

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	19/09/2019 14:02
Date Of Accident	18/09/2019 19:20
Exact Location Of Accident	526 BEDOK NORTH ST 3 CARPARK LOT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKC2104A
Insured/Policyholder	
Name Of Registered Owner	DE SAGON H CHRISTOPHER
NRIC No	S7912638A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-86066887
Alternative Phone No	OFFICE-86066887

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	JETTA
Exact Purpose for which vehicle was being used at time of accident	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	PRIVATE CAR

Insurance Company

Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D19MPC0000446
Cover Note Number	-

Driver

Name of Driver	NG KIM POH
NRIC No	S1398445Z
Date Of Birth	15/03/1959
Occupation	OUTDOOR
Date Of Driving Pass	01/11/1980
Driving Experience	38 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86165529
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 526 BEDOK NORTH ST 3 #02-468
Postcode	460526
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	FRIEND
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?	
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	BEDOK POLICE DIVISIONAL HQ (G DIVISION)
Police Station Address	ROAD: 30 BEDOK NORTH ROAD , POSTCODE: 469676 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2440000 - FAX NO: 64443009
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT G/20190919/7020

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SME3454Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
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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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

Vehicle A: SKC 2104A
Vehicle B: SNE 3454Z



Blk 526
Bedok North St 3

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Note to Police Report

G/20190919/7020.

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.:

Suppl. Sketch Form 92

POLICE REPORT



**SINGAPORE
POLICE FORCE**



G/20190919/7020

1 of 2

POLICE REPORT (NP299)

Report No. G/20190919/7020

Police Station Of Origin
Bedok Division HQ
30 Bedok North Road SINGAPORE 469676
Tel No:1800-2440000

Date/Time Report Made 19/09/2019 11:01	Vide Report No.	Station Diary No.
Name Of Informant NG KIM POH	Address APT BLK 526 BEDOK NORTH STREET 3 #02-468 SINGAPORE 460526	
ID Type / ID No. NRIC NO / S1398445Z	Contact No. Home/Office: Mobile: 86165529	
Nationality SINGAPORE CITIZEN	Email Address chakforever17@gmail.com	
Occupation self employ	Sex Male	Age 60
Institution/School Name	Date of Birth 15/03/1959	Race Chinese
Date/Time Of Incident 18/09/2019 20:15 - 18/09/2019 20:20	Location Of Incident APT BLK 526 BEDOK NORTH STREET 3 #02-468 SINGAPORE 460526	

Brief details.

On the stated date and time, my car SKC2104A was parked next to the handicap lot below my house, after I finished work at 1920 hrs. The next morning, when i woke up to drive my car to work. I found that my car right hand front was damaged. I then went to my office to check on my in car camera and found out that a vehicle bearing the license plate number SME3454Z, after dropping off a passenger and moving off had hit onto my car several times. The driver did not stop to leave down his contact or write down a note that it was caused by the mentioned driver, this is all i have to report.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 19/09/2019 11:01
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp

POLICE REPORT



**SINGAPORE
POLICE FORCE**



G/20190919/7020

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20190919/7020

Subjects Involved			
Suspect			
Person Name	Unknown		
Gender	Unknown	Race	Unknown
Language	Unknown	Relation To Informant	Unknown
Habits & Oddities	SME3454Z		
Victim			
Person Name	NG KIM POH		
ID Type	NRIC NO	ID No	S1398445Z
Gender	Male	Age	60
Race	Chinese	Language	English
Occupation	self employ	Address Type	
Address	APT BLK 526 BEDOK NORTH STREET 3 #02-468 SINGAPORE 460526		Mobile No 86165529
Is Informant A Victim?	Yes		
Person Name	NG KIM POH (Informant)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 19/09/2019 11:01
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

