

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	13/08/2019 17:43
Date Of Accident	10/08/2019 23:30
Exact Location Of Accident	OPEN CARPARK- BLK 776 YISHUN AVE 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX2446R
Insured/Policyholder	
Name Of Registered Owner	LEK CHOO CHENG
NRIC No	S0172243C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-88238953
Alternative Phone No	OTHERS-88238953

Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS E (AUTO)
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5099086535-01
Cover Note Number	21/03/2019- 20/03/2020

Driver

Name of Driver	LEK CHOO CHENG
NRIC No	S0172243C
Date Of Birth	27/06/1953
Occupation	INDOOR
Date Of Driving Pass	26/06/1973
Driving Experience	46 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-88238953
Fax Number	
Contact Number	OTHERS-88238953
EEmail Address	NOEMAIL

Address	BLK 776 YISHUN AVE 2 #13-1597
Postcode	760776
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	THOMSON NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 25 SIN MING ROAD , POSTCODE: 570025 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4529999 - FAX NO: 6 5535740
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

I HAVE PARKED MY VEHICLE AT THE OPEN C/PARK OF 776 YISHUN AVE 2 ON 10/8/19 ABOUT 10PM. WHEN I CAME BACK TO MY VEHICLE ON 11/8/19, I SAW A NOTE LEFT ON MY WINDSCREEN. A WITNESS HAVE SAW A MERCEDES HAD COLLIDED ONTO MY PARKED VEHICLE. I CHECKED MY IN-CAR CAMERA AND CONFIRMED SFB6883Y HAD HIT ONTO MY VEHICLE WHILE TRYING TO PARK. THE DRIVER THEN DROVE OFF WITHOUT STOPPING.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WILL SEND TO NTUC DIRECTLY
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SFB6883Y
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)

Sketch Plan

SKETCH PLAN


VEHICLE NO.: SLX 2446R
INSURER : NMC
DATE & TIME: 10/8/19 1130pm

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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.

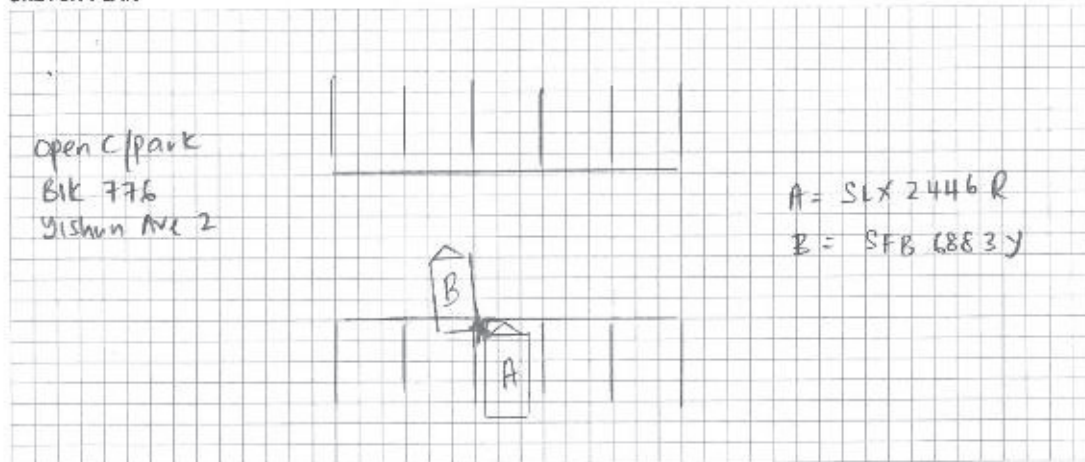

Policyholder's Signature
Date & Time:

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


Reporting Centre Personnel's Signature
Name: Feida
NRIC/FIN No.: 1/5

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I have parked my vehicle at the open C/park of 776 Vishnu Ave 2 on 10/8/19 about 10pm. When I came back to my vehicle on 11/8/19, I saw a note left on my windscreen. A witness have saw a Mercedes had collided onto my parked vehicle. I checked my in car camera and confirmed SFB6883J had hit onto my vehicle while trying to park. The driver then drove off without stopping.

Note : Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information.

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: VS
NRIC/FIN No.: _____

GIARMC Sketch/Plan Form_V3 () Claim Own Policy (/) Claim Third Party () Reporting Only
() Claim OD/TP at other workshop ()

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190813/2168

Police Station Of Origin:
Thomson NPP
25 Sin Ming Road #01-180 SINGAPORE
570025
Tel No: 1800-4529999

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Report No. T/20190813/2168

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/08/2019 19:15		Vide Report No.:		Station Diary No.: 69	
Informant's Particulars					
Name of Informant: LEK CHOO CHENG			Address: APT BLK 776 YISHUN AVENUE 2 #13-1597 SINGAPORE 760776		
ID Type / ID No.: NRIC NO / S0172243C			Contact No.: Home/Office: Mobile: 88238953		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 66	Date of Birth: 27/06/1953	Type of Informant: Vehicle Owner		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Driving instructor/tester			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 10/08/2019 23:30	Type of Location:
Location: Along Road 1 YISHUN AVENUE 2 Open space carpark of Blk 776 Yishun Avenue 2				
Weather:		Road Surface:		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
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
SFB6883Y	Car					0
SLX2446R	Car					0

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190813/2168

Police Station Of Origin:
Thomson NPP
25 Sin Ming Road #01-180 SINGAPORE
570025
Tel No: 1800-4529999

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Report No. T/20190813/2168

CONTINUATION OF REPORT

Brief Details.

On 11/08/2019 between 0600hrs to 0700hrs, I went back to retrieve my vehicle, SLX2446R, and noticed that the front left portion of my vehicle was damaged. The last time I saw my vehicle intact was on 10/08/2019 at about 2200hrs. Upon closer look, I noticed that there was a piece of paper being slotted on my windscreen. I then read up the note and realized that a witness, (Jo, HP:90478747) wrote on the piece of paper that she saw a vehicle, SFB6883Y, had collided onto my vehicle on the previous night, between 2330hrs to 2340hrs.

I then reviewed my in car CCTV and affirmed that the said vehicle did collide onto the front portion of my vehicle while parking into the lot beside my vehicle. Upon the impact of collision, the driver drove off without stopping. As this is a case of hit-and-run, I was advised by my insurance company to lodge a report on the matter.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20190813/2168

Police Station Of Origin:
Thomson NPP
25 Sin Ming Road #01-180 SINGAPORE
570025
Tel No: 1800-4529999

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Report No. T/20190813/2168

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 Officer Recording The Report:

E /

Staff Sgt TAN HONG WEE, LOUIS

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / HRT /

Sr Staff Sgt TAN JEOK LENG

Contact No.: 65476144

Signature Of Informant:

Date/Time:

13/08/2019 19:15

Classification Of Case:

Authentication Stamp
SINGAPORE POLICE FORCE

SN 070

SIGNATURE