

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	24/10/2019 09:17
Date Of Accident	06/05/2019 11:50
Exact Location Of Accident	JALAN TAN TOCK SENG BASEMENT CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGV737J
Insured/Policyholder	
Name Of Registered Owner	TAN SIA HWEE ALEX
NRIC No	S8137352C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98793227
Alternative Phone No	OFFICE-98793227

Vehicle Particulars

Manufacturer	NISSAN
Model	X-TRAIL 2.0 CVT ABS 4WD S/R 7-STR
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	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	PNPV2018-00003657-01
Cover Note Number	

Driver

Name of Driver	TAN SIA HWEE, ALEX (CHEN SHEHUI, ALEX)
NRIC No	S8137352C
Date Of Birth	20/11/1981
Occupation	INDOOR
Date Of Driving Pass	18/10/2002
Driving Experience	16 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98793227
Fax Number	
Contact Number	OFFICE-98793227
Email Address	NOEMAIL

Address	17 FERNVALE CLOSE #12-29
Postcode	797478
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	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	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20190508/7001.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SDD1188S
Vehicle Make/Model/Colour	TOYOTA
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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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.
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.


Policyholder's Signature / Date & Time

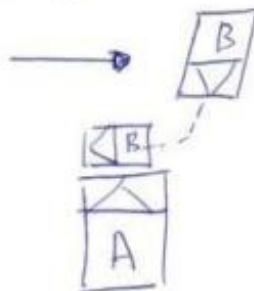

Driver's Signature (If driver is not the policyholder) / Date & Time


Witnessed by Reporting Centre Personnel

Sketch Plan

Tan Tock Seng Hospital B1 Carpark.

One Way traffic



(A) SGV737J

(B) SPD1188 S

Accident Sketch Plan

Describe Circumstances of the Accident

Refer To Police Report NO: T/20190508/7001

Declaration

We declare the foregoing particulars are true in every respect.

x 

Policyholder's Signature / Date & Time

x 

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


Witnessed by Reporting Centre Personnel

Police Report



**SINGAPORE
POLICE FORCE**



T/20190508/7001

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20190508/7001

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/05/2019 01:24	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: TAN SIA HWEE, ALEX			Address: 17 FERNVALE CLOSE #12-29 SINGAPORE 797478		
ID Type / ID No.: NRIC NO / S8137352C			Contact No.: Home/Office: Mobile: 98793227		
Nationality: SINGAPORE CITIZEN			Email: alextan737@yahoo.com.sg		
Sex: Male	Age: 37	Date of Birth: 20/11/1981	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Project Manager			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 06/05/2019 11:50	Type of Location: Car Park
Location: JALAN TAN TOCK SENG				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 40 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SDD1188S	Car	TOYOTA	TOYOTA	Grey	Slightly Damaged	0
SGV737J	Car	NISSAN	X-TRAIL 2.0 CVT ABS 4WD S/R 7-STR	White		0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGV737J	FWD Singapore Pte. Ltd	PNPV2018-00003657-01	29/03/2019	28/03/2020

Police Report



**SINGAPORE
POLICE FORCE**



T/20190508/7001

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20190508/7001

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAN SIA HWEE, ALEX	ID No.	S8137352C
Related Vehicle	SGV737J (Car)	Contact No.	98793227
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

ON 6 MAY 2019, AT ABOUT 1145HRS, I PARKED MY VEHICLE BEARING SGV737J, WHITE NISSAN X-TRAIL, AT TTSH B3 CARPARK, NEAR PILLAR "S12", UNKNOWN LOT NUMBER.

ON 7 MAY 2018, UPON CHECKING MY VEHICLE, I NOTICED THERE WERE SOME SCRATCHED ON MY FRONT RIGHT BUMPER. I IMMEDIATELY REVIEW MY FRONT CAR CAM FOOTAGE RECORDINGS AND DISCOVERED THE FOLLOWING.

THE FOOTAGE REVEALS THAT ON 6 MAY 2019 AT 1153HRS, A GREY TOYOTA MPV CAR, BEARING SDD1188S, HAD KNOCKED ONTO MY FRONT BUMPER WHILE MAKING A TURN AGAINST THE FLOW, WHILE EXITING ITS PARKING LOT. MY VEHICLE WAS OBSERVED TO BE SHAKING DUE TO THE IMPACT. THE CARPARK IS A ONE-WAY TRAFFIC. THERE WASN'T ANY NOTE LEFT ON MY VEHICLE AND THE SAID VEHICLE LEFT SCENE. I ONLY DISCOVERED IT WHEN I SAW SOME SCRATCH MARKS ON MY FRONT BUMPER THE FOLLOWING DAY. I WISHED TO STATE THAT I'M LODGING THIS REPORT TO ESTABLISH THE DRIVER FOR REPAIR CLAIMS PURPOSES & FOOTAGE SIZE IS TO HUGE TO ATTACH IN THIS REPORT. THAT'S ALL.

Police Report



**SINGAPORE
POLICE FORCE**



T/20190508/7001

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20190508/7001

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
IRMAN BIN MOHAMAD SAID
Contact No.: 65476145

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
08/05/2019 01:24

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

