### 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	30/06/2020 16:46
Date Of Accident	29/06/2020 00:10
Exact Location Of Accident	TEBING LANE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLS5072S
Insured/Policyholder	
Name Of Registered Owner	THIERRY LIM THIAN SENG
NRIC No	SXXXX148H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90083639
Alternative Phone No	OTHERS-90083639
Vehicle Particulars	
Manufacturer	VOLKSWAGEN
Model	CADDY
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	19-MT107115-R01
Cover Note Number	
Driver	
Name of Driver	LIM IIN GUANG

Name of Driver

LIM JIN GUANG

NRIC No

SXXXX921E

Date Of Birth

20/02/1991

Occupation

INDOOR

Date Of Driving Pass

06/07/2009

Driving Experience 10 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-86680020

Fax Number

Contact Number

EMail Address NOEMAIL

**BLK 434B FERNVALE ROAD** Address

#21-236

Postcode 792434

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

**General Information of the Accident** 

COLLIDED INTO PARKED VEHICLE Type Of Accident

Weather Conditions **CLEAR** Road Surface DRY

Other Information

ambulance?

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

3

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

NO

YES

Was any other material or property damaged?

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 **PUNGGOL N.P.C** 

ROAD: 21A TEBING LANE, POSTCODE: 828837, COUNTRY: Police Station Address

**SINGAPORE** 

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

NO

### **Circumstances of Accident**

PLS REFER TO THE POLICE REPORT:T/20200629/2002

Attachment(s)

Are accident photos available for attachment? YES YES Was there any video captured by Car Camera?

Remarks/ Reasons: HAVEN'T RETRIEVE

Was there any audio recorded? NO

**Details of Witness 1** 

Name **CAVIN** Phone Number 94875435

**Email Address** 

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number SJP8092D

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)

# **DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number

GBF423H

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

No. Of Passenger (Including Driver)

Page 3 of 21

#### Accident Sketch Plan

#### SKETCH PLAN

#### 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 Authorized Driver.
- 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
- 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)
  - (I) processing, handling and/or dealing with my dains including the settlement of the dains and any necessary investigations relating to the dalms;
  - (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, discloss and/or process my Personal Information for one or more of the above Purposes; and
- 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.
- my Parsonal 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 daims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (1) 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:

otura

(If driver is plot the policyholder)

Date & Time

NRIC/FIN No.:

## **Accident Sketch Plan**

: :1111		
nicle A:		
5 50725	42/	1
nicle B:	C TEBANG ZANG	1
P8092D		-
nrale c:		1
F423H	8	
		1
DESCRIBE CIRCUN	ISTANCES OF THE ACCIDENT	
Refer to	police report. 7/2000629 12000	_
10(0)	police 10011 1 /2000 000 13000	_
-		_
	4	_
		_
		_
		_
		_
-		
		_
DECLADATION		
DECLARATION  We declare the foregoing pa	wticulars are true in every perpect.	100
I DOUGLA PROMISSION WAS DON'T BETTER TO	A CONTRACTOR OF THE PARTY OF TH	
	Them so 100 120	
Policyholder's Signature	Open's Signature (Il drives in nor the policyholdar)  Reporting Centre Personnel's Signature (Name:	
Date & Time:	(Il drivex and the policyholder) Name:	

#### Individual Statement



T/20200629/2002

Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999 2 of 3 Report No. T/20200629/2002

CONTINUATION OF REPORT

Details of Perso	n Involved	- 15 F73		AFREN		
Any Pedestrian I	nvolved: No					
No. of Pedestrian	ns Injured: NIL		Use of Pedestrian Crossing: NA			
Driver		EZ-Killer ST	Nº MARIE	ARREST	18000	THE REAL PROPERTY.
Name	LIM JIN GUANG	LIM JIN GUANG		ID No	),	S9105921E
Related Vehicle	SLS5072S (Car)			Conta	act No.	86680020
Hospital/Clinic	NIL			Class Drivin Licen Expir	g	Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL		Date Dis		NIL	
No. of Days grant	ted Medical Leave	NIL	Degree o	The second second	NIL	

### Brief Details.

On 28/06/2020 at around 2200hours, I parked my vehicle at the parallel carpark along Tebing Lane, lot number 2. Everything is intact. After which, I went to Hai Bin prawning area.

On 29/06/2020 at around 0010hours, I returned to my vehicle, SLS5072S and discovered that the right mirror was damaged. I thought that someone has damaged my vehicle. Afterwhich, one male Chinese subject approached me and informed that he saw someone hit my vehicle. Then the said vehicle drove off. He also informed that he called for police. I also discovered that the right side of the vehicle GBF423H which parked in front of my vehicle was damaged too. I saw one note left on the windscreen of GBF423H. The note was left by a witness namely Cavin, HP: 94875435. Cavin informed that he witness one vehicle hit onto GBF423H, and the vehicle also almost hit onto his vehicle too.

Shortly after, traffic police attended to the scene. There is no injury. I have in-built car camera and I am unsure if there is any recording on the accident.

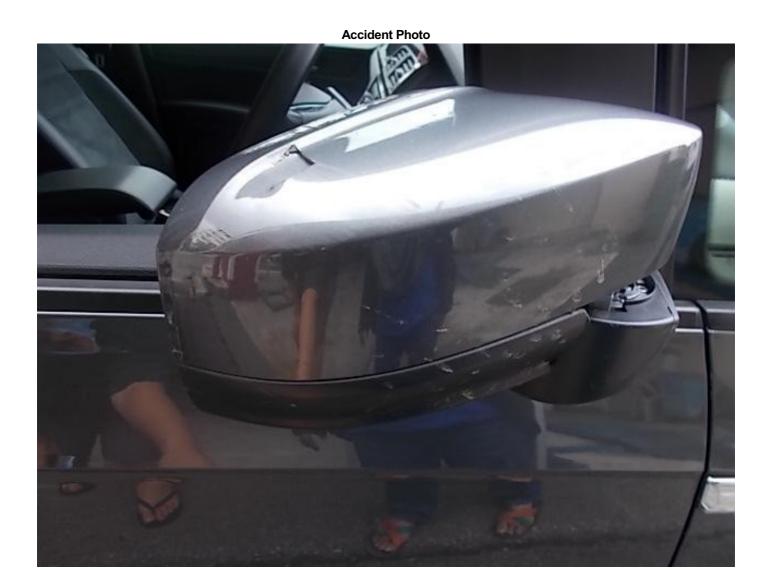






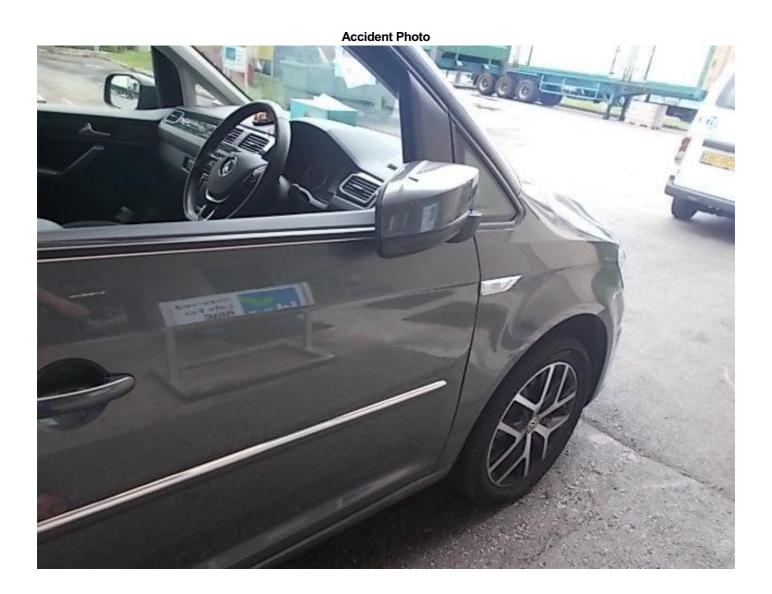


















## Police Report





1 013 Report No. T/20200829/2002

Police Station Of Origin; Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-8049999

