

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	18/07/2020 10:29
Date Of Accident	16/07/2020 22:45
Exact Location Of Accident	BLK 237 HOUGANG STREET 21 OPEN CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLA4333R
Insured/Policyholder	
Name Of Registered Owner	SOH TECK SOON
NRIC No	SXXXX154J
Email Address	SOH_TECKSOON@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-96234924
Alternative Phone No	OFFICE-96234924

Vehicle Particulars

Manufacturer	MAZDA
Model	6-2.0 4-DOOR SEDAN 2.0L SP.6EAT (A)
Exact Purpose for which vehicle was being used at time of accident	VEHICLE WAS 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	ECICS LIMITED
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MPC19A00132400
Cover Note Number	

Driver

Name of Driver	SOH TECK SOON
NRIC No	SXXXX154J
Date Of Birth	25/07/1979
Occupation	INDOOR
Date Of Driving Pass	06/06/1999
Driving Experience	21 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96234924
Fax Number	
Contact Number	OFFICE-96234924
EMail Address	SOH_TECKSOON@YAHOO.COM.SG

Address	BLK 237 HOUGANG STREET 21 #06-386
Postcode	530237
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 BY FALLEN TREE / OTHER OBJECTS
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	1
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	NO
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	ANG MO KIO SOUTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 81 ANG MO KIO AVE 3 , POSTCODE: 569929 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4519999 - FAX NO: 65535679
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

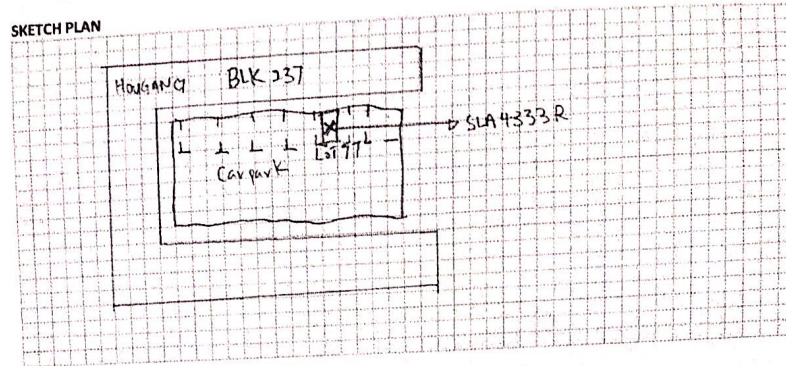
Circumstances of Accident

REFER TO POLICE REPORT AND SKETCH PLAN ATTACHED

Attachment(s)

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police Report.

Report no. F/20200717/2058

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:
NRIC/FIN No.:



**SINGAPORE
POLICE FORCE**



F/20200717/2058

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POLICE REPORT (NP299)

Report No. F/20200717/2058

Police Station Of Origin
Ang Mo Kio South N.P.C
81 Ang Mo Kio Avenue 3 SINGAPORE
569929
Tel No: 1800-4519999

Date/Time Report Made 17/07/2020 16:15	Vide Report No. F/20200716/0191	Station Diary No. 29
Name Of Informant SOH TECK SOON	Address APT BLK 237 HOUGANG STREET 21 #06-386 SINGAPORE 530237	
ID Type / ID No. NRIC NO / S7921154J	Contact No. Home/Office 96234924	Mobile
Nationality SINGAPORE CITIZEN	Email Address	
Occupation Naval Officer	Sex Male	Age 40
Institution/School Name	Date of Birth 25/07/1979	Race Chinese
Date/Time Of Incident 16/07/2020 22:45	Location Of Incident APT BLK 237 HOUGANG STREET 21 HDB-HOUGANG SINGAPORE 530237 Open carpark	

Brief details.

On 16/07/2020 at 2245hrs, I was at home and received a call from a Police Officer from Hougang. I was instructed to go downstairs to my car and I went down. At my car, there were 4 Police Officers who informed me that they were doing their checks as some debris had fallen on my car. The Officers informed me that the debris probably came from the HDB flat and they had informed EMSU. My car suffered a big crack due to the concrete. My car insurance company advised me to make a Police report.

Signature Of Officer Recording The Report: F / Sgt 3 ONG KOK CHUAN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 17/07/2020 16:15
Officer In-Charge Of Case: F / Ang Mo Kio South N.P.C / Sr Staff Sgt MUHAMMAD RAIMI BIN MIS NAM Contact No.: 65536745 6489 0999	Classification Of Case:

Authentication Stamp

