

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	23/11/2019 10:53
Date Of Accident	22/11/2019 21:20
Exact Location Of Accident	WOODLANDS CENTRE ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJA1506C
Insured/Policyholder	
Name Of Registered Owner	LEOW QUEK KIEN (LIAO GUOQUAN)
NRIC No	S7200336E
Email Address	TL3601@GMAIL.COM
Mobile Phone No	(LOCAL) +65-83320800
Alternative Phone No	OTHERS-83320800

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA-1.5 AXIO (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE HIRE
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5113515526
Cover Note Number	DRIVO CLASSIC

Driver

Name of Driver	LEOW QUEK KIEN (LIAO GUOQUAN)
NRIC No	S7200336E
Date Of Birth	10/01/1972
Occupation	INDOOR
Date Of Driving Pass	02/06/2008
Driving Experience	11 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83320800
Fax Number	
Contact Number	OTHERS-83320800
Email Address	TL3601@GMAIL.COM

Address	BLK 53 GEYLANG BAHRU #09-3601
Postcode	330053
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	AFTER RAIN
Road Surface	WET

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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	KOLAM AYER NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 72 GEYLANG BAHRU #01-3038 , POSTCODE: 330072 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2969999 - FAX NO: 62937659
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	FILE SIZE TOO BIG
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLQ5345R
Vehicle Make/Model/Colour	HONDA GRACE HYBRID
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	UNKNOWN
NRIC/Passport Number	
Contact Number	UNKNOWN
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

INCOME MOTOR SERVICE CENTRE

Report Date & Start Time: 05/12/2019 / 14:26

Report No: MT/

D.O.A: 22/11/2019

Time: 21:20 hrs

Vehicle No: SJA1506C

Reporting Type: TP

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.

05/12/19 / 14:26

Policyholder's Signature / Date & Time

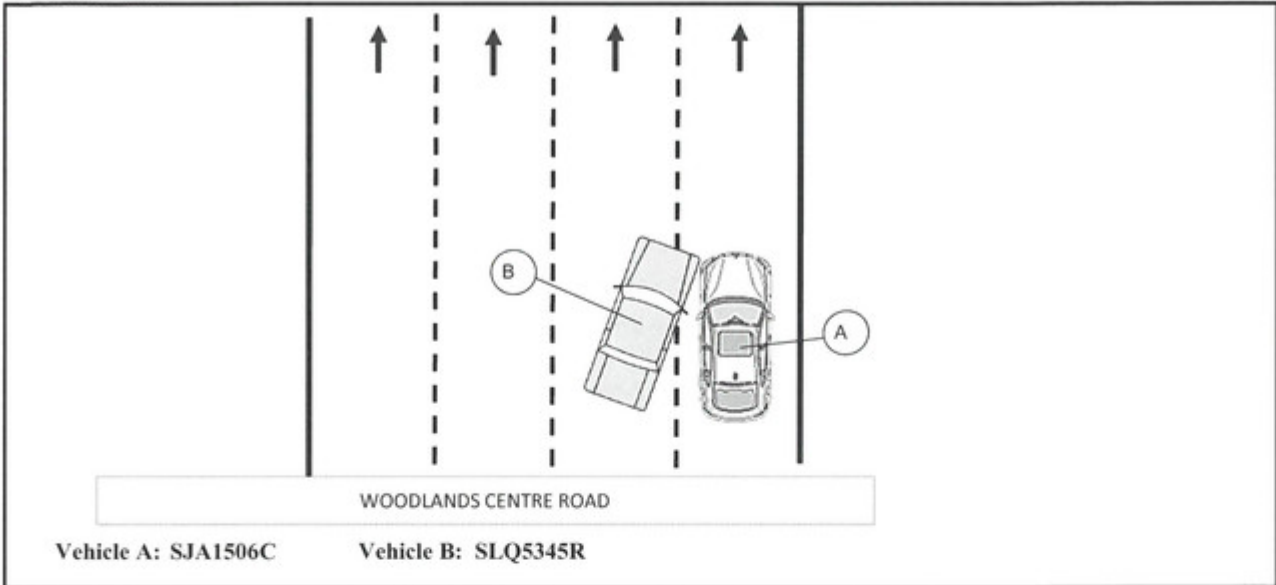
05/12/19 / 14:26

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

Thomas Chen (S098890)
Customer Care Executive
Motor Service Centre

Witnessed by Reporting Centre Personnel

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT.

