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Owner / Driver: (4//		Tcl:)	
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Insured/Driver Liability: (%) [Note	-Est. Status (W	O): N: 0-20	%; P: 21-79	%. P: 80-100	%]	
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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 truthful and accurate 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.

	ACCIDENT STATEMENT
Date Of Report	02/09/2019 17:56
Date Of Accident	01/09/2019 02:00
Exact Location Of Accident	ALONG CHEONG CHIN NAM ROAD
Country/State of Loss	SINGAPORE
Market State of the Control of the C	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJW3573D
Insured/Policyholder	
Name Of Registered Owner	SRS AUTO HOLDINGS PTE, LTD.
Co Reg No	201709236H
Email Address	NISE_YAP@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-91890090
Alternative Phone No	OFFICE-91890090
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	130
Exact Purpose for which vehicle was being used at time of accident	CAR WAS PARKED
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5108747945
Cover Note Number	
Driver	
Name of Driver	YAP CHAI HONG
NRIC No	S8506077E
Date Of Birth	08/02/1985
Occupation	OUTDOOR
Date Of Driving Pass	23/11/2009
Driving Experience	9 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-91890090
Fax Number	
Contact Number	OTHERS-91890090
Pitted Kardeeve	AUGE VAR STORTAN SOLI

NISE_YAP@HOTMAIL.COM

Address

BLK 687A CHOA CHU KANG DRIVE

#15-392

Postcode

681687

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?

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)

0

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

ALEXANDRA NEIGHBOURHOOD POLICE POST

Police Station Address

ROAD: BLK 46-2 COMMONWEALTH DR. POSTCODE: 140462.

COUNTRY: SINGAPORE

Police Station Contact

TEL NO: 1800-4739999 - FAX NO: 64713569

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190902/2137

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 Witness 1

Name

UNKNOWN

Phone Number

87496350

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SKK7120C

Vehicle Make/Model/Colour

BMW

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Page 2 of 17

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- 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. 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 t
 - (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.
- (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:

Beporting Centre Personnel's Signature
Name:

NRIC/FIN No .:

DECLARATION

SKETCH PLAN

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

Name:

NRIC/FIN No .:





1 of 3

Report No. T/20190902/2137

Police Station Of Origin:

Alexandra NPP

46 Tanglin Halt Road #01-328 SINGAPORE

140462

Tel No: 1800-4739999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 02/09/2019 16:15		/lade:	Vide Report No.:	Station Diary No.	
Informant's Particulars					
Name of YAP CHA	Informant: AI HONG		Address: APT BLK 687A CHOA CHU I SINGAPORE 681687	KANG DRIVE #15-392	
ID Type / ID No.: NRIC NO / S8506077E			Contact No.: Home/Office: Mobile: 91890090		
Nationality: SINGAPORE CITIZEN		EN	Email:		
Sex: Female	Age:	Date of Birth: 08/02/1985	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation de Interior de			Driving Licence Information: Class: 3	Date of Expiry:	

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 01/09/2019 02:00	Type of Location Car Park
Parallel parkir	IN NAM ROAD	nt of 11 Cheong Chin		
Weather: Clear		Road Surface: Dry	R	oad Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled	1 1 2	raffic Volume: o Traffic
One Way Type of Collision: Moving Vehicle Against - Parked Vehicle			Α.	nyone conveyed by

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SJW3573D	Car	HYUNDAI	130 (FD)	Red	Slightly Damaged	0
SKK7120C	Car	BMW	X3	Black		0

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





Police Station Of Origin: Alexandra NPP

2 of 3

46 Tanglin Halt Road #01-328 SINGAPORE 140462

Report No. T/20190902/2137

Tel No: 1800-4739999

CONTINUATION OF REPORT

Name	VAD CUALLICATE				CONTRACTOR OF THE PARTY OF THE
	YAP CHAI HONG		ID No).	S8506077E
Related Vehicle	SJW3573D (Car)				Parameter National Property of the Parameter State of the Parameter
	corrob (car)		Conta	act No.	91890090
Hospital/Clinic	NIL			DOGNESS	
	ME		Class Drivin Licent	g ce &	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Expiry	Date	
No. of Days grant		Date Disch	narge	NIL	
	ed Medical Leave NIL	Degree of	Injury	NIL	The second second

Brief Details.

