

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	29/06/2020 14:27
Date Of Accident	28/06/2020 09:10
Exact Location Of Accident	58 NEW UPPER CHANGI RD MARKET CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKK7519L
Insured/Policyholder	
Name Of Registered Owner	CHAI YONG CHING
NRIC No	SXXXX483G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97427438
Alternative Phone No	OTHERS-91853832

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E250
Exact Purpose for which vehicle was being used at time of accident	PARKED
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	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	PNPV2018-00011336-01
Cover Note Number	

Driver

Name of Driver	CHEAH AH CHYE
NRIC No	SXXXX482I
Date Of Birth	29/11/1956
Occupation	INDOOR
Date Of Driving Pass	23/08/1989
Driving Experience	30 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91853832
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	8 HARVEY CLOSE
Postcode	489442
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO PARKED VEHICLE
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CHANGI N.P.C
Police Station Address	ROAD: 9 SIMEI STREET 2 , POSTCODE: 529914 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20200628/2030

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 Witness 1

Name	ALVIN
Phone Number	91391826
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGH3282H
Vehicle Make/Model/Colour	TOYOTA VELLFIRE
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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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 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 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) 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 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:
 - (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.

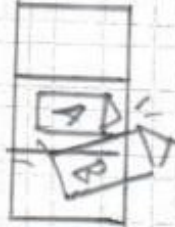

Policyholder's Signature
Date & Time:


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

 29/06/20
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN



A. 8KE7519L
B. 86H3282H

NB 58 UPPER CHANGI ROAD
CAR PARK.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT. T/20200628/2030

DECLARATION

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

Ch

Policyholder's Signature
Date & Time:

Shun

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

Shun 29/06/20

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Individual Statement



**SINGAPORE
POLICE FORCE**



T/20200628/2030

Police Station Of Origin:
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999

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Report No. T/20200628/2030

CONTINUATION OF REPORT

Driver			
Name	CHEAH AH CHYE	ID No.	S2563482I
Related Vehicle	SKK7519L (Car)	Contact No.	91853882
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 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 28/6/2020 at 0900 hrs, I parked my car, namely SKK7519L, at the above mentioned location to buy groceries with my wife. When I returned to my car at 0915 hrs, I noticed that there were multiple dents and scratches to the right front of my car, with the right headlight also sustaining damages. I then found a note left on my windshield, in which the contents stated that he is a witness and that he had seen a collision occurring.

I then contacted the witness, namely Alvin HP:91391826, who informed that earlier on, he was waiting for his family at the vicinity when he saw a black colour car, likely to be a Toyota Vellfire, parking into the adjacent lot beside my car. The witness informed that the black Vellfire then collided into my front left bumper, causing the damage as a result. The witness also informed that the black Vellfire left in a hurry afterwards while also sustaining damages to his door. The witness could only remember the licence plate of the black car to be SGH3282.

I do not have any in-car camera installed in my car. I also wish to add that I went to enquire a workshop which managed to obtain the correct license plate of the black car from their system and it is SGH3282H.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



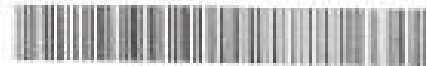
Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T/20200628/2030

Police Station Of Origin:
Changi N.P.C
8 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999

1 of 3

Report No: T/20200628/2030

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/08/2020 13:14		Vide Report No: T/20200628/2018		Station Diary No.: 24	
Informant's Particulars					
Name of Informant: CHEAH AH CHYE			Address: 8 HARVEY CLOSE SINGAPORE 489442		
ID Type / ID No.: NRIC NO / S25634621			Contact No.: Home/Office: Mobile: 91853882		
Nationality: MALAYSIAN			Email: ACCHEAH@HOTMAIL.COM		
Sex: Male	Age: 63	Date of Birth: 29/11/1958	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name
Occupation: RETIRED			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 28/08/2020 09:10	Type of Location: Car Park
Location: Along Road 1 NEW UPPER CHANGI ROAD				
Market 58 open space carpark, 10 carpark lots away from the market main entrance				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
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
SGH3282H	Car	TOYOTA	Vellfire	Black	Slightly Damaged	0
SKK7519L	Car	MERCEDES BENZ	E 250CGI	Silver	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**



T/20200528/2030

Police Station Of Origin:
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999

2 of 3

Report No: T/20200828/2030

CONTINUATION OF REPORT

Driver			
Name	CHEAH AH CHYE	ID No.	S25634821
Related Vehicle	SKK7519L (Car)	Contact No.	91853882
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 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 28/8/2020 at 0900 hrs, I parked my car, namely SKK7519L, at the above mentioned location to buy groceries with my wife. When I returned to my car at 0915 hrs, I noticed that there were multiple dents and scratches to the right front of my car, with the right headlight also sustaining damages. I then found a note left on my windshield, in which the contents stated that he is a witness and that he had seen a collision occurring.

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Police Report



**SINGAPORE
POLICE FORCE**



T/20200528/2030

Police Station Of Origin:
Changi N.P.C
9 Simei Street 2 SINGAPORE 529814
Tel No: 1800-5872999

3 of 3

Report No: T/20200528/2030

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 2 SHOW XIN DA, DYLAN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
28/06/2020 13:14

Officer In Charge Of Case:
TP / HRT /
Sr Staff Sgt NEO ZHI YUAN
Contact No: 65478079

Classification Of Case:

Authentication Stamp
NP188