

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	03/05/2019 15:17
Date Of Accident	21/04/2019 09:00
Exact Location Of Accident	JOHOR JAYA
Country/State of Loss	MALAYSIA/JOHOR DARUL TAKZIM

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMH7959S
Insured/Policyholder	
Name Of Registered Owner	OSCARS VALUE RENT PTE LTD
Co Reg No	201818533E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91129911
Alternative Phone No	OFFICE-91129911

Vehicle Particulars

Manufacturer	CHEVROLET
Model	CRUZE 1.6L AUTO ABS D/AB 2WD 4DR
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	5107320495
Cover Note Number	

Driver

Name of Driver	YONG CHEE WEE (YANG ZHIWEI)
NRIC No	S7411377Z
Date Of Birth	08/04/1974
Occupation	INDOOR
Date Of Driving Pass	18/07/1996
Driving Experience	22 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92971711
Fax Number	
Contact Number	OFFICE-92971711
Email Address	NOEMAIL

Address	BLK 210A PUNGGOL PLACE #15-1222
Postcode	821210
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?	YES
Foreign Vehicle Registration Number	UNKNOWN (PRIVATE CAR)
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?	
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	WHAMPOA NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 29 JALAN BAHAGIA , POSTCODE: 320029 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2507999 - FAX NO: 63554314
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - E/20190422/2044.

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	UNKNOWN
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)

Accident 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.



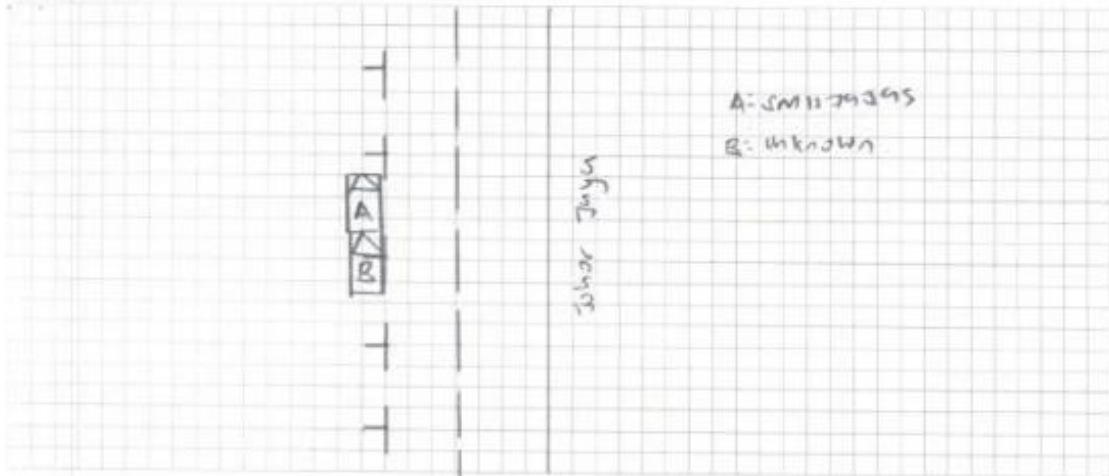
Policyholder's Signature
Date & Time:

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

Refer to police report - E/2019/0422/2044.

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DECLARATION

I/We declare that

all 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.:

OSCAR'S Sketch Plan Form 3/2

Police Report



**SINGAPORE
POLICE FORCE**



E/20190422/2044

1 of 2

POLICE REPORT (NP299)

Report No. E/20190422/2044

Police Station Of Origin
Whampoa NPP
29 Jalan Bahagia #01-368 SINGAPORE
320029
Tel No: 1800-2507999

Date/Time Report Made 22/04/2019 14:03	Vide Report No.	Station Diary No. 36
Name Of Informant YONG CHEE WEE	Address APT BLK 210A PUNGGOL PLACE #15-1222 SINGAPORE 821210	
ID Type / ID No. NRIC NO / S7411377Z	Contact No. Home/Office	Mobile 92971711
Nationality SINGAPORE CITIZEN	Email Address	
Occupation Process Engineer	Sex Male	Age 45
Institution/School Name	Date of Birth 08/04/1974	Race Chinese
Date/Time Of Incident 21/04/2019 09:00	Language English	
	Location Of Incident Johor Bahru MALAYSIA	

Brief details.

I had rented the vehicle SMH7959S (Chevrolet Cruise) from Oscars Leasing on 18/04/2019 in the afternoon. I drove to Johor Bahru, Malaysia in the evening. At that point in time, everything was intact.

On 21/04/2019 at about 0900hrs, I had stopped my vehicle at the parallel parking space near Johor Jaya. I then went to eat at nearby coffee shop. At about 0945hrs, I returned to my vehicle and spotted that the rear bumper was damaged. A part of it was detached. I believed that it was hit by another vehicle. There

Signature Of Officer Recording The Report: E / Sgt 3 ERWIN SUTRISNO BIN NADIMOH	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 22/04/2019 14:03
Officer In-Charge Of Case: E / Tanglin Police Divisional Investigation Branch / Insp LIM LI JING Contact No.: 63914759	Classification Of Case:

Authentication Stamp

	SINGAPORE POLICE FORCE	SN 167
SIGNATURE		

Police Report



**SINGAPORE
POLICE FORCE**



E/20190422/2044

2 of 2

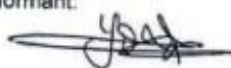
POLICE REPORT (NP299)


CONTINUATION OF REPORT

Report No. E/20190422/2044

was no note from anyone claiming responsibility for the hit.

I then returned back to Singapore later that day. I am lodging this report for record and for insurance/rental purposes.

Signature Of Officer Recording The Report: E / Sgt 3 ERWIN SUTRISNO BIN NADIMOH	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 22/04/2019 14:03
Officer In-Charge Of Case: E / Tanglin Police Divisional Investigation Branch / Insp LIM LI JING Contact No.: 63914759	Classification Of Case:
Authentication Stamp	

 SINGAPORE POLICE FORCE	 SN 167
SIGNATURE	

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