On 01/09/2019 at about 0145hrs, I had parked my car, a red Hyundai 130 bearing vehicle registration number SJW3573D at lot 15 of carpark C0011 at 11 Cheong Chin Nam Road in front of Al Azhar Restaurant. At about 0200hrs, I returned to the car and noticed that the front right area of the car's (above the front right wheel) had slight dents and scratches. I was eating at one of the food places along the road when a member of public approached me and asked me if my parked vehicle belonged to me. After I confirmed that it was, he then informed that he had witnessed a black BMW bearing VRN SKK7120C trying to park at the lot in front of my vehicle when it suddenly collided into the front right part of my car. The car subsequently drove off and did not leave his particulars. I did not notice if there were CCTV's in the vicinity of the incident. The MOP who approached me did not reveal his name but provided his contact number as \$7496350. My car does not have an in-car camera. WITMER





Police Station Of Origin: Alexandra NPP 46 Tanglin Halt Road #01-328 SINGAPORE 140462 Tel No: 1800-4739999

3 of 3 Report No. T/20190902/2137

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 Interpreter: Not applicable Date/Time: 02/09/2019 16:15 Officer In Charge Of Case: TP / HRT / Classification Of Case:	Signature Of Officer Recording The Report: D / Sgt 2 MUHAMMAD YUSOFF BIN MOHD RASID	Signature Of Informant:
TP / HRT /	Signature Of Interpreter: Not applicable	
Insp GOH GEOK LYE Contact No.: 65476148	TP / HRT / Insp GOH GEOK LYE	Classification Of Case:

Claim Handling

				OSTELL TORREST						
басшая Турм	Per Accident	Windscreen Excess		9.09						
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⇒ Benefits										
□ GST Registered Informat GST Registered										
QST Megistration No.	769 201709236H		GST Status Vent			D1/06/2011				
Modification History										
Policyholder Hailing Add	ress									
Address 1	5 KLING CHONG ROAD	Andress 2	#01-51 \$85 BUILDING		Address 3			SINGN	ORE 13914	12
Address 4		Address Type	Singapore attitess		Post Code	e e		539141		
SINE No.		Related Policy Nymper	9112184296							
□ Of Oriver Infa Onser Name	Unnamed Driver	Driver Type	Unnamed Driver						-	
Unnamed privat Name	YAP CHALHONE	Driver NRIC	Sesocorre		Driver Dio	n		48(02)	995	
Regular Date of Other License	23/11/3006	Driver Age	34		Ortolog Ex			7		
Contact No (Mobile)	sinsoner	Contact No.(Office)			Contact N	o.(Hurre)				
Aldress I	BLK 687A #15-382	Address 2	CHOA-CHU KANG DIQVE		Aldress 1			101GA	4046 61110	67
Address 4 Unit Na.	G. Van	Address Type	Foreign adthess		Plat Gode			483687		
CHE NE	19-392 Yes + No	Teller Mehada Ne	- CONTRACTOR		Delices Size			20.00		
Does he own a Singapore	168 + 160	Diffeer Vehicle No.	SW3517D		Distant Inte	mat Couts	114	MYDE		
Does he own a Singapore Registered curf										
Regetaned car?										
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Upwarted By/Clate

Claim Handling(accident reporting Claim Task 001 OD-MX)

8/2/2019	Claim H	andling(accide)	nt reporting. Claim Task. 0	O1 OD-MX)
113	WAC_BURIT_MERAH_BUIGFO(NATIONAL ASSESSMENT CENTRE SERVICE S (BURIT MERAH)) on 52 Sep 2010 18:21	SAS	hirmal	SAS 2019-9-2
	MAC_BOXIT_MERAH_ROOGNE NATIONAL ASSESSMENT CENTRE SERVICE S (NURIT MENAH)) on N2 Sep 2019 18:17	Photoe	Normal	Photos 2019-4-2
	MAC_BURTT_MERAH, BODGTN, NATIONAL ASSESSMENT CENTRE SERVICE 5 (BOWTT MERAH)) on 02 Sep 2019 18:17	Photos	Normali	Photos 2019-9-7
0	NAC_SURST_MERAH_JIDDGTIK NATIONAL ASSESSMENT CENTRY SERVICE S (BONT MERAH)) on 82 Sep 2019 18:17	Phorus	Normali	Profes 2019-9-3
10	NAC_BURTT_MERAN_(100678); NATIONAL ASSESSMENT CENTRE RENVICE S (BURTT MERAN)) on 12 Sep 2019 18:15	Printer	(Name all	Photos 2019-9-2
do /	NAC_BAKIT_MERAH_HODGTG; NATIGINAL ABSESSMENT CENTRE SERVICE S (BOKIT MERAHS) IN UZ Sep 2019 18:15	Metax	Narmal	Photos 2016-9-2
	NAC_BUKIT_MERAH_BODE76 NATIONAL ASSESSMENT CENTRE SERVICE S (BORIT MERAH)) un 82 Sep 2019 18:15	Photos	Normal	Photox 2019-9-2
	NAC_BURIT_MERAH_BOOKTO(NATIONAL ASSESSMENT CENTRE SERVICE S (BURIT MERAH)) on 02 Sep 2019 18:15	Photos	Normal	Photos 2019-9-2
	NAC_BURIT_MERAH_BOOK/6(NATIONAL ASSESSMENT CENTRE SERVICE S (BURIT MERAH)) un 02 Rep 2019 18:15	Processe	Normal	Photos 2019-9-2
	NAC_BUKIT_MERAH_BOJE/NE NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on DZ SEB 2019 18/15	Photos	Normal	Photos 3019-3-2
⇒ Video List				
100000000000000000000000000000000000000				

