

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	02/04/2020 15:02
Date Of Accident	17/03/2020 18:30
Exact Location Of Accident	JUNCTION OF UPPER CROSS ST AND EU TONG SEN ST
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX7510E
Insured/Policyholder	
Name Of Registered Owner	VINCAR LEASING AND RENTAL PTE LTD
Co Reg No	2XXXXX829K
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96622759
Alternative Phone No	OFFICE-64741119

Vehicle Particulars

Manufacturer	HONDA
Model	SHUTTLE
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	19-MJ000693-R01
Cover Note Number	

Driver

Name of Driver	CHUA CHOON HUA
NRIC No	SXXXX559I
Date Of Birth	16/04/1971
Occupation	OUTDOOR
Date Of Driving Pass	02/11/1990
Driving Experience	29 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96622759
Fax Number	
Contact Number	OFFICE-64741119
Email Address	NOEMAIL

Address	BLK 21 DOVER CRESCENT #08-338
Postcode	130021
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	SIDE SWIPE
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?	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)	2
Passenger 1	NAME: : REGINE TEOH GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20200318/2092

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH OWNER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	UNKNOWN
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

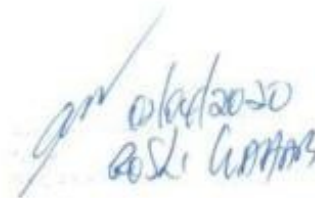
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8. Consent under the Personal Data Protection Act (PDPA)

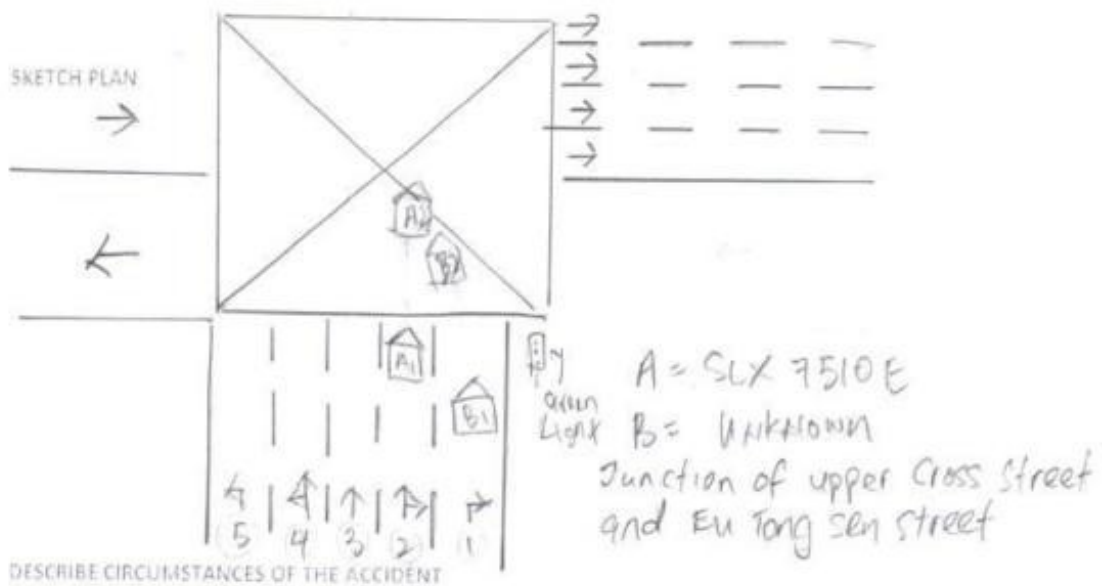
I understand, acknowledge, agree and consent that:

- (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' lawyer/law firms, the Monetary Authority of Singapore and any relevant government agency/authority such as the police, for the purposes 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 making of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me bearing about delivery of the said mail via on the external cover of envelopes/brown packages/box(es);
 - (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' lawyer/law firms may/are permitted to collect, use, disclose and/or process my Personal Information for the purposes of the above Purposes; and
- (c) my Personal Information may/are collected by any of the insurers and/or their lawyer/law firms or their agents or their representatives including their lawyer/law firms, which may be used to disclose it to any of the insurers and/or their lawyer/law firms;
- (d) my Personal Information may be collected and used to compile claims history for the purpose of risk assessment, underwriting and development of product and services for all insured;
- (e) my Personal Information collected may be used to provide services, products, insurance, etc.

