

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	08/10/2019 12:31
Date Of Accident	12/09/2018 05:00
Exact Location Of Accident	TELOK BLANGAH WAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLB1099G
Insured/Policyholder	
Name Of Registered Owner	PHANG CHOO ONG
NRIC No	S1369379Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92746166
Alternative Phone No	OFFICE-92746166

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E280
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	SI18V06296/VPE/R03
Cover Note Number	

Driver

Name of Driver	TAN KIAN SAN
NRIC No	S1392613A
Date Of Birth	01/01/1959
Occupation	INDOOR
Date Of Driving Pass	01/01/1980
Driving Experience	38 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91681800
Fax Number	
Contact Number	OFFICE-91681800
Email Address	NOEMAIL

Address	BLK 546 JURONG WEST STREET 42 #09-115
Postcode	640546
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	COLLIDED INTO PROPERTY
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	1
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JURONG WEST NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 700 CORPORATION ROAD , POSTCODE: 649818 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2689999 - FAX NO: 62672438
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - J/20180912/2159. VEHICLE HAS BEEN SCRAPPED.

Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

Accident Sketch Plan

SKETCH PLAN

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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:

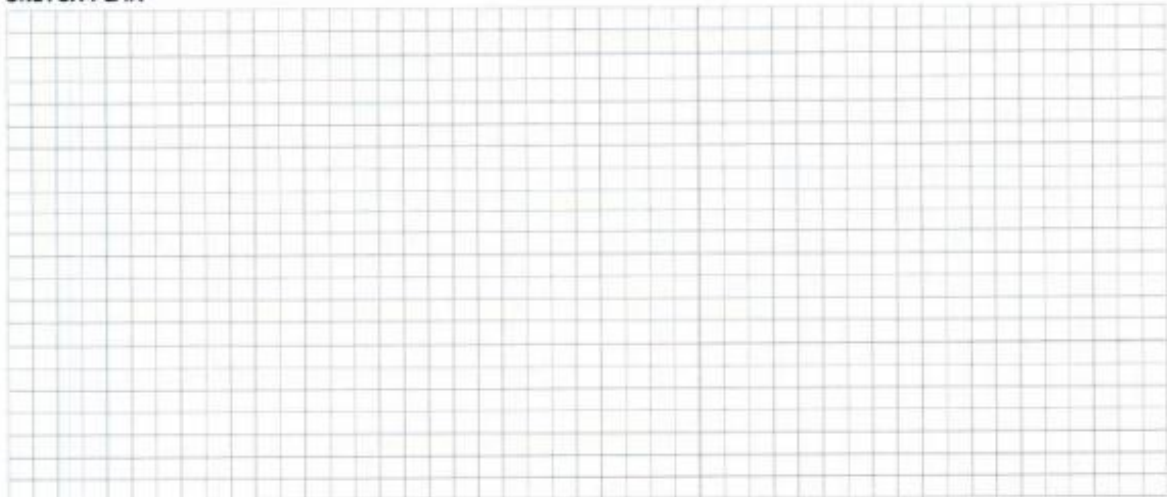
Driver's Signature
(If driver is not the policyholder)
Date & Time:



Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Accident Sketch Plan

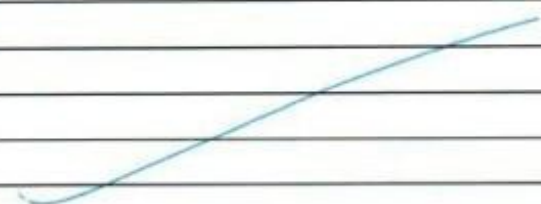
SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report - J/20180914/2019.

I wish to state that the driver drove my vehicle without my permission.



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.:

Police Report



**SINGAPORE
POLICE FORCE**



J/20180912/2159

1 of 2

POLICE REPORT (NP299)

Report No. J/20180912/2159

Police Station Of Origin
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Date/Time Report Made 12/09/2018 20:39	File Report No.	Station Diary No. 199
Name Of Informant PHANG CHOO ONG	Address APT BLK 546 JURONG WEST STREET 42 #09-115 SINGAPORE 640546	
ID Type / ID No. NRIC NO / S1369379Z	Contact No. Home/Office	Mobile 92746166
Nationality SINGAPORE CITIZEN	Email Address	
Occupation SELF EMPLOYED	Sex Male	Age 59
Institution/School Name	Date of Birth 21/01/1959	Race Chinese
Date/Time Of Incident 12/09/2018 05:00	Language English	
	Location Of Incident 546 JURONG WEST STREET 42 #09-115 HDB- JURONG WEST SINGAPORE 640546	

Brief details.

On 04/09/2018 at about 1800hrs, I parked my car, SLB1099G, along Spottiswoode Park Rd beside Spottiswoode 18 Condominium Complex. I parked there as I was not feeling well and after which I took a taxi home. Everything was intact and secured. I had not been driving my car since then.

On 12/08/2018 at about 0500hrs, I was at home when I received call from the traffic police officer namely Mr Alex. He informed that my car involved in accident. I was told that the driver is Tan Kian San

Signature Of Officer Recording The Report: J / Sr Staff Sgt MUHAMMAD HAIRIN BIN JAMIL	Signature Of Informant
Signature Of Interpreter: Not applicable	Date/Time: 12/09/2018 20:39
Officer In-Charge Of Case: J / Jurong Police Divisional Investigation Branch / Insp CHIEW YAN LIN Contact No.: 67910000	Classification Of Case:

Authentication Stamp

Police Report



**SINGAPORE
POLICE FORCE**



J/20180912/2159

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20180912/2159

S1392613A Hp: 91681800 who is my business partner. I was not aware that he drove my car without my knowledge. I did have a spare car key which I put at my work place at SKT KTV located at 29 Kampong Bahru Rd S(169352). I put it at the counter drawer and was not lock. My car is now at Traffic Police Compound. I tried to call him several times but to no avail. Till date not respond from him. First time happened. I am lodging a police report for Traffic Police and insurance claims.

Signature Of Officer Recording The Report:

J / Sr Staff Sgt MUHAMMAD HAIRIN BIN JAMIL

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
J / Jurong Police Divisional Investigation Branch /
Insp CHIEW YAN LIN
Contact No.: 67910000

Authentication Stamp

Signature Of Informant:

Date/Time:
12/09/2018 20:39

Classification Of Case:

Scrapped Letter

