

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 willful 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	18/06/2020 09:18
Date Of Accident	17/06/2020 12:15
Exact Location Of Accident	28 JOO KOON CIRCLE CAR PARK LEVEL 4
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBJ8941E
Insured/Policyholder	
Name Of Registered Owner	ASIAGROUP LEASING PTE LTD
Co Reg No	1XXXXX734N
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-63632288
Vehicle Particulars	
Manufacturer	TOYOTA
Model	REGIUS ACE
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5112881852 (COMP)
Cover Note Number	
Driver	
Name of Driver	HONG JIAJUN , BENJI
NRIC No	SXXXX019B
Date Of Birth	09/05/1990
Occupation	INDOOR
Date Of Driving Pass	16/06/2009
Driving Experience	11 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90713148
Fax Number	
Contact Number	OTHERS-90713148
Email Address	BEN_ZHU90@HOTMAIL.COM

Address	APT BLK 104B ANG MO KIO STREET 11 #08-63
Postcode	561104
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

Type Of Accident	COLLISION - MAJOR/MINOR RD
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)	4
Passenger 1	NAME: : COLLEAGUE GENDER: : FEMALE
Passenger 2	NAME: : COLLEAGUE GENDER: : MALE
Passenger 3	NAME: : COLLEAGUE GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JURONG WEST NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 700 CORPORATION ROAD , POSTCODE: 649818 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2689999 - FAX NO: 62672438
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT ATTACH -J/20200617/2076

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 OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLX7766J
Vehicle Make/Model/Colour	
Details Of Properties	

Vehicle Category	PRIVATE CAR
Name of Driver	REYNAUD STEPHANE NICOLAS PIERRE MARIE
NRIC/Passport Number	GXXXX554U
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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' 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.



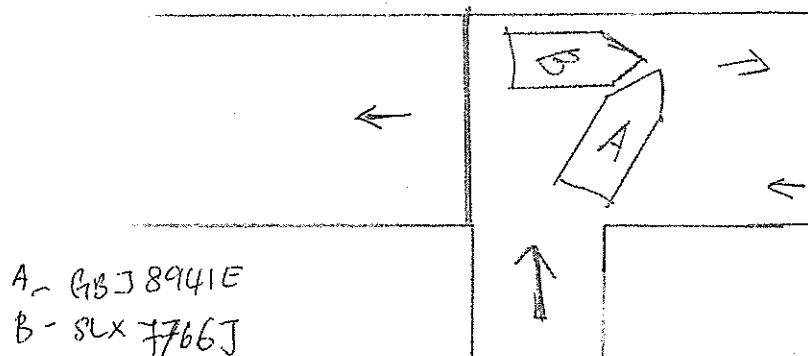
Policyholder's Signature
Date & Time:

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

IDAC BUKIT BATOK (VAC)
511 Bukit Batok Street 23
Singapore 658545
Tel: 6360 3312 Fax: 6569 0722
Email: vacbb@singnet.com.sg

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

SKETCH PLAN

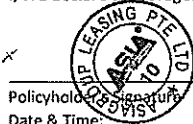


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police report.

DECLARATION

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



Policyholder's Signature: _____
Date & Time: _____

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

IDAC BUKIT BATOK (VAC)
511 Bukit Batok Street 23
Singapore 659545
Tel: 6360 3312 Fax: 6369 0722
Email: vacbb@singnet.com.sg

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



**SINGAPORE
POLICE FORCE**



J/20200617/2076

1 of 2

POLICE REPORT (NP299)

Report No. J/20200617/2076

Police Station Of Origin
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

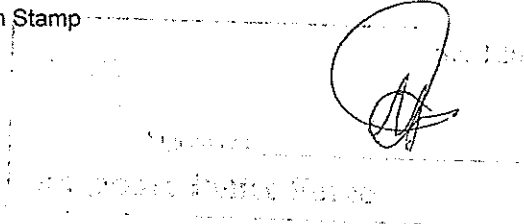
Date/Time Report Made 17/06/2020 19:20	Vide Report No. J/20200617/2075	Station Diary No. 147
Name Of Informant HONG JIAJUN, BENJI	Address APT BLK 104B ANG MO KIO STREET 11 #08-63 SINGAPORE 561104	
ID Type / ID No. NRIC NO / S9016019B	Contact No. Home/Office	Mobile 90713148
Nationality SINGAPORE CITIZEN	Email Address	
Occupation Operation Executive	Sex Male	Age 30
Institution/School Name	Date of Birth 09/05/1990	Race Chinese
Date/Time Of Incident 17/06/2020 12:15	Location Of Incident 28 JOO KOON CIRCLE UNNAMED SINGAPORE 629057 Level 4 carpark	

Brief details.

On the 17th June 2020 at about 1215hrs I was driving my company van GBJ8941E and wanted to exit from level 4 carpark of Joo Koon Hub. As I was driving out the van, vehicle SLX7766J came out from the left and collided onto the van. He had driven against the flow of traffic at the multi- storey carpark resulting in the collision. Upon the collision, I asked for his the drivers particulars and he passed me his FIN Card. When I asked him for his driving license, however he informed me that he left it at his workplace. As such I took a photograph of his FIN card and also the photograph of the collision. None of

Signature Of Officer Recording The Report: J / Staff Sgt TAMILLMAARAN S/O LETCHMANAN	Signature Of Informant: <i>Bemi</i>
Signature Of Interpreter: Not applicable	Date/Time: 17/06/2020 19:20
Officer In-Charge Of Case: J / Jurong Police Divisional Investigation Branch / SI MUHAMMAD HAZMI BIN BUANG Contact No.: 62689999	Classification Of Case:

Authentication Stamp



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES):

PASS DATE

Class 3 Motor Cars =< 3000kg with =< 7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg 16 Jun

NP 428A



Licence No: S9016019B

3716263



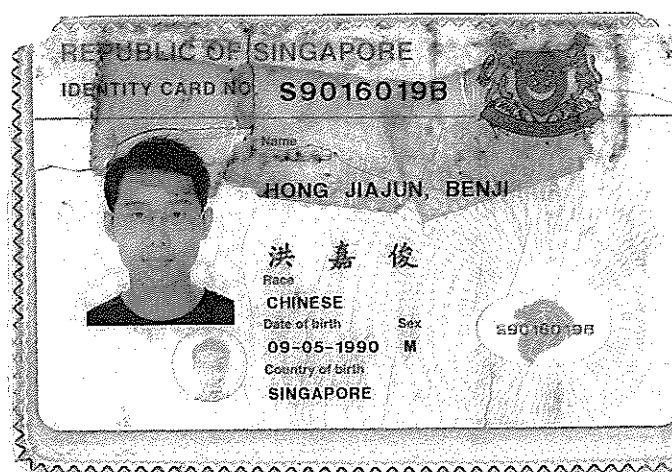
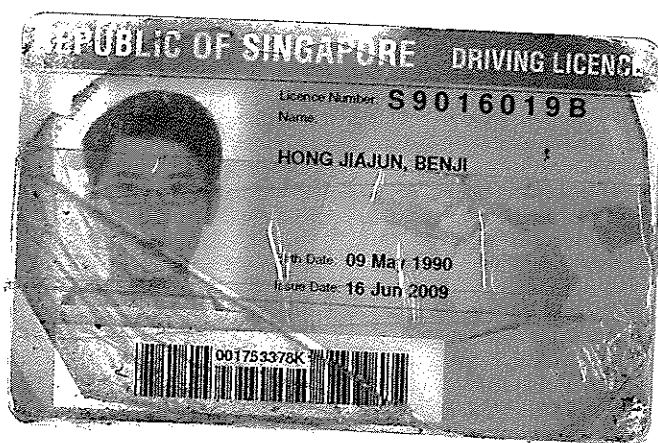
NRIC No: S9016019B

Date of issue
19-05-2005

Address

APT BLK 104B ANG MO KIO STREET 11
#08-63
SINGAPORE 561104

Driver





**SINGAPORE
POLICE FORCE**



J/20200617/2076

1 of 2

POLICE REPORT (NP299)

Report No. J/20200617/2076

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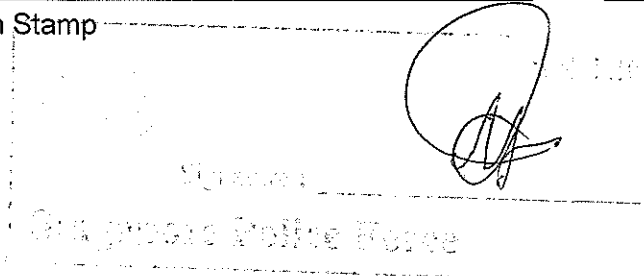
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Signature Of Interpreter: Not applicable	Date/Time: 17/06/2020 19:20
Officer In-Charge Of Case: J / Jurong Police Divisional Investigation Branch / SI MUHAMMAD HAZMI BIN BUANG Contact No.: 62689999	Classification Of Case:

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**SINGAPORE
POLICE FORCE**



J/20200617/2076

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20200617/2076

us suffered any injuries during the accident. There was minor scratches to the front left of my van. There was a dent to the right front(near the headlight) of his car. The driver of the car said that he doesn't want to pursue the case and wanted to leave quickly. After we left, I made a check if the driver has a Singapore qualified driving license via Qualified Driving License Website. However the result show that he doesn't have a Singapore Driving License. I am afraid that he might not have a valid license to drive in Singapore and might be using other owner's vehicle. I am lodging this report for my insurance claim.

The Driver of Vehicle SLX77667J:

Reynaud Stephane Nicolas Pierre Marie, M/French

G3448554U

DOB: 21.09/1975

Subjects Involved	
Victim	
Person Name	HONG JIAJUN, BENJI (Informant)

Signature Of Officer Recording The Report:

J / Staff Sgt TAMILLMAARAN S/O LETCHMANAN

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
J / Jurong Police Divisional Investigation Branch /
SI MUHAMMAD HAZMI BIN BUANG
Contact No.: 62689999

Authentication Stamp

Signature Of Informant:

Date/Time:
17/06/2020 19:20

Classification Of Case: