

## 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	06/01/2020 09:12
Date Of Accident	20/12/2019 23:55
Exact Location Of Accident	SOMERSET RD TWDS TAKASHIMAYA
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKN7323T
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LUO QIAN RU
NRIC No	SXXXX880H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-87877768
Alternative Phone No	OFFICE-87877768

### Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	SCIROCCO 1.4L
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	FWD SINGAPORE PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	PNPV2019-00017333
Cover Note Number	

### Driver

Name of Driver	TAN LAI CHUN (CHEN LAICHUN)
NRIC No	SXXXX159Z
Date Of Birth	06/07/1982
Occupation	INDOOR
Date Of Driving Pass	06/07/2002
Driving Experience	17 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93379191
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 805D KEAT HONG CLOSE #08-82
Postcode	684805
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - MAJOR/MINOR RD
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)	1

#### 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
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

REFER TO POLICE REPORT T/20200102/2123

#### 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	SLA5170L
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)

## Accident Sketch Plan

### SKETCH PLAN

VEHICLE NO.: SKN 7323T  
INSURER : FWD  
DATE & TIME: 20/12/2019 2355hrs


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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.:

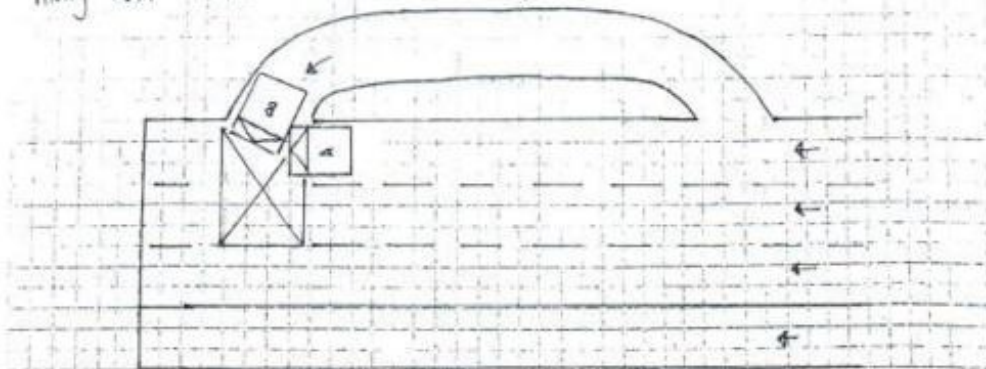
## Accident Sketch Plan

SKETCH PLAN

Along Road 1 Somerset Road, TWOJ Takashimaya.

Vehicle A = SKN 73237

Vehicle B = SLA 5170L



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report No. T/20200102/2123

Note : Please note that your insurer may have 14 days 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:

☐ Claim Own Policy    ☐ Claim Third Party    ☐ Reporting Only  
☐ Claim OD/TP at other workshop ( )

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20200102/2123

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

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Report No. T/20200102/2123

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 02/01/2020 17:29	Vide Report No.:	Station Diary No.:
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### Informant's Particulars

Name of Informant: TAN LAI CHUN			Address: APT BLK 805D KEAT HONG CLOSE #08-82 KEAT HONG PRIDE SINGAPORE 684805	
ID Type / ID No.: NRIC NO / S8222159Z			Contact No.: Home/Office: Mobile: 93379191	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 37	Date of Birth: 06/07/1982	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: Other commercial and marketing sales representatives			Driving Licence Information: Class: 2B,2A,2,3,4,5	Date of Expiry:

### General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 20/12/2019 23:55	Type of Location:
Location: Along Road 1 SOMERSET ROAD  TOWARDS TAKASHIMAYA				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision:				Anyone conveyed by ambulance: No

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKN7323T	Car					0
SLA5170L	Car					0

### Details of Person Involved

Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA		



# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20200102/2123

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

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Report No. T/20200102/2123

## CONTINUATION OF REPORT

Driver			
Name	TAN LAI CHUN	ID No.	S8222159Z
Related Vehicle	NIL	Contact No.	93379191
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4,5 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

### Brief Details.

ON THE ABOVE MENTIONED DATE, TIME AND LOCATION I WAS TRAVELING ALONG SOMERSET ROAD TOWARDS TAKASHIMAYA WHILE I WAS DRIVING A CAR SUDDENLY CAME OUT FROM THE DROP OFF PLACE OF THE SHOPPING CENTER I COULD NOT STOP IN TIME AND COLLIDED ONTO THE LEFT PORTION OF THE VEHICLE DOOR SUBSEQUENTLY I CAME OUT TO TALK TO THE OTHER PARTY AND WE BOTH AGREED TO LODGE GIA REPORT BUT HE WAS BEING VERY AGGRESSIVE TOWARDS ME AND I WAS AFRAID THAT HE MIGHT PICK A FIGHT WITH ME AND I DID NOT WANT ANY TROUBLE THEREFORE I LEFT THE SCENE AS NOBODY WAS INJURED.

## POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20200102/2123

3 of 3

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


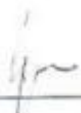

Report No. T/20200102/2123

### 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: TP / BERNARD KOH REN JUN 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 02/01/2020 17:29
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt IRMAN BIN MOHAMAD SAID Contact No.: 65476145	Classification Of Case: 
Authentication Stamp NP168	



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo

