

## 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	27/06/2020 11:43
Date Of Accident	24/06/2020 16:10
Exact Location Of Accident	VICOM YISHUN CARPARK COMPOUND
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMH6253B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TEOH ZHIWEI
NRIC No	S8613000I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-84981573
Alternative Phone No	OTHERS-84981573

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	AD AVANTE 1.6 GLS (A) S
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5107317461-01
Cover Note Number	29/01/2020 28/01/2021

### Driver

Name of Driver	TEOH ZHI MING
NRIC No	S9143407E
Date Of Birth	29/11/1991
Occupation	INDOOR
Date Of Driving Pass	06/07/2012
Driving Experience	7 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96648519
Fax Number	
Contact Number	
Email Address	ZHIMING_91@HOTMAIL.COM

Address	BLK 768 YISHUN AVE 3 #11-333
Postcode	760768
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SIBLING
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	GEYLANG N.P.C
Police Station Address	<b>ROAD:</b> 132 PAYA LEBAR ROAD , <b>POSTCODE:</b> 409014 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT- T/20200625/2099

#### 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	SHB2194E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

## Sketch Plan

### SKETCH PLAN

VEHICLE NO.: SMH6253B  
INSURER : STMC  
DATE & TIME: 24/6/2020  
16:10

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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 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:

Reporting Centre Personnel's Signature  
Name: Ebedy (45)  
NRIC/FIN No.:

## Sketch Plan #2

### SKETCH PLAN

Wroom  
Yishun  
r/powic  
compared

A X

B

A = SMH 6253B  
B = SHB 2194E

### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report T 20200625/2079

Note : Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information.

### DECLARATION

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

Policyholder's Signature  
Date & Time:

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

Reporting Centre Personnel's Signature  
Name: *etula*  
NRIC/FIN No.: *CY5*

GIA/MC SketchPlanForm\_V3 ( ) Claim Own Policy ( ☒ ) Claim Third Party ( ) Reporting Only  
( ) Claim OD/TP at other workshop ( )

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20200625/2099

Police Station Of Origin:  
Geylang N.P.C  
1 Cassia Link SINGAPORE 397618  
Tel No: 1800-8486999

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Report No. T/20200625/2099

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/06/2020 19:30	Vide Report No.:	Station Diary No.: 84
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### Informant's Particulars

Name of Informant: TEOH ZHI MING			Address: APT BLK 768 YISHUN AVENUE 3 #11-333 SINGAPORE 760768		
ID Type / ID No.: NRIC NO / S9143407E			Contact No.: Home/Office: Mobile: 96648519		
Nationality: SINGAPORE CITIZEN			Email: zhiming_91@hotmail.com		
Sex: Male	Age: 28	Date of Birth: 29/11/1991	Type of Informant: Vehicle Owner		
Race: Chinese			Language:		Institution / School Name:
Occupation: VEHICLE INSPECTOR			Driving Licence Information: Class: Date of Expiry:		

### General Information of the Accident

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 24/06/2020 16:10	Type of Location: Open space for car to parks
Location: Along Road 1 YISHUN INDUSTRIAL PARK A  VICOM Yishun				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
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
SHB2194E	Taxi					0
SMH6253B	Car				Slightly Damaged	0

### Details of Person Involved

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

# POLICE REPORT



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POLICE FORCE**



T/20200625/2099

Police Station Of Origin:  
Geylang N.P.C  
1 Cassia Link SINGAPORE 397618  
Tel No: 1800-8486999

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Report No. T/20200625/2099

## CONTINUATION OF REPORT

Driver			
Name	TEOH ZHI MING		ID No. S9143407E
Related Vehicle	SMH6253B (Car)		Contact No. 96648519
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 24/06/2020 at about 7am, I drove my car SMH6253B to VICOM Yishun and parked at one of the red colour designated area for vehicle parking.

At about 5.40pm, when I was retrieving my car after work, I discovered that there were scratches on my car rear bumper and my rear bumper left side were slightly dislodged.

I made a check and there was no note attached to my car informing me about the damages or contact person.

I viewed my company CCTV and discovered that at about 4.10pm, there was one yellow colour Comfort Delgro taxi SHB2194E that was driving past my car from the right side and came to a complete stop very suddenly, near to my car rear area. Right after, the footage captured a vehicle that was driving past from the other direction. I believed that the yellow colour taxi shifted his car to the right side and hit my car rear bumper as it was a very sudden stop.

During the entire period, no other car drove as close to my car as this taxi. The damage done was estimated to be around \$300/-

POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20200625/2099

Police Station Of Origin:  
Geylang N.P.C  
1 Cassia Link SINGAPORE 397618  
Tel No: 1800-8486999

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Report No. T/20200625/2099

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 NG KA WAI	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 25/06/2020 19:30
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt NEO ZHI YUAN Contact No.: 65476079	Classification Of Case:
Authentication Stamp NP168  SIGNATURE	



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo

