

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 | 06/06/2019 11:41 |
| Date Of Accident | 05/06/2019 00:35 |
| Exact Location Of Accident | SIMS AVE B4 TURNING INTO GEYLANG SERAI |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------|
| Vehicle Registration Number | SJE2277K |
|-----------------------------|----------|

Insured/Policyholder

| | |
|--------------------------|---------------------------------|
| Name Of Registered Owner | MANAGED PRINT SOLUTIONS PTE LTD |
| Co Reg No | 201611716Z |
| Email Address | NOEMAIL |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-81233009 |

Vehicle Particulars

| | |
|--|----------------|
| Manufacturer | TOYOTA |
| Model | AXIO |
| Exact Purpose for which vehicle was being used at time of accident | COMMERCIAL |
| 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 HIRE |

Insurance Company

| | |
|---------------------------|--|
| Name of Insurance Company | NTUC INCOME INSURANCE CO-OPERATIVE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | 5106958968 |
| Cover Note Number | - |

Driver

| | |
|----------------------|------------------------|
| Name of Driver | LOH AH TEE (LUO YACHI) |
| NRIC No | S8038999Z |
| Date Of Birth | 28/11/1980 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 26/12/2003 |
| Driving Experience | 15 YEARS AND 5 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-94502228 |
| Fax Number | |
| Contact Number | |
| Email Address | NOEMAIL |

| | |
|---|------------------------------|
| Address | BLK 360B ADMIRALTY DR #08-64 |
| Postcode | 752360 |
| 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 | COLLISION - CHANGE/CROSS LANE |
| 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? | |
| 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) | 3 |
| Passenger 1 | NAME: : UNKNOWN GENDER: : FEMALE |
| Passenger 2 | NAME: : UNKNOWN GENDER: : FEMALE |

Details of Police Action

| | |
|---|---|
| Was the accident reported to the police? | YES |
| If Yes, Please state which Police Station | |
| Police Station Name | SEMBAWANG NEIGHBOURHOOD POLICE CENTRE |
| Police Station Address | ROAD: 4 SEMBAWANG CRESCENT , POSTCODE: 757633 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: 1800-5549999 - FAX NO: 68522499 |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

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 | GBF9763S |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | COMMERCIAL VEHICLE |
| 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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5. Any false reporting may be referred to the Police for investigation.
6. The 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 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

A = STE 2277K
B = GEF 9763S

Sims Ave 84 turning into Geylang

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Seri

Please Refer to Police Report

DECLARATION

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

Policyholder's Signature
Date & Time:

Signature: [Signature]



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

[Signature]

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

[Signature]

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190605/2011

Police Station Of Origin:
Sembawang N.P.C
4 Sembawang Crescent SINGAPORE
757633
Tel No: 1800-5549999

1 of 3

Report No. T/20190605/2011

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|------------------|--------------------------|
| Date/Time Report Made: 05/06/2019 02:43 | Vide Report No.: | Station Diary No.: 15 |
|--|------------------|--------------------------|

Informant's Particulars

| | | | |
|--|---|------------------------------|------------------------------|
| Name of Informant: LOH AH TEE | Address: APT BLK 360B ADMIRALTY DRIVE #08-64 SINGAPORE 752360 | | |
| ID Type / ID No.: NRIC NO / S8038999Z | Contact No.: | Mobile: 94502228 | |
| Nationality: SINGAPORE CITIZEN | Home/Office: | Email: | |
| Sex: Male | Age: 38 | Date of Birth: 28/11/1980 | Type of Informant: Driver |
| Race: Chinese | Language: English | Institution / School Name: | |
| Occupation: PRIVATE HIRE DRIVER | Driving Licence Information: Class: 3 | Date of Expiry: | |

General Information of the Accident

| | | | | |
|--|---------------------------|---|---|--|
| Type of Accident: | Non-Injury Hit and Run | Drink Drive: No | Date/Time of Accident: 05/06/2019 00:45 | Type of Location: Straight Road |
| Location: Along Road 1 Traveling Toward Road 2 SIMS AVENUE GEYLANG SERAI Sims Ave turning into Geylang Serai | | | | |
| Weather: Clear | | Road Surface: Dry | | Road Speed Limit: |
| Traffic Flow: One Way | | Traffic Control: Traffic Light - Working | | Traffic Volume: Moderate |
| Type of Collision: Between Moving Vehicles - Head To Side | | | | Anyone conveyed by ambulance: No |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|------|--------|--|-------|---------------------|-----------------|
| GBF9763S | Van | NISSAN | NV350 PANEL VAN 2.5 5MT 5DR EURO V | White | Slightly Damaged | 1 |
| SJE2277K | Car | TOYOTA | COROLLA AXIO 1.5X A | Grey | Slightly Damaged | 2 |

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190605/2011

Police Station Of Origin:
Sembawang N.P.C
4 Sembawang Crescent SINGAPORE
757633
Tel No: 1800-5549999

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Report No. T/20190605/2011

CONTINUATION OF REPORT

| | | | |
|-----------------------------------|----------------|--|---------------------------------|
| Details of Person Involved | | | |
| Any Pedestrian Involved: No | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | |
| Driver | | | |
| Name | LOH AH TEE | ID No. | S8038999Z |
| Related Vehicle | SJE2277K (Car) | Contact No. | 94502228 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: 3 Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |

Brief Details.

On 05/06/2019, at about 0045hrs, I was driving my vehicle, SJE2277K, along Sims Ave in the second lane. As I was approaching the entrance Geylang Serai, I signaled right and tried to change lanes into the first lane. Half of my vehicle managed to enter into the first lane, and it was stationary there for a few seconds due to a slight congestion along Geylang Serai.

When I moved forward to fully enter into the first lane, I saw that the van behind me, GBF9763S, started moving closer towards me. I quickly honk at the driver, but the driver still continued moving forward and its front left area collided into my vehicle's right side. As there was a slight congestion already, we did not want to cause further congestion by stopping there. The other driver told me to drive forward and thus I did so and waited for him there. I waited for the other driver for about a few minutes but he did not drive over. I came down and took some photos and left as I had a passenger in my vehicle.

There are no injuries. There are multiple scratches and a dent above the front right mud guard area. There are also scratches to my front right wheel cap. My bumper is also loose. The right side of my bonnet is also dented. I also wish to inform that when I stepped on the vehicle's breaks, there is a weird sound. I do not have any in-car camera.

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190605/2011

Police Station Of Origin:
Sembawang N.P.C
4 Sembawang Crescent SINGAPORE
757633
Tel No: 1800-5549999

3 of 3

Report No. T/20190605/2011

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:

L /

Sgt 2 TAN YU KAI, MARCUS

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

05/06/2019 02:43

Officer In Charge Of Case:

TP / HRT /

SI ABDUL KAREEM BIN ABDUL HAGUE

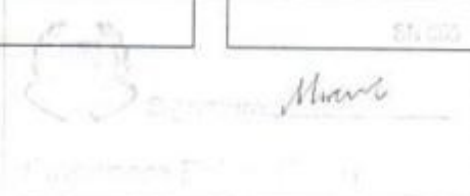
Contact No.: 65476079

Classification Of Case:

SI 005

Authentication Stamp

NP168



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo

