

ASSIGNMENT

Veh No. SKX47211, yr Regn: 2009, August.

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Mercedes Benz C180K C.C 1597

Colour g/mes A/C: Insured / Std / NI / NA

Sp. Reading 221934 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WDD2040452A308107

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 225/45R17.

R: 225/45R17

N/S	O/S

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front Rear
R/Bal. 2h mm R/Bal. 2b mm

L/Bal. 06 mm L/Bal. 06 mm

D.O.A. _____ D.O.I. 28/05/20

Survey held at Adventure 1

Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Des. of Damages: Front qs.

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<div> <div>TPFcyo.</div> <div>COE Expiry: 17/08/29.</div> </div>
	<div> <div>mv :</div> <div>PV :</div> <div>Nett :</div> </div>
	9441

☐: Prel. Report.

Final Report

Days Of Repair:

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp (\$

 Interview (3)

Tech. Inv. 6

1. *Wahlgesetz* 19

Survey Fee:

Transportation:

Fluoride

y | cities

TOTAL.

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	28/01/2020 17:21
Date Of Accident	25/01/2020 11:30
Exact Location Of Accident	BLK 285A TOH GUAN ROAD LOADING / UNLOADING BAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKX4721U
Insured/Policyholder	
Name Of Registered Owner	NG LI YIN VIVIAN
NRIC No	SXXXX944I
Email Address	VIVIANNG127@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-82331037
Alternative Phone No	OTHERS-82331037

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	C180K

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 PRIVATE CAR

Insurance Company

Name of Insurance Company	GREAT EASTERN GENERAL INSURANCE LIMITED
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2019-V0097261-VDP-R003
Cover Note Number	18/08/2019 TO 17/08/2020

Driver

Name of Driver	NG LI YIN VIVIAN
NRIC No	SXXXX944I
Date Of Birth	12/07/1990
Occupation	INDOOR
Date Of Driving Pass	15/06/2009
Driving Experience	10 YEARS AND 7 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-82331037
Fax Number	
Contact Number	OTHERS-82331037
Email Address	VIVIANNG127@HOTMAIL.COM

Address	APT BLK 285A TOH GUAN ROAD #10-52 (S) 601285
Postcode	
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	-
	-
	-

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	CLEMENTI N.P.C
Police Station Address	ROAD: 20 CLEMENTI AVE 5 , POSTCODE: 129858 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

refer with attach.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YL851B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	


SKETCH PLAN

IMPORTANT NOTICE

- 1) Please report correctly on the details of the accident to speed up the claims process.
- 2) This form must be completed by the policy holder 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) 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 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.
- 8) **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

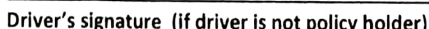
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in the [form] and any other personal information provided by me or possessed by my insurer (collectively the "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 firm, the Monetary Authority of Singapore and any relevant government agency/authority (such as 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) Investigations 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, statement, 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' lawyer/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 insurer and/or GIA to their third party service providers or agents (including their lawyer/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, investigation, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposed stated, or
 - (II) For complying with requirements under my regulations, laws or court orders.


Policy holder's signature


Date / Time:

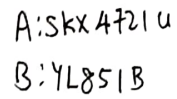
28/1/2020

@ 1410hr


Driver's signature (if driver is not policy holder)

Date / Time:


witnessed by Reporting centre
personnel



Refer Police Report

GE
GX4721U
25/1/2020
☐ No change
✓ ☒ at Garage
✓ ☒ at Garage
TBA

I/We declare the foregoing particulars are true in every respect.

Date / Time: 28/1/2020
@ 1410hr

Date / Time:

witnessed by Reporting centre personnel



**SINGAPORE
POLICE FORCE**



T/20200126/2078

Police Station Of Origin
Clementi N P C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No 1800-8729999

1 of 3

Report No T/20200126/2078

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/01/2020 18:05	Vide Report No.:	Station Diary No. 71
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Informant's Particulars

Name of Informant: NG LI YIN, VIVIAN			Address: APT BLK 285A TOH GUAN ROAD #10-52 SINGAPORE 601285		
ID Type / ID No.: NRIC NO / S9023944I			Contact No.: Home/Office: Mobile: 82331037		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 29	Date of Birth: 12/07/1990	Type of Informant: Vehicle Owner		
Race: Chinese			Language:		Institution / School Name:
Occupation: INSURANCE AGENT			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 25/01/2020 12:00	Type of Location: Loading/Unloading Bay
Location: Along Road 1 TOH GUAN ROAD loading unloading bay of Blk 285A Toh Guan Rd				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume: Light
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKX4721U	Car	MERCEDES BENZ	C180K	Silver		0
YL851B (Not Accurate)	Lorry	NISSAN	YU41T4	White		0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20200126/2078

Police Station Of Origin
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

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Report No T/20200126/2078

CONTINUATION OF REPORT

Vehicle Owner			
Name	NG LI YIN, VIVIAN		ID No. S9023944I
Related Vehicle	SKX4721U (Car)		Contact No. 82331037
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL 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 25/01/2020 at about 1130hrs, I parked my vehicle SKX4721U at the loading unloading bay of my block which is at Blk 285A Toh Guan Road. It was not raining and traffic was clear.

When I parked my vehicle at the loading unloading, there was another white colored lorry which was already parked on the right of my vehicle.

After securing my vehicle, I left for home for awhile.

On the same day at 1230hrs, I went back to my vehicle to discover that there were damages to the right front wheel and the bumper. The lorry which was parked earlier was already gone.

There were no notes left on my vehicle. No one approached me with regards to the incident.

I then went home to retrieve the video from my in-car camera and discovered that the abovementioned white colored lorry on my right was exiting the lot and had its left side of the vehicle collided into the right side of the vehicle. The vehicle then stopped for awhile but the driver did not alight. The driver then drove off.

From the video, I could roughly make out the vehicle number of the lorry which was YL851B.



SINGAPORE
POLICE FORCE



T/20200126/2078

3 of 3

Police Station Of Origin
Clementi N P C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999



Report No T/20200126/2078

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: D / Sgt 3 MUHAMMAD SHAHRIL BIN AHMAD	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 26/01/2020 18:05
Officer In Charge Of Case: TP / HRT / → Staff Sgt MUHAMMAD KHAIRIL BIN KAMAL → Contact No.: 65476368	Classification Of Case: 
Authentication Stamp NP168	