I hereby agree to the collection, use, disclosure and/or processing of my Personal Information for the above Purposes, and I agree to the collection, use, disclosure and/or processing of my Personal Information for the above Purposes.



Accident Sketch Plan



Refer to Police Report

Report No : T/20200318/2092

DECLARATION



Refer

02/04/2020
Refer: 02/04/2020

POLICE REPORT



SINGAPORE
POLICE FORCE



120200318/2092

Police Station Of Origin
Dover NPP
3 Dover Road #01-388 SINGAPORE 130003
Tel No: 1800-7769999

1 of 3
Report No: T/20200318/2092

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made 18/03/2020 16 21		Vide Report No	Station Diary No 20
Informant's Particulars			
Name of Informant CHUA CHOON HUA		Address APT BLK 21 DOVER CRESCENT #08-338 SINGAPORE 130021	
ID Type / ID No. NRIC NO / S71125591		Contact No Home/Office Mobile 95622759	
Nationality SINGAPORE CITIZEN		Email	
Sex Male	Age 48	Date of Birth 18/04/1971	Type of Informant Driver
Race Chinese	Language English		Institution / School Name
Occupation PRIVATE HIRER DRIVER		Driving Licence Information Class 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 17/03/2020 16 30	Type of Location X-Junction
Location Along Road 1 Traveling Toward Road 2 UPPER CROSS STREET HAVELOCK ROAD Turning right to Ew Tong Sen Street				
Weather Clear	Road Surface Dry	Road Speed Limit 60 Km/h		
Traffic Flow One Way	Traffic Control Traffic Light - Working	Traffic Volume Heavy		
Type of Collision Hit and Run				Anyone conveyed by ambulance No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLX7510E	Car	HONDA		White	Slightly Damaged	1
UNKNOWN CAR	Car				Slightly Damaged	0

Details of Person Involved

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

POLICE REPORT



SINGAPORE
POLICE FORCE



112200110-2022

2 of 3

Report No: 14202053140254

Police Station Of Origin
Dover NPP
3 Dover Road #01-306 SINGAPORE 130003
Tel No: 1800-7788899

CONTINUATION OF REPORT






Driver			
Name	CHUA CHOON HUA	ID No	571125591
Related Vehicle	SLX751CE (Car)	Contact No	96622759
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class 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 17.03.2020 at about 1830 hrs at junction of Upper Cross Street and Eu Tong Sen Street. I was traveling straight on lane 2(along Upper Cross Street towards Havelock Road). When I approached the above mentioned junction and was turning right within my lane, suddenly I heard a bang and felt an impact from behind. After that I realized there were damages on rear right hand side portion of my vehicle (SLX 751CE). It was consider as hit and run accident and I wish to state that I have 1 passenger inside my vehicle(SLX751CE).

My vehicle: SLX751CE
Other vehicle(Unknown)

POLICE REPORT

		SINGAPORE POLICE FORCE			
Police Station Of Origin Dover NPP 3 Dover Road #01-368 SINGAPORE 130003 Tel No: 1800-7788999				Report No: TQ32063180290	
CONTINUATION OF REPORT					
Sketch Plan Informant is not able to provide sketch plan					
<p>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 <u>report number</u> as reference</p>					
Signature Of Officer Recording The Report D / Sr Staff Sgt LIM KIM HUAT		Signature Of Informant			
					
Signature Of Interpreter Not applicable		Date/Time 18/03/2020 16:21			
Officer In Charge Of Case TP / HRT / Insp GOH GEOK LYE Contact No: 65476148		Classification Of Case			
Authentication Stamp NP188					

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo

