

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	04/06/2019 18:52
Date Of Accident	03/06/2019 22:30
Exact Location Of Accident	ALONG COLLYER QUAY TOWARDS ESPLANADE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SBR938B
Insured/Policyholder	
Name Of Registered Owner	LOH AH LENG
NRIC No	S1287188J
Email Address	MELVYNLOH@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-96260326
Alternative Phone No	OTHERS-96260326

Vehicle Particulars

Manufacturer	NISSAN
Model	SYLPHY 1.6 CVT
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	AVIVA LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	10859956
Cover Note Number	N.A

Driver

Name of Driver	LOH CHER-E
NRIC No	S9109368E
Date Of Birth	28/02/1991
Occupation	INDOOR
Date Of Driving Pass	05/12/2011
Driving Experience	7 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92302644
Fax Number	
Contact Number	
Email Address	LOH.CHER.E@GMAIL.COM

Address	NIL
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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	DRIZZLING
Road Surface	WET

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?	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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	TRAFFIC POLICE UBI (ONLINE)
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

Refer to Police Report Ref: T/20190604/7022 lodged at Traffic Police UBI (Online). I was driving in my car along the left most lane on the road and filtered right to the 2nd left most lane on the road. A taxi with car plate no. SHA8822S came from the right and hit my car. It did not stop so I followed the taxi until it reached a taxi stand. 2 passengers entered the taxi and the driver took the chance to inspect the damage in the car. I came out of my car intending to speak to him but he ignored me after checking his taxi and drove off with the passengers. At no point in time did he signal any intention to talk to me or pass me his contact. As such, I was unable to get his personal details. Please refer to the following 4 videos for more information. Landmark is Ocean Financial Centre

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	4 VIDEO FOOTAGES UPLOADED TO FILEZILLA
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHA8822S
Vehicle Make/Model/Colour	HYUNDAI I40 1.7 CRDI F/L AT ABS AIRBAG 4DR / YEL
Details Of Properties	NIL
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)


Sketch Plan


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8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

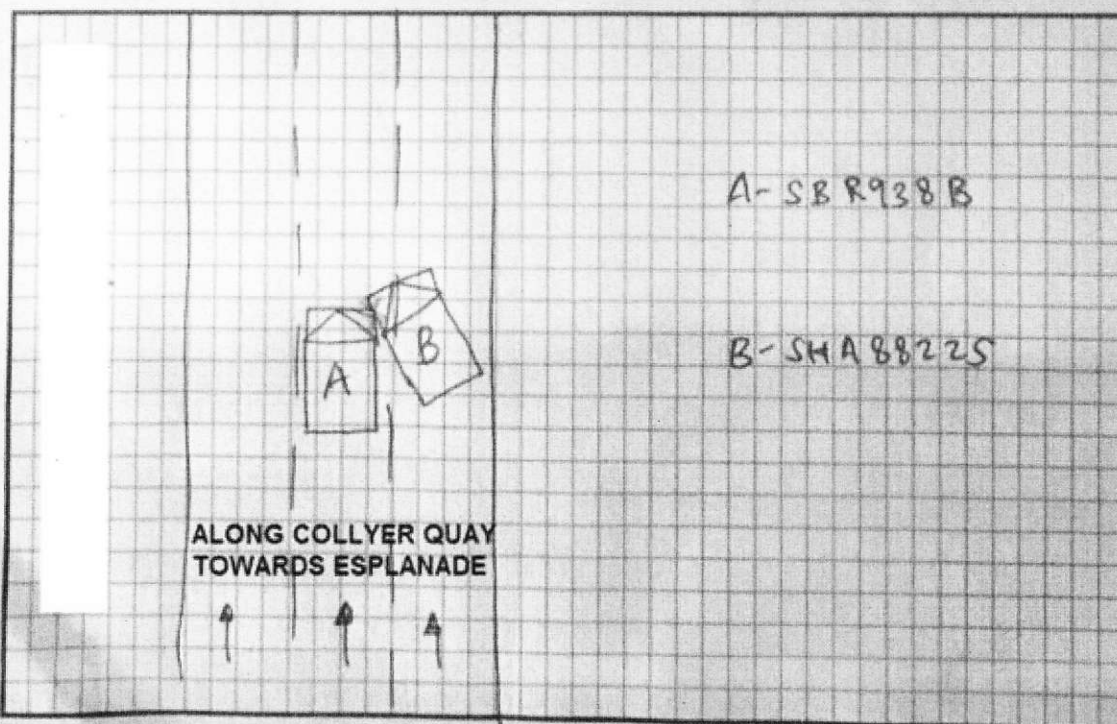
 - (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.


 4/6/19
 Policyholder's Signature / Date & Time


 4/6/19
 Driver's Signature (If driver is not the policyholder) / Date & Time

VERIFIED BY AJAX MARS
 REPORTING OFFICER
 Mohammad Azaly Bin Abdullah
 Witnessed by Reporting Centre
 Personnel

Sketch Plan



Police Report Pg. 1



**SINGAPORE
POLICE FORCE**



T/20190604/7022

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20190604/7022

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/06/2019 19:15		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: LOH CHER-E			Address: 77 JURONG EAST STREET 13 #06-02 SINGAPORE 609653		
ID Type / ID No.: NRIC NO / S9109368E			Contact No.: Home/Office: Mobile: 92302644		
Nationality: SINGAPORE CITIZEN			Email: loh.cher.e@gmail.com		
Sex: Male	Age: 28	Date of Birth: 28/02/1991	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Personnel/Human resource officer			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 03/06/2019 22:30	Type of Location: Bend
Location: COLLYER QUAY				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SBR938B	Car					0
SHA8822S	Car			Yellow	Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20190604/7022

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20190604/7022

CONTINUATION OF REPORT

Driver			
Name	LOH CHER-E		ID No. S9109368E
Related Vehicle	SBR938B (Car)		Contact No. 92302644
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

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Please refer to the following 4 videos for more information. Landmark is Ocean Financial Centre

Front footage 1 - <https://drive.google.com/open?id=1PPurGeamP26DBEswsbPnla5dTsvAuF53>

Rear footage 1 - <https://drive.google.com/open?id=1Inl3xdtR3jPCE1okAhrZNfXvLhtcb6k1>

Front footage 2 - <https://drive.google.com/open?id=1qTFmuvTGGqsK-pm9x08b7dULpKc349P1>

Rear footage 2 - <https://drive.google.com/open?id=1VIGabjHR0ZL9Zz2wbOQe688joUFkQrvq>



**SINGAPORE
POLICE FORCE**



T/20190604/7022

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20190604/7022

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
ABDUL KAREEM BIN ABDUL HAGUE
Contact No.: 65476079

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
04/06/2019 19:15

Classification Of Case: