SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number

EMail Address

- 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.

aforesaid.			
	ACCIDENT STATEMENT		
Date Of Report	11/05/2019 09:20		
Date Of Accident	10/05/2019 16:00		
Exact Location Of Accident	BOURNEMOUTH ROAD		
Country/State of Loss	SINGAPORE		
D	ETAILS OF OWN VEHICLE		
Vehicle Registration Number	SKX5816Z		
Insured/Policyholder			
Name Of Registered Owner	SIA CHEE PENG		
NRIC No	S6932616A		
Email Address	CPSIA89PT@YAHOO.COM.SG		
Mobile Phone No	(LOCAL) +65-93684351		
Alternative Phone No	OTHERS-93684351		
Vehicle Particulars			
Manufacturer	HONDA		
Model	VEZEL-1.5 1.5X CVT (A)		
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	THIRD PARTY		
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	5076550167-03		
Cover Note Number	18/12/2018 TO 17/12/2019		
Driver			
Name of Driver	SIA CHEE PENG		
NRIC No	S6932616A		
Date Of Birth	23/09/1969		
Occupation	OUTDOOR		
Date Of Driving Pass	15/11/1993		
Driving Experience	25 YEARS AND 5 MONTHS		
Gender	MALE		
Mobile Number	(LOCAL) +65-93684351		
Fax Number			
Contact Number	OTHERS 02004254		

OTHERS-93684351

CPSIA89PT@YAHOO.COM.SG

BLOCK 376A HOUGANG STREET 32 Address

#10-08 531376

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

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED Type Of Accident

Weather Conditions **CLEAR** Road Surface DRY

Other Information

Postcode

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 YES

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance. Number of Passengers (Including Driver)

0

NO

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name HOUGANG NEIGHBOURHOOD POLICE CENTRE

ROAD: 60 HOUGANG AVE 9, POSTCODE: 538775, COUNTRY: Police Station Address

SINGAPORE

Police Station Contact TEL NO: 1800-4890999 - FAX NO: 63128989

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

Refer to Police Report:- T/201920510/2184

Attachment(s)

Are accident photos available for attachment?

YES

NO

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number YN235U

Vehicle Make/Model/Colour

LORRY

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Page 2 of 14

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

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:

- 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)
 - (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
- 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.
- 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.
- 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 5 50.
Date & Time: 1//05/19 C Otfo h

Driver's Signature

(If driver is not the policyholder)

Reporting Centre Personnel's Signature

Lam WPT Name:

NRIC/FIN No.: 66864052

Sketch Plan Pg. 2

ETCH PLAN
Dec verse de la companya della companya della companya de la companya de la companya della compa
Bournemouth Royd
A: SLX 5816 Z B: YN 235 U
B: YN 235 U
SCRIBE CIRCUMSTANCES OF THE ACCIDENT
Refer to Police report: -7/20190510/2184
CLARATION
e declare the foregoing particulars are true in every respect.
cyholder's Signature e & Time: Clf driver is not the policyholder) Date & Time: Clf driver is not the policyholder) Name: Name: NRIC/FIN No.: G686 463 7 R

Police Report Pg. 1





Date of Expiry:

Police Station Of Origin: Hougang N.P.C

60 Hougang Avenue 9 SINGAPORE 538775

Tel No: 1800-4890999

SAFETY OFFICER

REPORT OF A TRAFFIC ACCIDENT

1 of 3 Report No. T/20190510/2184

10/05/2019 19:03	Vide Report No.:	Station Diary No.: 114
Informant's Particulars		
Name of Informant: SIA CHEE PENG	Address: APT BLK 376A HOUGANG STRE 531376	ET 32 #10-08 SINGAPORE
ID Type / ID No.: NRIC NO / S6932616A	Contact No.: Home/Office: M	lobile: 93684351
Nationality:	Email:	***************************************

SINGAPORE CITIZEN Sex: Age: Date of Birth: Type of Informant: Male 49 23/09/1969 Vehicle Owner Race: Language: Institution / School Name: Chinese Occupation: Driving Licence Information:

Class:

General Information of the Accident Non-Injury Drink Date/Time of Type of Location: Type of Hit and Run Drive: Accident: Straight Road Accident: No 10/05/2019 16:00 Location: Along Road 1 **BOURNEMOUTH ROAD OUTSIDE 30 BOURNEMOUTH ROAD** Weather: Road Surface: Road Speed Limit: Clear Dry Traffic Flow: Traffic Control: Traffic Volume: One Way Not Controlled Light Type of Collision: Anyone conveyed by Between Moving Vehicles - Head To Rear ambulance: No

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SKX5816Z	Car					0
YN235U	Lorry					0

Police Report Pg. 2





Police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775

Report No. T/20190510/2184

Tel No: 1800-4890999

CONTINUATION OF REPORT

Brief Details.

On 10/05/2019 at about 0810hrs, I parked my vehicle (SKX5816Z) at the incident location and everything

On the same day at about 1600hrs when I went back to retrieve my vehicle, I discovered there was damaged on the front of my vehicle. I retrieved my in-car camera and it revealed that there was a vehicle (YN235U) with 'HANAKO' printed on the vehicle's body, had reversed and collided onto the front of my vehicle and left without placing any notes.

There isn't any government properties damaged and no one injured.

Police Report Pg. 3





Police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775 3 of 3 Report No. T/20190510/2184

60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999 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	Signature Of Informant:
Sgt 3 JANSEN KWOK SHU HAO		
Signature Of Interpreter: Not applicable		Date/Time: 10/05/2019 19:03
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt TAN JEOK LENG Contact No.: 65476144	\bigcap	Classification Of Case:
Authentication Stamp NP168 Signature	niv das	
i de la companya de l La companya de la companya de	U104	











