

## 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             | 22/11/2019 12:39              |
| Date Of Accident           | 21/11/2019 19:00              |
| Exact Location Of Accident | BLK 345 JURONG EAST STREET 31 |
| Country/State of Loss      | SINGAPORE                     |

### DETAILS OF OWN VEHICLE

|                             |                       |
|-----------------------------|-----------------------|
| Vehicle Registration Number | SDS32K                |
| <b>Insured/Policyholder</b> |                       |
| Name Of Registered Owner    | LIM LAY SIM           |
| NRIC No                     | S1480683J             |
| Email Address               | PAMELALIM32@GMAIL.COM |
| Mobile Phone No             | (LOCAL) +65-96940444  |
| Alternative Phone No        | OTHERS-96940444       |

### Vehicle Particulars

|  |                          |
|--|--------------------------|
| Manufacturer   | TOYOTA                   |
| Model  | LEXUS-2.5 ES250 AUTO (A) |
| Exact Purpose for which vehicle was being used at time of accident           | CAR WAS 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             | 5106092607                             |
| Cover Note Number         |  |

### Driver

|                      |                       |
|----------------------|-----------------------|
| Name of Driver       | LIM LAY SIM           |
| NRIC No              | S1480683J             |
| Date Of Birth        | 27/06/1961            |
| Occupation           | INDOOR                |
| Date Of Driving Pass | 09/04/1979            |
| Driving Experience   | 40 YEARS AND 7 MONTHS |
| Gender               | FEMALE                |
| Mobile Number        | (LOCAL) +65-96940444  |
| Fax Number           |                       |
| Contact Number       | OTHERS-96940444       |
| Email Address        | PAMELALIM32@GMAIL.COM |

|   |                          |
|---|--------------------------|
| Address   | 105 PETIR ROAD<br>#12-13 |
| Postcode  | 678274                   |
| 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?  | NO  |
| 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                    | <b>ROAD:</b> 10 UBI AVENUE 3 , <b>POSTCODE:</b> 408865 , <b>COUNTRY:</b> SINGAPORE |
| Police Station Contact                    | <b>TEL NO:</b> 65470000 - <b>FAX NO:</b>   |
| Was notice of intended Prosecution given? | NO   |
| If Yes, against whom?                     |  |

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20191122/7009

#### Attachment(s)

|   |     |
|---|-----|
| Are accident photos available for attachment? | YES |
| Was there any video captured by Car Camera?   | YES |
| Was there any audio recorded?                 | NO  |

#### DETAILS OF OTHER VEHICLE PROPERTY 1

|                             |               |
|-----------------------------|---------------|
| Vehicle Registration Number | SLP8877H      |
| Vehicle Make/Model/Colour   | MERCEDES BENZ |
| 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


#### IMPORTANT NOTICE

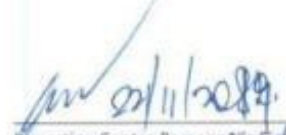
1. Please report **correctly** the details of the accident to speed up the claims process.
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available 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:

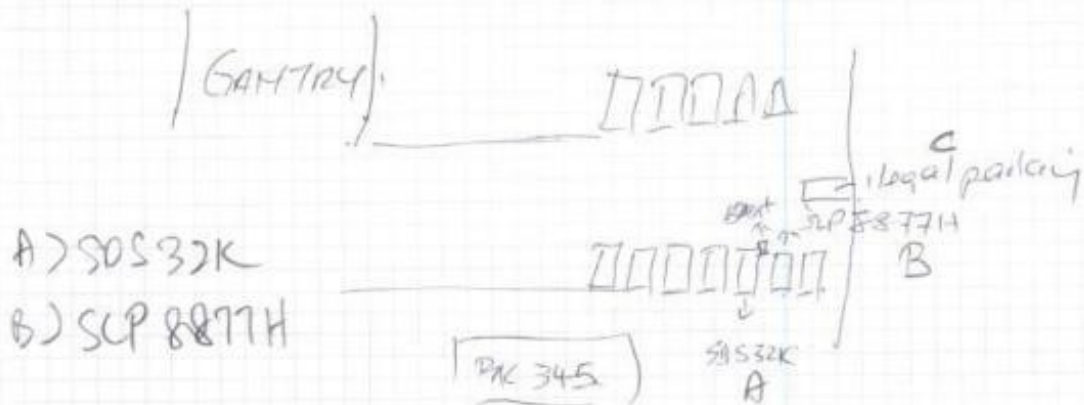
  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

# Accident Sketch Plan

SKETCH PLAN

BLK 345 JURONG EAST STRAIT 31 CAR PARK



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The mercedes trying hard to come out of his parking lot but he my 2 to 3 time cannot cos there is one car park in front of him.

Eventually he hit my front car right bumper. Finally he stop and comes out to take a look, realize he hit my car.

When I go and drive my car I didn't know front right bumper was dented until I reach home.

My son took out the front & back recording cam to look at it and notice he is the culprit.

It happens at 700pm.

*Signature*  
 Pamela Lim  
 96940444  
 51480683

## DECLARATION

I/We declare the foregoing particulars are true in every respect.

*Signature*  
 Policyholder's Signature  
 Date & Time:

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

*Signature* 22/11/2019  
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:

# Accident Sketch Plan



**SINGAPORE  
POLICE FORCE**

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



T/20191122/7009

1 of 3

Report No. T/20191122/7009

## REPORT OF A TRAFFIC ACCIDENT

|  |                  |                    |
|--|------------------|--------------------|
| Date/Time Report Made:<br>22/11/2019 12:11 | Vide Report No.: | Station Diary No.: |
|--|------------------|--------------------|

### Informant's Particulars

|  |            |                              |  |  |                            |
|--|------------|------------------------------|--|--|----------------------------|
| Name of Informant:<br>LIM LAY SIM        |            |                              | Address:<br>105 PETIR ROAD #12-13 SINGAPORE 678274 |  |                            |
| ID Type / ID No.:<br>NRIC NO / S1480683J |            |                              | Contact No.:<br>Home/Office:                       |  | Mobile: 96940444           |
| Nationality:<br>SINGAPORE CITIZEN        |            |                              | Email:<br>PAMELALIM32@GMAIL.COM                    |  |                            |
| Sex:<br>Female                           | Age:<br>58 | Date of Birth:<br>27/06/1961 | Type of Informant:<br>Vehicle Owner                |  |                            |
| Race:<br>Chinese                         |            |                              | Language:<br>English                               |  | Institution / School Name: |
| Occupation:<br>Advertising copywriter    |            |                              | Driving Licence Information:<br>Class: 3,4,5       |  | Date of Expiry:            |

### General Information of the Accident

|   |                      |  |                                     |
|---|----------------------|--|-------------------------------------|
| Type of Accident:<br>Non-Injury<br>Hit and Run                | Drink Drive:<br>No   | Date/Time of Accident:<br>21/11/2019 19:00 | Type of Location:<br>Car Park       |
| Location:<br><br>JURONG EAST STREET 31                        |                      |  |                                     |
| Weather:<br>Clear   | Road Surface:<br>Dry | Road Speed Limit:<br>10 Km/h               |                                     |
| Traffic Flow:<br>Two Way                                      | Traffic Control:     | Traffic Volume:<br>No Traffic              |                                     |
| Type of Collision:<br>Moving Vehicle Against - Parked Vehicle |                      |  | Anyone conveyed by ambulance:<br>No |

### Details of Vehicle Involved

| Vehicle No. | Type | Make   | Model        | Color | Condition        | No of Passenger |
|-------------|------|--------|--------------|-------|------------------|-----------------|
| SDS32K      | Car  | TOYOTA | ES LEXUS 2.5 | White | Slightly Damaged | 0               |

### Details of Vehicle Insurance

| Vehicle No. | Insurance Company                          | Insurance No | Effective  | Expiry Date |
|-------------|--|--------------|------------|-------------|
| SDS32K      | NTUC Income Insurance Co-Operative Limited | 5106092607   | 12/12/2018 | 11/12/2019  |



## Accident Sketch Plan



**SINGAPORE  
POLICE FORCE**



T/20191122/7009

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

2 of 3

Report No. T/20191122/7009

### CONTINUATION OF REPORT

|                                   |              |  |                                     |
|-----------------------------------|--------------|--|-------------------------------------|
| <b>Details of Person Involved</b> |              |  |                                     |
| Any Pedestrian Involved: No       |              |  |                                     |
| No. of Pedestrians Injured: NIL   |              | Use of Pedestrian Crossing: NA         |                                     |
| <b>Vehicle Owner</b>              |              |  |                                     |
| Name                              | LIM LAY SIM  | ID No.                                 | S1480683J                           |
| Related Vehicle                   | SDS32K (Car) | Contact No.                            | 96940444                            |
| Hospital/Clinic                   | NIL          | Class of Driving Licence & Expiry Date | Class: 3,4,5<br>Date of Expiry: NIL |
| Date Treatment                    | NIL          | Date Discharge                         | NIL                                 |
| No. of Days granted Medical Leave | NIL          | Degree of Injury                       | NIL                                 |

#### Brief Details.

My vehicle is park stationary at the carpark lot at Blk 345 Jurong East St 31, when the said vehicle hit the lower right side of my car bumper. It is a Brown vehicle with a car plate bearing SLP 8877H.

