AG Advice HE

MCHM19125095 / Cheng Hoe Motor Pte Ltd - Yishun ENTRY DATE & TIME: 21/09/2019 11:20 SUBMITTED BY: Ong Wei Lin

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 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

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THE VIEW THE CONTRACT RESIDENCE AND	ACCIDENT STATEMENT	SOME SECURITY STATES
Date Of Report	21/09/2019 11:20	
Date Of Accident	20/09/2019 11:10	
Exact Location Of Accident	ORCHARD ROAD	
Country/State of Loss	SINGAPORE	
D	ETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLU1899P	
Insured/Policyholder		
Name Of Registered Owner	POH HUIHUA (FU HUIHUA)	
NRIC No	S8502298I	
Email Address	POH.ANDREA@YAHOO.COM	A.SG
Mobile Phone No	(LOCAL) +65-97904073	
Alternative Phone No	OTHERS-97904073	
Vehicle Particulars		
Manufacturer	MINI	
Model	ONE 5DR LED	
Exact Purpose for which vehicle was being used at time of accident	PTE 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	TOKIO MARINE INSURANCE	SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE	
Fleet Policy	NO	
Policy Number	MT108469	
Cover Note Number	17/10/18 - 16/10/19	
Driver		
Name of Driver	POH HUIHUA (FU HUIHUA)	
NRIC No	S8502298I	
Date Of Birth	07/02/1985	
Occupation	INDOOR	
Date Of Driving Pass	09/03/2010	
Driving Experience	9 YEARS AND 6 MONTHS	
Gender	FEMALE	
Mobile Number		
Wobile Number	(LOCAL) +65-97904073	
Fax Number	(LOCAL) +65-97904073	
	(LOCAL) +65-97904073 OTHERS-97904073	

BLK 522 MILTONIA CLOSE #05-09 Address

768105 Postcode

Was driver an employee of the Insured's Company NO

OWNER If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

COLLISION - CROSS JUNCTION Type Of Accident

Weather Conditions CLEAR Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

2 involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by ambulance?

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes.Please state which Police Station

Police Station Name KAMPONG JAVA NEIGHBOURHOOD POLICE CENTRE

ROAD: 21 KAMPONG JAVA ROAD, POSTCODE: 228892, COUNTRY: Police Station Address

SINGAPORE

NO

NO

YES

NO

YES

1

Police Station Contact TEL NO: 1800-2959999 - FAX NO: 63918499

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER POLICE REPORT. (REPAIR BY OTHER WORKSHOP)

Attachment(s)

Are accident photos available for attachment? YES NO

Was there any video captured by Car Camera?

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1 SLV6912X

NO

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver MURARI MOHAN RAKSHIT

NRIC/Passport Number G5124056T Contact Number 97287338

Address Postcode

Insurance Company Name

Nature Of Damage

Page 2 of 16

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

VEHICLE NO.: INSURER DATE & TIME:

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- 5. Any false reporting may be referred to the Police for investigation.
- 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
- 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)
 - (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:

Reporting Centre Personnel's Signatur

NRIC/FIN No.

Sketch Plan #2

CINELE BURE	HEERTEN	
CLINE VE DACE	N Dew fay	
		A. SLU18998
	-4E +C	B-SLV6912X
	< - 12 C	MURARI MOHAN RAKSHIT
		65124056T
0	rchord	170: 97287333
FEEDURE CIRCUMSTANCES OF T	Road	
ESCRIBE CIRCUMSTANCES OF T	HE ACCIDENT	
81 0 m		
Pls refer Vol.	ni Report attached	
	,	
Note: Please note that your inst	urer may have 14days Time Frame for you	to submit an Own Damage Claim
under your own comprehe	ensive policy. Please check with your policy	for more information.
ECLARATION		
We declare the foregoing particulars a	are true in every respect.	101
1	No. 1	XV 11.
dare	1000	719/19
W-1		
olicyholder's Signature	Driver's Signature Ro	eporting Centre Personnel's Signature





1 of 2

POLICE REPORT (NP299)

Police Station Of Origin Tanglin Division HQ 21 Kampong Java Road SINGAPORE 228892 Tel No:1800-3910000

Report No.	E/20190920	/7028
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Date/Time Report Made 20/09/2019 16:57	Vide Rep	ort No.		Station Diary No.
Name Of Informant	Address			
POH HUIHUA	BLK 522 MILTONIA		CLOSE #05-09 SINGAPORE 7681	
ID Type / ID No. NRIC NO / \$85022981	Contact No. Home/Office:		Mobile: 97904073	
Nationality SINGAPORE CITIZEN	Email Address Poh.andrea@yahoo.		com.sg	
Occupation	Sex	Age	Date of Birth	Race
Business development manager	Female	34	07/02/1985	Chinese
Institution/School Name	Language English			
Date/Time Of Incident 20/09/2019 11:10	Location Of Incident ORCHARD ROAD			
Brief details.				

My Vehicle, SLU1899P was on the 3rd lane where I can turn left or go straight into orchard road. (See photo attached). I have my left signal on when we were at stop from the red traffic. Upon green light, I make a left turn, vehicle, SLV6912X drove straight and hit onto my car. the driver unwind his window and told me he has signal to go straight, however he was in the turn left ane. Thereafter, I asked him to stop by to check on our damages. He drove off without giving any signs that he has the intention to stop his vehicle to settle our accident. I followed him, signal to him to stop his car. he did not. I had to follow him until Irwell bank road, he eventually stop his car because I drove in front of his car and stop him. Immediately when we got down our car, he shouted, why you honk at me and follow me. I did not hit your

Signature Of Officer Recording The Report:	Signature Of Informant:
Not applicable	The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 20/09/2019 16:57
Officer In-Charge Of Case:	Classification Of Case:
Author/Vertice Otenso	

Authentication Stamp





POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20190920/7028

car. attached photos are damages from my car and my car paint stain on his car. I made a police call when he refused to acknowledge hitting my car, as guided my the Police officer, I exchange driver information with him, there is no injury in the accident, no damage of public properties. I would actually like to report the recklessness of this driver and his attempt to drive off after hitting my vehicle. Lurge traffic police will take actions against his irresponsibility of driving.

Victim			
Person Name	POH HUIHUA		
D Type	NRIC NO	ID No	S8502298I
Gender	Female	Age	34
Race	Chinese	Language	English
Occupation	Business development manager	Address Type	
Address	BLK 522 MILTONIA CLOSE #05-09 SINGAPORE 768105	Mobile No	97904073
s Informant A Victim?	Yes		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making the report has been authenticated by SingPalss. No signature is required.	
Signature Of Interpreter: Not applicable	Date/Time: 20/09/2019 16:57	
Officer In-Charge Of Case:	Classification Of Case:	
Authentication Stamp		