### 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 <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.

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	ACCIDENT STATEMENT
Date Of Report	12/06/2019 17:56
Date Of Accident	12/06/2019 13:10
Exact Location Of Accident	210 MARSILING CRES (CARPARK)
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLM5890D
Insured/Policyholder	
Name Of Registered Owner	KANG HOCK HUAT ROY
NRIC No	S7528801H
Email Address	ROY.KANG@REINHAUSEN.SG
Mobile Phone No	(LOCAL) +65-91265686
Alternative Phone No	OTHERS-91265686
Vehicle Particulars	
Manufacturer	BMW
Model	216D GRAN TOURER
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
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	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	P2008074
Cover Note Number	

### **Driver**

Name of Driver KANG HOCK HUAT ROY

NRIC No S7528801H
Date Of Birth 19/09/1975
Occupation INDOOR
Date Of Driving Pass 24/09/2001

Driving Experience 17 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91265686

Fax Number

Contact Number OTHERS-91265686

EMail Address ROY.KANG@REINHAUSEN.SG

BLK 19 HOUGANG AVENUE 3 #04-195 Address

Postcode

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

NO

NO

2

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

0 Number of Passengers (Including Driver)

**Details of Police Action** 

YES Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name **HOGANG N.P.C** 

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

**COUNTRY: SINGAPORE** 

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

### **Circumstances of Accident**

REFER TO ATTACH.

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Remarks/ Reasons: FILE TOO BIG-BURN CD

Was there any audio recorded?

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

SBH1010Z Vehicle Registration Number Vehicle Make/Model/Colour NISSAN WHITE

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

**Contact Number** 

Address

Postcode

Insurance Company Name

AXA INSURANCE PTE LTD

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Nature Of Damage

No. Of Passenger (Including Driver)

### Sketch Plan Pg. 1

### SKETCH PLAN

### **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.
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- 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. 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:

~inam

Driver's Signature (If driver is not the policyholder)

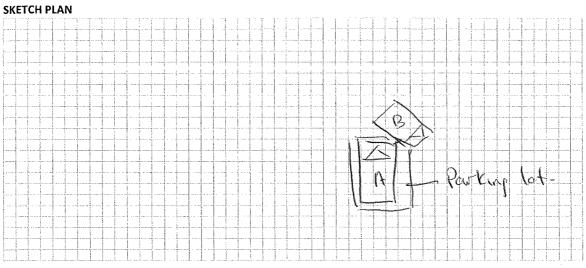
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

## Sketch Plan Pg. 2



### **DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

When returning to my car after lunch, I realised that the
right front bunger was found scratches and paint peel-off
I have retrived my video from our camera and observed
When returning to my car after furth, I replied that the right front bumps was found scrafethes and paint peel-off. I have retrived my video from car camera and observed the fine of accident happened around 1:06 pm by a white
Nissin Car.
The footage snown the driver was taying to make a strigged term into the parking stot and couring this accident happened. He did not text leave any form of contact after this accident and drove off view picking up
a & right turn into the parking stot and coming this
accident happend. He did not test leave any form of
Contact after this accident and drave off via picking up
a panenger

DECLARATION

I/We declare the foregoing 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.:

NRIC/FIN No.:





1 of 3

Report No. T/20190613/2001

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

Tel No: 1800-4890999

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Date/Tim 13/06/20	e Report M 19 00:19	ade:	Vide Report No.:	Station Diary No.: 8			
Informar	nt's Particu	ilars					
Name of Informant: KANG HOCK HUAT, ROY			Address: APT BLK 19 HOUGANG AVENUE 3 #04-195 SINGAPORE 530019				
ID Type I	/ ID No.: D / S752880	)1H	Contact No.: Home/Office: Mobile: 91265686				
Nationality: SINGAPORE CITIZEN			Email:				
Sex:         Age:         Date of Birth:           Male         43         19/09/1975			Type of Informant: Vehicle Owner				
Race: Chinese			Language: Institution / School Name				
Occupat SENIOR	ion: (SALES M	ANAGER	Driving Licence Informatio Class: 2B,2A,3	n: Date of Expiry:			

General Infor	mation of the Accide	nt			
Type of Accident:	ka sa wasan sa sa kata haran ana kun sa		Date/Time of Accident: 12/06/2019 13:05	Type of Location: Car Park	
Location: Along Road 1 MARSILING (	CRESCENT of Blk 210 Marsiling (	Crescent (unknown Lo			
Weather: Clear		Road Surface: Dry		Road Speed Limit:	
Traffic Flow:		Traffic Control: Not Controlled		raffic Volume: lo Traffic	
Type of Collisi	on:		7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Anyone conveyed by ambulance: No	

/ehicle No.	Туре	Make	Model	Color	Condition	No of Passenge
SBH1010Z	Car	NISSAN		White		0
SLM5890D		BMW	216D	White	Slightly	





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Report No. T/20190613/20

tice Station Of Origin:

Hougang Avenue 9 SINGAPORE 538775

I No: 1800-4890999

CONTINUATION OF REPORT

ehicle Owner ame	KANG HOCK HUAT, ROY	ID No.	S7528801H
telated Vehicle	SLM5890D (Car)	Contact N	No. 91265686
lospital/Clinic	NIL	Class of Driving Licence & Expiry Da	
Date Treatment	NIL	Date Discharge NI	L
No. of Days gran	ted Medical Leave NIL	Degree of Injury NI	L <sub>i</sub>

### Irief Details.

In the 12/06/2019 at about 1250hrs, I parked my vehicle - One White BMW 216D (Registration Plate lumber: SLM5890D) at the Open Carpark of Blk 210 Marsiling Crescent (unknown lot number). I secure ny vehicle and left. Everything was normal.

On the same day at about 1320hrs, i came back to retrieve my vehicle and discovered that there was a paint chip and marks on the front right region of my vehicle. No note was left behind.

made a check on my in-vehicle CCTV and discovered that on the same day at about 1306hrs, One Vhite Nissan (Registration Plate Number: SBH1010Z) had grazed against the front right region of my ehicle when picking up a passenger. I strongly believe that the incident was what caused the damage.

wish to state that i am not aware if there is any CCTV at the incident location which secures where my ehicle was parked and whether or not it recorded the whole incident.





Police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775 Tel No: 1800-4890999

3 of a Report No. T/20190613/20

**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:  F /  Sgt 2 MOHAMAD ZULHIZWAN AQMA BIN MOHD ZULKEFLEE	Signature Of Informati:
Signature Of Interpreter: Not applicable	Date/Time: 13/06/2019 00:19
Officer In Charge Of Case:	Classification Of Case:















# Accident Photo SLM5890D

