation	INDOOR
Date Of Driving Pass	16/08/1993
Driving Experience	25 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96823236
Fax Number	
Contact Number	OTHERS-96823236
EEmail Address	GAN_LOUIS@HOTMAIL.COM

Address	79 LENGKONG DUA
Postcode	417734
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	1
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 KEMBANGAN NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 112 LENGKONG TIGA #01-215 , POSTCODE: 410112 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7489999 - FAX NO: 67454676
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190407/2065

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	
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	NA/UNKNOWN
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:

30/4/19

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

30/4/19

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

0105/2019
Roshan Kumar

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLEASE REFER TO POLICE REPORT
T/20190407/2065

DECLARATION

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


Policyholder's Signature
Date & Time:

30/4/19
GIARMA, VA


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

30/4/19


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

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190407/2065

Police Station Of Origin:
Kampong Kembangan NPP
112 Lengkok Tiga #01-215 SINGAPORE
410112

Tel No: 1800-7489999

1 of 3

Report No. T/20190407/2065

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/04/2019 14:25		Vide Report No.:	Station Diary No.: 8
Informant's Particulars			
Name of Informant: GAN CHYE GIM		Address: 79 LENGKONG DUA SINGAPORE 417734	
ID Type / ID No.: NRIC NO / S7442762F		Contact No.: Home/Office: Mobile: 96823236	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 44	Date of Birth: 24/12/1974	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: Self Employed		Driving Licence Information: Class: 3,4 Date of Expiry:	

General Information of the Accident

Type of Accident: Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 06/04/2019 10:20	Type of Location: Car Park
Location: Along Road 1 Traveling Toward Road 2 TELOK AYER STREET AMOY STREET Open space parallel parking along Telok Ayer St towards Amoy St, opposite "THE CLIFT" building			
Weather: Clear	Road Surface: Dry	Road Speed Limit:	
Traffic Flow:	Traffic Control:	Traffic Volume:	
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
SLU2323C	Car	BMW	520D M-SPORT AUTO	White	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLU2323C	NTUC Income Insurance Co-Operative Limited	5097528889-01	24/01/2019	23/01/2020

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190407/2065

2 of 3

Police Station Of Origin:
Kampong Kembangan NPP
112 Lengkok Tiga #01-215 SINGAPORE
410112
Tel No: 1800-7489999

Report No. T/20190407/2065

CONTINUATION OF REPORT

Brief Details.

On 06.04.2019 at about 0945hrs, I drove and parked my vehicle, a white colour BMW of Reg Plate number; SLU2323C along the open space parallel parking lots between Amoy Street Food Centre and a building known as "THE CLIFT". After successfully parked my said vehicle inside a parking lot number: 80, I secured my vehicle and walked over to the said food center for my breakfast.

On the same day at about 1020hrs, I returned to my said parked vehicle and discovered damages found on the front portion of my vehicle's bumper area. Shortly later, I realized that my front registration plate was cracked and my vehicle's sensory system which includes the Cruise Control system and Front-end Collision Warning system was faulty which I believe cause by the impact at the front portion of my vehicle.

My said vehicle is installed with In-Car CCTV recording system however at that moment I realized that my SD card memory is full and unable to record the footage of the incident. I noticed that there are a few Police Polcam cameras located at the vicinities of the said Amoy Street Food Centre of Address No: 7 Maxwell Road S(069111) which I believed may have captured the whole incident. The distance of the said Polcams to my parked vehicle was around 30-40 meters away. No eye-witness had approached me at scene. There is no note left behind on my vehicle's front windscreen.

At this point of time, an anonymous vehicle had collided to my vehicle's front portion area. I do not know the cost of damage of my vehicle. I am lodging this report for Traffic Police follow-up action.



