MSME20016828 / SME Motor Pte Ltd - Kaki Bukit ENTRY DATE & TIME: 06/02/2020 15:41 SUBMITTED BY: Chia Pei Ying

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 witholding 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	06/02/2020 15:41
Date Of Accident	05/02/2020 18:45
Exact Location Of Accident	PUNGGOL RD TWDS PUNGGOL END LOT NO.6
Country/State of Loss	SINGAPORE
	아는 이 사람들은 아무리

	Œ	ΤΑ	ILS	OF	OV	NN	VEH	ICLE

Vehicle Registration Number GBF8317D

Insured/Policyholder

Name Of Registered Owner SIN FATT HIN SUPPLIERS

Co Reg No 0XXXX800X Email Address NOEMAIL

Mobile Phone No

Alternative Phone No OFFICE-82927171

Vehicle Particulars

Manufacturer NISSAN Model NV350

Exact Purpose for which vehicle was being used at

time of accident

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 COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company ERGO INSURANCE PTE. LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number DMCG19001547

Cover Note Number

Driver

Name of Driver TAY KIM TIAN
NRIC No SXXXX878I
Date Of Birth 29/11/1958
Occupation INDOOR
Date Of Driving Pass 20/01/1978

Driving Experience 42 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-82927171

Fax Number

Contact Number

EMail Address NOEMAIL

Address BLK 613B PUNGGOL DRIVE #03-845

Postcode 822613

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

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) 2

involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by NO

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

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 PUNGGOL N.P.C

Police Station Address ROAD: 21A TEBING LANE, POSTCODE: 828837, COUNTRY:

NO

SINGAPORE

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT: T/20200205/2357.

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera? NO

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

GBB9150G

YES

Vehicle Make/Model/Colour

Details Of Properties VEHICLE B

Vehicle Category COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

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.
- 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.
- 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. The 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 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 aforesald.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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)
 - (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")
- 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
- my Personal Information may/can be disclosed by any of the insurers and/or GIA to their third party service providers or (c) agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- 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

NRIC/FIN No.:

SUMBLE Greekhilenform vit

NEW HOCK TECK

Policyholder's Signature

Date & Time:

Sketch Plan #2 Pg. 1

SKETCH PLAN Punggol Road towards Purggol Eva A: BB+B3170 3 6BB9150G DESCRIBE CIRCUMSTANCES OF THE ACCIDENT NO . 1/10200205/2357. DECLARATION I/We declare the foregoing particulars are true in every respect.

> Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan #3 Pg. 1





Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999

1 of 3 Report No. T/20200205/2357

REPORT OF A TRAFFIC ACCIDENT

Date/Time 05/02/202		ade:	Vide Report No.:	Station Diary No.:			
Informati	's Particu	lars					
Name of Ir			Address:				
TAY KIM T	FIAN		APT BLK 613B PUNGGOL DRIVE #03-845 SINGAPORE 822613				
ID Type / I	D No.:		Contact No.:				
NRIC NO	/ S133787	81	Home/Office:	Home/Office: Mobile: 82927171			
Nationality: SINGAPORE CITIZEN			Email:				
Sex:	Age:	Date of Birth:	Type of Informant:				
Male	61	29/11/1958	Driver				
Race:			Language: Institution / School Name:				
Chinese							
Occupatio	n:		Driving Licence Information:				
SELF-EM	PLOYED		Class: 3,4,5 Date of Expiry:				

General Informat	ion of the Accident					
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 05/02/2020 18:45		Type of Location: Straight Road	
Location: Along Road 1 Traveling Toward Road 2 PUNGGOL ROAD towards Punggol End. Lot Number 6						
Weather: Clear	End. Estimation o	Road Surface: Dry		Road	d Speed Limit:	
Traffic Flow: Traffic Control: Traffic Volume: One Way Not Controlled No Traffic						
Type of Collision: Moving Vehicle Against - Parked Vehicle Anyone conveyed by ambulance: No						

Details of Ve	ehicle Involved				e dipologica de la composición de la c	
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GBB9150G	Lorry	TOYOTA	DYNA	White	No Damage	0
GBF8317D	Van	NISSAN	NV350 PANEL VAN 2.5 5MT 5DR EURO V	Silver	Seriously Damaged	0

Sketch Plan #4 Pq. 1





Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999 2 of 3 Report No. T/20200205/2357

CONTINUATION OF REPORT

Dotails of Perso	n Involved								
Any Pedestrian Involved: No									
No. of Pedestrian	s Injured: NIL	Use of Pe	Use of Pedestrian Crossing: NA						
Driver									
Name	TAY KIM TIAN		ID No		S1337878I				
Related Vehicle	GBF8317D (Van)		Conta	ct No.	82927171				
Hospital/Clinic	NIL		Class Drivin Licend Expiry	g ce &	Class: 3,4,5 Date of Expiry: NIL				
Date Treatment	NIL	Date Disc	harge	NIL	Account of the Particular Control of the Control of				
No. of Days granted Medical Leave NIL Degree of Injury NIL									

Brief Details.

On 05/02/2020 at about 5.30pm, I parked my vehicle registration plate number GBF8317D along Punggol Road towards Punggol End, lot number 6. I left and returned home..

On the same day at about 9.52pm, I returned to my vehicle and saw that the front portion of my vehicle was dented. As such I checked my in car camera and saw that on the same day at about 6.42pm, a lorry registration plate number GBB9150G parked in the lot in front of my vehicle and hit on to my vehicle front portion. The said lorry left at about 7.24pm and hit my vehicle front portion again. In total the said vehicle hit onto my vehicle about 5 times. The said male driver came down and looked at the damages however he left without leaving any note or contact number.

I will be reporting the matter to my insurance company. I have also saved a copy of the video of my in car camera.

Sketch Plan #5 Pg. 1





Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999 3 of 3 Report No. T/20200205/2357

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 F	Report:	Signature Of Informant:	
Sr Staff Sgt HANNAH ADAM			W
Signature Of Interpreter:		Date/Time:	17
Not applicable		05/02/2020 23:55	
Officer In Charge Of Case:		Classification Of Case:	
TP / HRT /			
Sr Staff Sgt IRMAN BIN MOHAMAD	SAID	SN 085	
Contact No.: 65476145			
Authentication Stamp	Callings SI	ghature:	
NP168		1	
	Singapore	Police Force	