Declaration

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


05/12/19 / 14:26
Policyholder's Signature / Date & Time

05/12/19 / 14:26
Driver's Signature (If driver is not the policyholder) / Date & Time


Thomas Chen (S098890)
Customer Care Executive
Motor Service Centre
Witnessed by Reporting Centre Personnel

AMENDED POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20191203/2116

Police Station Of Origin:
Kolam Ayer NPP
72 Geylang Bahru #01-3038 SINGAPORE
330072
Tel No: 1800-2969999

1 of 3

Report No. T/20191203/2116

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/12/2019 16:43	Vide Report No.: T/20191123/7001	Station Diary No.: 34
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Informant's Particulars

Name of Informant: LEOW QUEK KIEN			Address: APT BLK 53 GEYLANG BAHRU #09-3601 SINGAPORE 330053		
ID Type / ID No.: NRIC NO / S7200336E			Contact No.: Home/Office: Mobile: 83320800		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 47	Date of Birth: 10/01/1972	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Chauffeur			Driving Licence Information: Class: 3A Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 22/11/2019 21:20	Type of Location: Straight Road
Location: Along Road 1 WOODLANDS CENTRE ROAD along Woodlands Centre Road towards the Checkpoint.				
Weather: Clear		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJA1506C	Car	TOYOTA	COROLLA AXIO 1.5X A	Silver	Slightly Damaged	0
SLQ5345R	Car	HONDA	GRACE HYBRID	Red		0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJA1506C	NTUC Income Insurance Co-Operative Limited	5113515526	22/10/2019	27/11/2020



**SINGAPORE
POLICE FORCE**



T/20191203/2116

Police Station Of Origin:
Kolam Ayer NPP
72 Geylang Bahru #01-3038 SINGAPORE
330072
Tel No: 1800-2969999

2 of 3

Report No. T/20191203/2116

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LEOW QUEK KIEN	ID No.	S7200336E
Related Vehicle	SJA1506C (Car)	Contact No.	83320800
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

I am a Private Hire Car Driver. I was on my way to pick up passenger from Woodlands Train Checkpoint, when I was stuck at Woodlands Centre Road due to very heavy traffic congestion. I was on the rightmost lane so that I can continue on this lane to get to the pick up point. Traffic came to a standstill for quite a while. When it finally started moving, just when I started to drive forward, the car on the left cut into my lane and hit on the front left of my vehicle.

I signaled the driver by horning. instead of alighting from the vehicle, the driver continue to drive off of drop off someone from his car just after the bus stop near the train checkpoint and drove off.

I have videos of the run-away vehicle and the traffic conditions exceeding 2MB and picture of the damage of my car for your investigations.



**SINGAPORE
POLICE FORCE**



T/20191203/2116

Police Station Of Origin:
Kolam Ayer NPP
72 Geylang Bahru #01-3038 SINGAPORE
330072
Tel No: 1800-2969999

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Report No. T/20191203/2116

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:
A /
Sgt 2 MOHAMAD SYAFIQ BIN SUKEMI

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / HRT /
Staff Sgt MUHAMMAD KHAIRIL BIN KAMAL
Contact No.: 65476131

Signature Of Informant:

Date/Time:
03/12/2019 16:43

Classification Of Case:

Authentication Stamp
NP168 POLICE FORCE

SIGNATURE

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Addendum Sheet

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MNII19154683 Vehicle Registration No: SJA1506C
Name(as shown in NRIC) : LEOW QUEK KIEN NRIC/FIN/Passport No : S7200336E
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : BLK 53 GEYLANG BAHRU #09-3601 Singapore(330053)
Contact (Tel) : N.A. Mobile No. : 83320800
Email Address : N.A.
Date of Accident : 22/11/2019 Time of Accident : 21:20
Place of Accident : WOODLANDS CENTRE ROAD
Insurance Company: NTUC INCOME CO-OPT LTD

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

A) TO AMEND THIRD PARTY VEHICLE NUMBER AS: SLQ5345R (HONDA GRACE)

B) TO ATTACHED POLICE REPORT (T/20191203/2116)

(This section contains horizontal lines for additional information, with a diagonal line drawn through them.)

Policyholder / Driver's Signature
Date:

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