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 <u>truthful and accurate</u> 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	26/05/2020 14:32
Date Of Accident	24/05/2020 10:40
Exact Location Of Accident	ALONG BLK 348 JURONG EAST AVE 1 OPEN SPACE CARPARK
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SLC6520T
Insured/Policyholder	
Name Of Registered Owner	HJ CAR RENTAL PTE LTD
Co Reg No	2XXXXX281R
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-96213872
Vehicle Particulars	
Manufacturer	AUDI
Model	A3
Exact Purpose for which vehicle was being used at time of accident	WORK
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5114557500
Cover Note Number	
Driver	
Name of Driver	TAN KIM SOON (CHEN JINSHUN)
NRIC No	SXXXX046A

NRIC No SXXXX046A

Date Of Birth 03/09/1973

Occupation OUTDOOR

Date Of Driving Pass 07/01/2008

Driving Experience 12 YEARS AND 4 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96213872

Fax Number

Contact Number

EMail Address NOEMAIL

Address BLK 346 KANG CHING ROAD #09-117

Postcode 610346

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 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)

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) 0

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name MARINE PARADE N.P.C

Police Station Address ROAD: 300 MARINE PARADE ROAD, POSTCODE: 449296, COUNTRY:

SINGAPORE

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

REFER TO POLICE REPORT T/20200526/2015

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

WITH DRIVER

Was there any audio recorded?

Details of Witness 1

VINCENT

Phone Number

Name

91714283

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJP3831X

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Page 2 of 19

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

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- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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)

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 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: Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

Accident Sketch Plan

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	Time:		





1 of 3

Report No. T/20200526/2015 /

Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296

Tel No: 1800-4428999

REPORT	OF A	TRAFFIC	ACCIDENT
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Date/Time Report Made: 26/05/2020 12:07			Vide Report No.:	Station Diary No. 16		
Informa	nt's Particu	ulars	AND DESCRIPTIONS OF			
Name of Informant: TAN KIM SOON			Address: APT BLK 346 KANG CHING ROAD #09-117 SINGAPORE 610346			
ID Type / ID No.: NRIC NO / S7332046A			Contact No.: Home/Office:	Mobile: 85117288		
Nationality: SINGAPORE CITIZEN			Email: ashleykimsoon@gmail.com			
Sex: Age: Date of Birth: Male 46 03/09/1973			Type of Informant: Driver			
Race: Chinese			Language: English	Institution / School Name:		
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3	Date of Expiry:		

	Non-Injury	Drink	Date/Time of	Type of Location	
Type of Accident:	, con injury	Drive: No	Accident: 24/05/2020 10:40	Car Park	
	ST AVENUE 1 ng East Avenue 1 Open	Space Carpark Road Surface: Dry		Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light	
Type of Collis	iion: lle Against - Parked Vel	nicle		Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJP3831X	Car	KIA		Silver	Slightly Damaged	0
SLC6520T	Car	AUDI	A3	White	Slightly Damaged	0

Details of Vehicle Insurance					
Vehicle No. Insurance Company		Insurance No	Effective	Expiry Date	
SLC6520T	NTUC Income Insurance Co-Operative Limited				

Police Report



2 of 3

Report No. T/20200526/2015

Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE

Tel No: 1800-4428999

CONTINUATION OF REPORT

Details of Perso						
Any Pedestrian Ir	Any Pedestrian Involved: No			Line of Redestrian Crossing: NA		
No. of Pedestrian	s Injured: NIL	Use of Pe	Use of Pedestrian Crossing: NA			
Driver		658920	The state of the s	ID M		S7332046A
Name	TAN KIM SOON			ID No.		3/332040A
Related Vehicle	SLC6520T (Car)			Conta	ct No.	85117288
				Class	of	Class: 3
Hospital/Clinic	NIL			Drivin	g	Date of Expiry: NIL
				-	-	
Date Treatment	NIL		Date Disc		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o	finjury	NIL	

On 24/06/2020 at about 1025hrs, I had parked my vehicle (SLC6520T, Audi A3, White) at a proper parking lot at Blk 348 Jurong East Avenue 1 open space carpark. I was in my vehicle when a vehicle (SJP3831X, Kia, Silver) reversed onto my vehicle.

My vehicle sustained slight damaged on the front bumper. No one was injured. My vehicle has in-car camera and is a rented one from Hamilton Autohub Pte Ltd, Golden Mile Tower Level 8. There is witness (Vincent, HP: 91714283) who witnessed it. I have the in-car footage from the witness. The other driver did not provide me with his particulars. He gave me SGD\$100/- and went off. I did not agreed to the amount.

I am lodging this report as advised by the insurance company.

Police Report





Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296 Tel No: 1800-4428999 3 of 3 Report No. T/20200526/2015

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: G / Sgt 3 NUR ZARIFAH BINTE ZULKIFLI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time; 26/05/2020 12:07
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:























