

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	15/12/2019 10:33
Date Of Accident	13/12/2019 23:50
Exact Location Of Accident	BEDOK RESERVOIR VIEW (AQUARIUS CONDOMINIUM)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJU9537E
Insured/Policyholder	
Name Of Registered Owner	COVE RENTALS PTE LTD
Co Reg No	201626878M
Email Address	GENCAPITALSG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-87978998
Alternative Phone No	OFFICE-87978998

Vehicle Particulars

Manufacturer	NISSAN
Model	SYLPHY
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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	THIRD PARTY
Fleet Policy	NO
Policy Number	5106862510 (TP)
Cover Note Number	

Driver

Name of Driver	TAN SOON CHIA
NRIC No	S1398184A
Date Of Birth	11/06/1959
Occupation	OUTDOOR
Date Of Driving Pass	05/12/1981
Driving Experience	38 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88009519
Fax Number	
Contact Number	
Email Address	GENCAPITALSG@GMAIL.COM

Address	BLK 356B ADMIRALTY DRIVE #13-96
Postcode	752356
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
Weather Conditions	RAINING
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?	YES
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	BEDOK POLICE DIVISIONAL HQ (G DIVISION)
Police Station Address	ROAD: 30 BEDOK NORTH ROAD , POSTCODE: 469676 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2440000 - FAX NO: 64443009
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER STATEMENT AND POLICE REPORT (ATTENDED BY: JAMES NG)

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD5985J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	TAN SOON CHIA
Approximate Age	60
Injuries Sustain	PAINS IN BODY WITH 7 DAYS MC
Injured person in which vehicle?	SJU9537E
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	BLK 356B ADMIRALTY DRIVE #13-96
Postcode	752356

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 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:

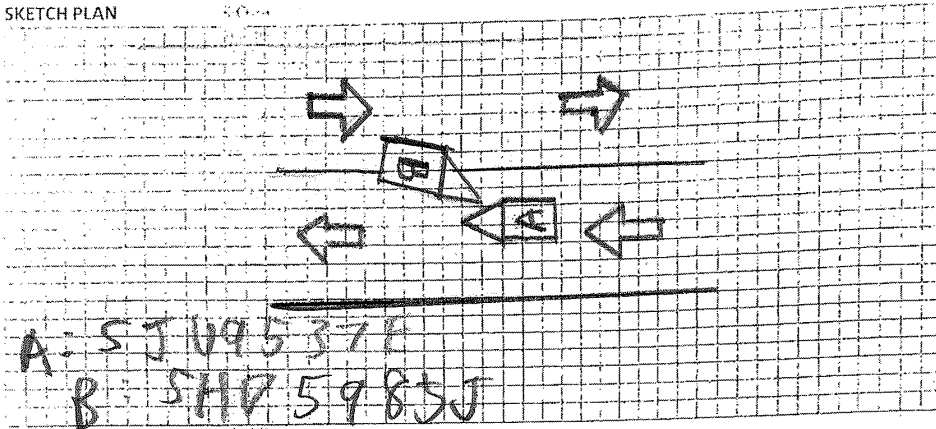
Reporting Centre Personnel's Signature

Name:

NO WING KIN JAMES
admin.vac@vicom.com.sg

15 DEC 2019

SKETCH PLAN

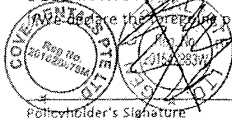


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 13/12/2019 at about 11:50pm, I was driving my nissan sylphy SJU9537E inside a condominium named aquarius at kedok reservoir new. A Toyota Prius bearing plate number SHD5985J was driving against the traffic flow and collided into the front of my car. The incident was captured by the CCTV in the condominium. Due to the accident, I suffered pains in my body. I have seen a doctor and was given 7 days of MC.

DECLARATION

I hereby declare the reporting 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.:

11.5 DEC 2019

NG WING KIN JAMES
admin.vac@vicom.com.sg



**SINGAPORE
POLICE FORCE**



G/20191214/7034

1 of 2

POLICE REPORT (NP299)

Report No. G/20191214/7034

Police Station Of Origin
Bedok Division HQ
30 Bedok North Road SINGAPORE 469676
Tel No:1800-2440000

Date/Time Report Made 14/12/2019 16:12	Vide Report No.	Station Diary No.
Name Of Informant TAN SOON CHIA	Address APT BLK 356B ADMIRALTY DRIVE #13-96 SINGAPORE 752356	
ID Type / ID No. NRIC NO / S1398184A	Contact No. Home/Office: Mobile: 92981893	
Nationality SINGAPORE CITIZEN	Email Address gencapitalsg@gmail.com	
Occupation Driver	Sex Male	Age 60
	Date of Birth 11/06/1959	Race Chinese
Institution/School Name	Language English	
Date/Time Of Incident 13/12/2019 23:50 - 14/12/2019 00:00	Location Of Incident 1 BEDOK RESERVOIR VIEW AQUARIUS BY THE PARK SINGAPORE 478926	

Brief details.

On 13/12/2019 at about 2350hours, I was driving my nissan sylphy SJU9537E inside a condominium named Aquarius at Bedok reservior view. A Toyota Prius bearing plate number SHD5985J was driving against the traffic flow and collided into the front of my car. The incident was captured by the CCTV in the condominium. Due to the accident, I suffered pains in my body. I have seen a doctor and was given 7 days of MC.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 14/12/2019 16:12
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**



G/20191214/7034

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20191214/7034

Subjects Involved			
Victim			
Person Name	TAN SOON CHIA		
ID Type	NRIC NO	ID No	S1398184A
Gender	Male	Age	60
Race	Chinese	Language	English
Occupation	Driver	Address Type	
Address	APT BLK 356B ADMIRALTY DRIVE #13-96 SINGAPORE 752356		Mobile No 92981893
Is Informant A Victim?	Yes		
Person Name	TAN SOON CHIA (Informant)		

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

Authentication Stamp

Signature Of Informant:

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

Date/Time:

14/12/2019 16:12

Classification Of Case:

Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