Follow Date

Display in New Window | Scan and uploading

ACCIDENT STATEMENT

ACCIDENT DATE: 01,09,709 (DD/MM/YY	Y), TIME: (02 .00)(HH:MM
LOCATION: Cheory Chin Nam Road	L 1944
1. DETAILS OF VEHICLE	
alvehicle NUMBER: STW 3573 D	18° 21 NO
DINSURANCE COMPANY: MOUC	
C)POLICY NUMBER:	n
dIPOLICY TYPE: (COMPREHENSIVE / THIRD P)	PTY / THIPD O ADTY EIDE STREET
DIMAKE & MODEL: HYUNDAI 1	215
TITYPE: (SALOON / COUPE / MPV /VAN / LORE	Y / MOTORCYCLE / OTHERS
9) VEHICLE CATEGORY: (PRIVATE / COMMERC	MOTORCYCLEL OTHERS
THE WAS DE USING AT ACCIDENT TIME.	
ARE YOU CLAIMING UNDER YOUR OWN INCL	IRANCE IVES NO
IF NO, PLEASE STATE (THIRD PARTY CLAIM / R	EPORTING ONLY)
21. MOOKED / POLICY HOLDER	1.0
AINAME: YAP Chai Hong	(MALE / FEMALE)
DINRIC/FIN/PASSPORT: S856607E	CONTACT: 9189090
CIADDRESS: C87a choa che kang	duve #15-392
3681687	
* CONTINUE TO 3.d IF DRIVER ALSO POLICY HO	DLDER
Cluded and a DINAME: / SRS Auto Holdings D	T. Lett
Clinduding driver) diNAME: / SRS Auto Holdings P	te Ltd (MALE / FEMALE)
CU) CIADDRESS:	CONTACT:
"d) DATE OF BIRTH: (08/ 07/ 1985) (DD/	um/yyyyi .
e)OCCUPATION: (INDOOR / OUTDOOR)	sunctiff 3
DOATE OF DRIVING PACE 33/11/	2009
4. WAS DRIVER AN EMPLOYEE OF THE INSURE	D'S COMPANYS CVEST NOV
IF NO, RELATIONSHIP OF THE DRIVER WITH	INCHED THE
5. GIWEATHER CONDITION: (CLEAR / RAINING / C	OTHERS
D)ROAD SURFACE: (DRY) WET / OTHERS	
6. WAS ANYBODY INJURED (YES / NO)	
7. a) REPORTED TO POLICE (YES / NO)	
IF YES, PLEASE STATE WHICH POLICE STATION: B. THIRD PARTY VEHICLE	Alexandra .
He of passenger o) VEHICLE NUMBER: SKK7120C	0.00
Including driver) b) DRIVER'S NAME:	MODEL: BAW
() RIC/FIN/PASSPORT:	CONTRACT
9. THIRD PARTY VEHICLE	_CONTACT:
No of passanger of VEHICLE NUMBER:	_MODEL:
DRIVER'S NAME:	_MODEL:
I well ding driver) ORIVER'S NAME:	CONTACT
()	_CONTACT::
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2 11 12 12 12 16	hatmail com

email = nise-yap@hotmail.com



seles islantes a

Certif	icate of Insurance
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPEN MOTOR VEHICLES (THIRD PARTY RISKS AND COMPEN ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959	ISATION) RULES, 1960
Certificate Number: 5108747945-000031	Cover : Third Party
Index mark and Registration Number of Vehicle	100 to 10
Chassis Number	: 5JW95730
Name of Policyholder	: KMHDC510MAU236863
3. Effective Date of Insurance	: SRS AUTO HOLDINGS PTE, LTD.
Expiry Date of Insurance Expiry Date of Insurance	: 19 Jun 2019
S. Persons or Classes of Persons entitled to drive#	: 18 Jun 2020
(a) The Policyholder.	
(b) Any other person who is driving on the Policy	holder's order or with his/her permission
Provided that the person driving is permitted the Motor Vehicle or has been so permitted a enactment or regulation in that behalf from di	In accordance with the licensing or other laws or regulations to drive
 Limitations as to Use# (a) Use for social domestic and pleasure purpose 	s and in connection with the Policyholder's or Hirer's business.
This Policy does not cover	The state of the s
(a) Use for racing, pace-making, reliability trial or	speed-testing,
(b) Use for the carriage of goods (other than same	ples) in connection with any trade or business
(c) Use for any purpose in connection with the Mc	otor Trade.
# Limitations rendered Inoperative by Section 8 Act (Chapter 189) and Section 95 of the Road 1 headings.	of the Motor Vehicle (Third Party Risks and Compensation) Transport Act, 1987 (Malaysia), are not to be included under these
EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: \$\$1,500
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: N/A
NCD PROTECTION	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A
I/We hereby Certify that the Policy to which this Certification (Third Party Risks and Compensation) Act (Chagency : SININS AGENCY PTE. LTD. (0000 Date of Issue : 08 Apr 2019 14:49 hrs	ficate relates is issued in accordance with the provisions of the Motor lapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)
make	For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED
Countersigned By: Authorised Office	cer Chief Executive