POLICE REPORT



SINGAPORE
POLICE FORCE



T/20190407/2065

Police Station Of Origin:
Kampong Kembangan NPP
112 Lengkong Tiga #01-215 SINGAPORE
410112
Tel No: 1800-7489999

3 of 3

Report No. T/20190407/2065

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:

G /

SI RASHIDI BIN ABU BAKAR

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / HRT /

Sr Staff Sgt TAN JEOK LENG

Contact No.: 65476144

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

07/04/2019 14:25

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



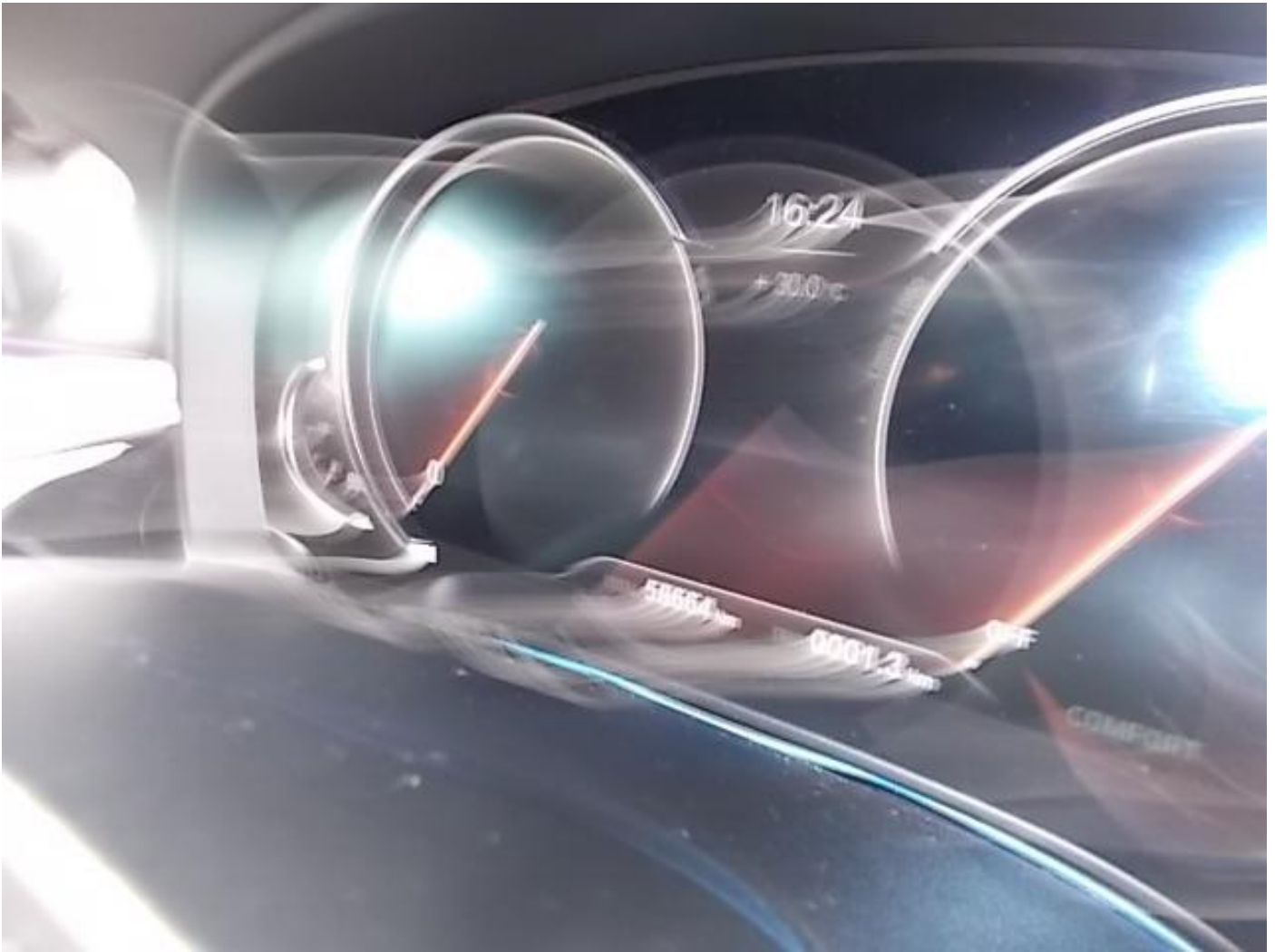
Accident Photo



Accident Photo



Accident Photo



Accident Photo