## REPORT OF A TRAFFIC ACCIDENT

	me Report i 020 00:58	Made	Vide Report No : F/20200628/0339	Station Diary No. 23		
Informa	int's Partic	ulars	10 Hall 10 Hall 11 Hall 11 Hall	AND THE STATE OF THE WAY		
Name of Informant; LIM JIN GUANG			Address: APT BLK 434B FERNVALE ROAD #21-236 SINGAPORE 792434			
ID Type / ID No.: NRIC NO / S9105921E			Contact No.: Home/Office: Mobile 86680020			
National SINGAR	lity: ORE CITIZ	EN.	Email			
Sex: Age: Date of Birth: Male 29 20/02/1991			Type of informant: Driver			
Race: Chinese			Language:	Institution / School Name:		
	Occupation: REGIONAL MANAGER		Driving Licence Information: Class: 2B,3	Date of Expiry:		

Type of Accident	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident 29/06/2020 00:10	Type of Location Car Park
Location: Along Road 1 TEBING LAN Weather: Glear	E	Road Surface:	F	oad Speed Limit
Section 1		And the second second		
Traffic Flow:		Traffic Control: Not Controlled	T	raffic Volume:

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passengur
GBF423H						0
SJP8092D	Car					D
SLS5072S	Car					'n

### **Police Report**





Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-8049999 2 of 3 Report No. 1/20200629/2002

### CONTINUATION OF REPORT

Details of Perso	on Involved		A STILL OF	MICH		A WILLIAM STATE OF THE STATE OF
Any Pedestrian I	nvolved: No		- III diamenta	OILTS VE		
No. of Pedestria	ns Injured: NIL		Use of Pedestrian Crossing: NA			sing: NA
Driver	A STREET, SALES					STEEL STEEL STREET
Name	LIM JIN GUANG			ID No	).	S9105921E
Related Vehicle	SLS5072S (Car)			Conta	act No.	86680020
Hospitat/Clinic	NIL			Class Drivin Licen Expire	g ce &	Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o			

### Brief Details.

On 28/08/2020 at around 2200hours, I parked my vehicle at the parallel carpark along Tebing Lane, lot number 2. Everything is intact. After which, I went to Hai Bin prawning area.

On 29/06/2020 at around 0010hours, I returned to my vehicle, SLS5072S and discovered that the right mirror was damaged. I thought that someone has damaged my vehicle. Afterwhich, one male Chinese subject approached me and informed that he saw someone hit my vehicle. Then the said vehicle drove off. He also informed that he called for police. I also discovered that the right side of the vehicle GBF423H which parked in front of my vehicle was damaged too. I saw one note left on the windscreen of GBF423H. The note was left by a witness namely Cavin, HP: 94875435. Cavin informed that he witness one vehicle hit onto GBF423H, and the vehicle also almost hit onto his vehicle too.

Shortly after, traffic police attended to the scene. There is no injury. I have in-built car camera and I am unsure if there is any recording on the accident.

### **Police Report**





Police Station Of Origin.
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999

3 of 3 Report No. T/20200629/2002

CONTINUATION OF REPORT

## Sketch Plan

Informant is not able to provide sketch plan-

Signature Of Officer Recording The Paport: F / Staff Sgt TAY HUEI JING	Signature O'Nninemant:
Signature Of Interpreter: Not applicable	Date/Time 29/05/2020-80:58
Officer In Charge Of Case:	Classification Of Case.
Sgt 3 MUHAMMAD FARHAN BIN SAIR! // Contact No.: 65476224	H. D.