## Accident Sketch Plan



**SINGAPORE  
POLICE FORCE**

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



T/20191122/7009

3 of 3

Report No. T/20191122/7009

### 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:

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:  
22/11/2019 12:11

Classification Of Case:



Accident Photo



Accident Photo



Accident Photo



Accident Photo



**Accident Photo**



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

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Accident Photo





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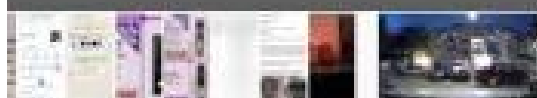
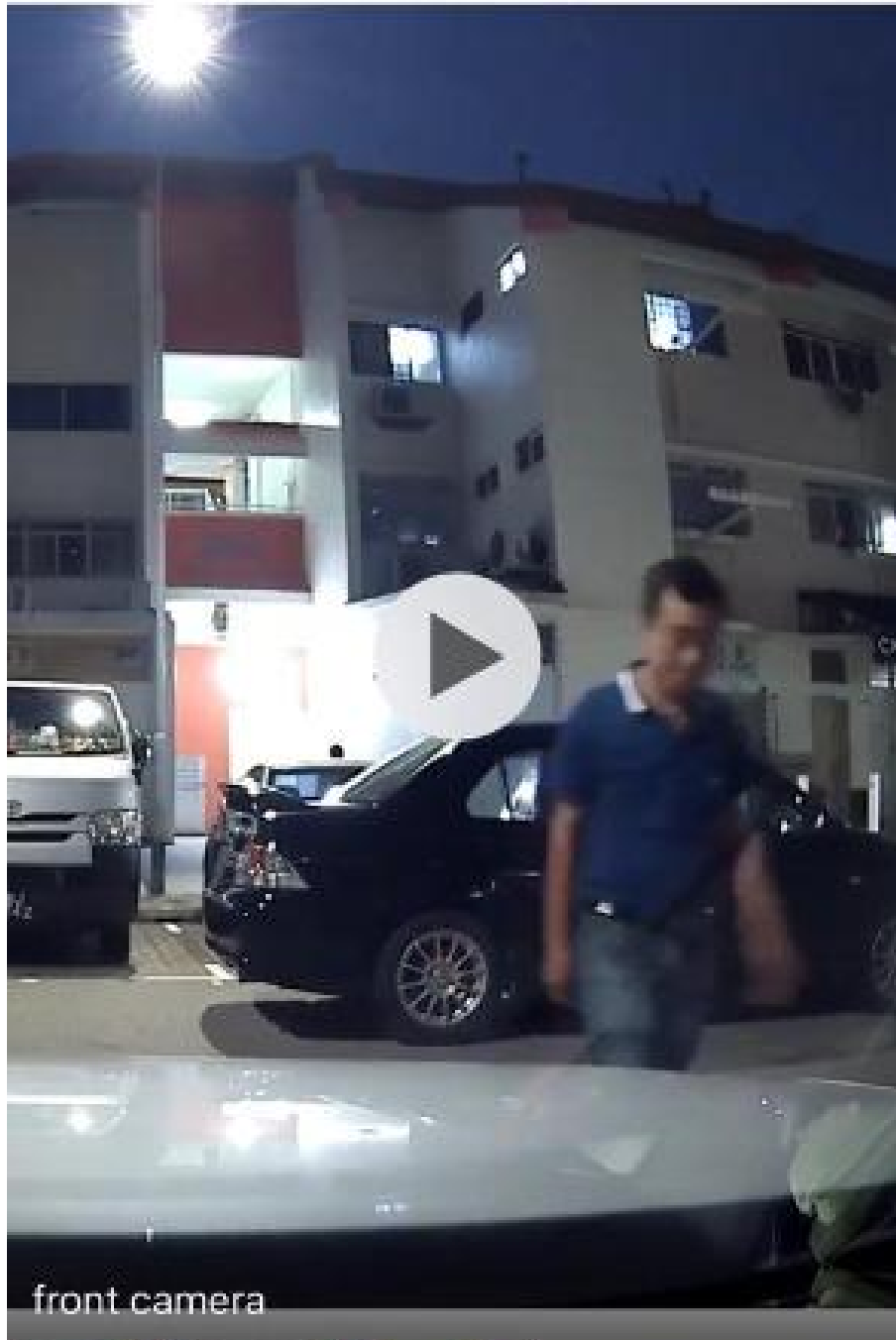
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Accident Photo

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-2:15



Accident Photo

