### 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	23/03/2020 15:51
Date Of Accident	20/03/2020 07:00
Exact Location Of Accident	HOUGANG AVENUE 7 (THE FLORIDA) BASEMENT CARPARK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SGE8402L
Insured/Policyholder	
Name Of Registered Owner	HO SOON KIANG
NRIC No	SXXXX739D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97944423
Alternative Phone No	OTHERS-97944423
Vehicle Particulars	
Manufacturer	TOYOTA
Model	ESTIMA-2.4 (A)
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	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	20-MV002062-R04
Cover Note Number	
Driver	
Name of Driver	LIO COON IZIANO

Name of Driver HO SOON KIANG NRIC No SXXXX739D Date Of Birth 30/11/1942 Occupation **INDOOR Date Of Driving Pass** 03/11/1962

**Driving Experience** 57 YEARS AND 4 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97944423

Fax Number

**Contact Number** OTHERS-97944423

**EMail Address NOEMAIL**  Address 72 HOUGANG AVENUE 7

#04-11 538805

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

-

2

NO

**General Information of the Accident** 

Type Of Accident HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

Weather Conditions CLEAR
Road Surface DRY

**Other Information** 

Postcode

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

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) 0

**Details of Police Action** 

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name HOUGANG NEIGHBOURHOOD POLICE POST

Police Station Address ROAD: BLK 357 HOUGANG AVENUE 7 #01-805, POSTCODE: 530357,

COUNTRY: SINGAPORE

Police Station Contact **TEL NO**: 1800-2869999 - **FAX NO**: 63822066

Was notice of intended Prosecution given? NO

If Yes, against whom?

**Circumstances of Accident** 

PLEASE REFER TO POLICE REPORT T/20200320/2106

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 SMP6070U

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

**Contact Number** 

Address

Postcode

Insurance Company Name

Page 2 of 17

Nature Of Damage

No. Of Passenger (Including Driver)

#### Accident Sketch Plan

#### SKETCH PLAN

### IMPORTANT NOTICE

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- 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.
- 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 insurers) 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:
  - 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:
  - 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:

Mus 20 101/2

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Name:

NRIC/FIN No.

## **Accident Sketch Plan**

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		V-8) SWP 60704
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		The florida Bosement carpork
SCRIBE CIRCUMSTANCES O	OF THE ACCIDENT	
	- 1 2030 0326	report
	- 7 2030 0320	到06 -
ECLARATION		
ECLARATION We declare the foregoing particul	lars are true in every respect.	(2/22/202)
	lars are true in every respect.	Referring Centre Persoppe's Signature / Im

### **POLICE REPORT**





Police Station Of Origin: Hougang NPP 357 Hougang Avenue 7 #01-805 SINGAPORE 530357 Tel No: 1800-2869999

1 of 3 Report No. T/20200320/2106

## REPORT OF A TRAFFIC ACCIDENT

20/03/2	me Report I 020 18:50	Made:	Vide Report No.:	Station Diary No.	
Informa	ent's Partic	uiara		TO THE SAME AND THE PARTY OF TH	
Name of Informant: HO SOON KIANG			Address: 72 HOUGANG AVENUE 7 #	#04-11 SINGAPORE 538805	
ID Type NRIC N	/ ID No.: O / S02807	39D	Contact No.: Home/Office:	Mobile: 97944423	
Nationality: SINGAPORE CITIZEN		'EN	Email:		
Sex: Male	Age:	Date of Birth: 30/11/1942	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation: TECHNICAL ADVISOR		SOR	Driving Licence Information: Class: 2B,2A,2,3	Date of Expiry:	

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 20/03/2020 07:00	Type of Location Car Park	
Location: Along Road 1 HOUGANG A  ALONG HOU Weather: Clear		HE FLORIDA BASEME Road Surface: Dry		Road Speed Limit:	
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: No Traffic	
One Way Type of Collisi		The second secon		No Traffic	

Details of V	ehicle invo	tved		SEPS AND	No. of the last of	Technology of the second
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SGE8402L	Car	TOYOTA	ESTIMA 2.4	Gold	Slightly Damaged	0

Details of V	ehicle Insurance		VIOLENCE OF STREET	
	Insurance Company	Insurance No	Effective	Expiry Date
SGE8402L	TOKIO MARINE INSURANCE SINGAPORE LTD.	MV002062	27/03/2016	26/03/2021

### POLICE REPORT



T/20200320/2106

Police Station Of Origin: Hougang NPP 357 Hougang Avenue 7 #01-805 SINGAPORE 530357 Tel No: 1800-2869999 2 of 3 Report No. T/20200320/2106

### CONTINUATION OF REPORT

Any Pedestrian Ir	rvolved: No					(4)49
No. of Pedestrian	Use of Pedestrian Crossing: NA					
Driver	Section 1	5449500	HISTORY SE	Hedana	The same	
Name	HO SOON KIANG			ID No	0	S0280739D
Related Vehicle	SGE8402L (Car)			Conta	ct No.	97944423
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g	Class: 2B.2A.2,3 Date of Expiry: NIL
Date Treatment	NIL Date			harge	NIL	
No. of Days granted Medical Leave NIL			Degree of	Injury	NIL	

### Brief Details.

On 19/03/2020 at about 1800hrs I have just reached the basement carpark of 'The Florida'. I proceed to park my vehicle bearing plate number SGE8402L at lot number 9. Everything was intact at this point in time and there was no damage. There were other vehicle parked beside mine during that point in time.

On 20/03/2020 at about 0700hrs, I went back to the same lot and discovered that the front right bumper suffered a huge dent. I made a check with the management and together we viewed the CCTV. Footage shows that there was a black vehicle that did a reverse directly in front of my vehicle. The management then advised me to come and lodge this police report.

I wish to inform that my vehicle's camera did not capture the said incident.

### POLICE REPORT



T/20200320/2106

Police Station Of Origin: Hougang NPP 357 Hougang Avenue 7 #01-805 SINGAPORE 530357 Tel No: 1800-2869999

3 of 3 Report No. T/20200320/2108

CONTINUATION OF REPORT

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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: F / Sgt 2 KOH YEW WEI	Signature of Informant.
Signature Of Interpreter: Not applicable	Date/Time: 20/03/2020 18:50
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt TAN JEOK LENG Contact No.: 65476144	Classification Of Case
Authentication Stamp	7-

















