MNII19012354 / NTUC Income Insurance Co-operative Ltd - HQ ENTRY DATE & TIME: 26/01/2019 09:20 SUBMITTED BY: Tang Chun Kiet

## 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.

**ACCIDENT STATEMENT** 

Date Of Report 26/01/2019 09:20

Date Of Accident 25/01/2019 14:25

Exact Location Of Accident NEW BRIDGE ROAD

Country/State of Loss SINGAPORE

**DETAILS OF OWN VEHICLE** 

Vehicle Registration Number SKA7103E

Insured/Policyholder

Name Of Registered Owner BLACK EAGLE RENTAL LLP

Co Reg No T17LL1043L

Email Address NAIMOTAI9912@GMAIL.COM

Mobile Phone No

Alternative Phone No Office-90107743

**Vehicle Particulars** 

Manufacturer TOYOTA
Model WISH

Exact Purpose for which vehicle was being used at

time of accident

PRIVATE HIRE 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 HIRE

**Insurance Company** 

Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy YES

Policy Number 5098750063

Cover Note Number DRIVO CLASSIC

**Driver** 

Name of Driver SAFEN BIN SAFIE

 NRIC No
 \$1537007F

 Date Of Birth
 13/02/1962

 Occupation
 OUTDOOR

 Date Of Driving Pass
 02/06/1984

Driving Experience 34 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-94563589

Fax Number
Contact Number

EMail Address NOEMAIL

Address BLK 161 #02-292 SIMEI ROAD

Postcode 520161

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own Vehicle -

-

Insurance Company of Driver's Own Vehicle -

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### **General Information of the Accident**

Type Of Accident SIDE SWIPE

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?

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) 1

**Details of Police Action** 

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name TRAFFIC POLICE HEADQUARTERS

Police Station Address ROAD: 10 UBI AVENUE 3 SINGAPORE, POSTCODE: 408865, COUNTRY:

**SINGAPORE** 

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

## **Circumstances of Accident**

Refer to police report

## Attachment(s)

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

Remarks/ Reasons: FILE SIZE TOO BIG TO BE UPLOADED

Was there any audio recorded?

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number SLP4121G

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR Name of Driver UNKNOWN

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

E-FILE 8/24/2020

### Sketch Plan

INCOME MOTOR SERVICE	E CENTRE	Report Date & Start Time:	26-01-2019 / 09:38
Report No: MT/	D.O.A: 25-01-2019 Time: 14:25 brs	Vehicle No SKA7103E	Reporting Type:

### SKETCH PLAN

### IMPORTANT NOTICE

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- 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
- 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 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
- 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 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

26-01-19 / 9:38

Policyholder's Signature / Date & Time

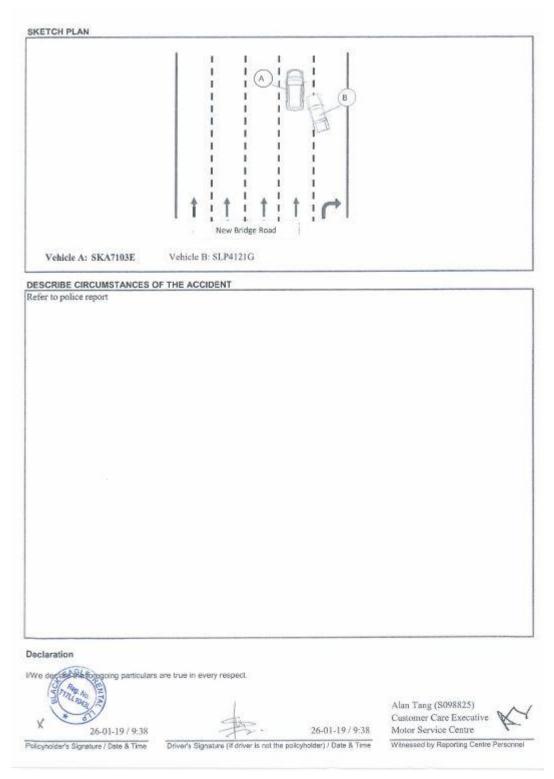
Driver's Sign#file (If driver is not the policyholder) / Date & Time

26-01-19 / 9:38

Alan Tang (S098825) Customer Care Executive Motor Service Centre

Witnessed by Reporting Centre Peronnel

Sketch Plan #2



**Police Report** 





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

1 of 3 Report No. T/20190125/7019

## REPORT OF A TRAFFIC ACCIDENT

	ne Report N 019 23:12	/lade:	Vide Report No.:	Station Diary No.:		
Informa	nt's Partic	ulars				
Name of Informant: SAFEN BIN SAFIE			Address: APT BLK 161 SIMEI ROAD #02-292 SINGAPORE 520161			
ID Type / ID No.: NRIC NO / S1537007F			Contact No.: Home/Office:	Mobile: 94563589		
National SINGAP	ity: ORE CITIZ	EN	Email: ipin1962@gmail.com			
Sex: Male	Age: 56	Date of Birth: 13/02/1962	Type of Informant: Driver			
Race: Malay			Language: English	Institution / School Name:		
Occupation: Grab Driver			Driving Licence Information: Class: 2B,2A,3,3A	Date of Expiry:		

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 25/01/2019 14:2	Type of Location Straight Road
Location: UPPER CRO Weather:	SS STREET	Road Surface:		Road Speed Limit: 60 Km/h
Clear				
Clear Traffic Flow: One Way		Traffic Control: Traffic Light - Wor	king	Traffic Volume:

Details of V	ehicle Invo	lved				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SKA7103E	Car	TOYOTA	Wish	Black	Slightly Damaged	0
SLP4121G	Car	HONDA	Vezel	Blue		3

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
SKA7103E	NTUC Income Insurance Co-Operative Limited	5098750063	12/07/2018	11/07/2019	





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

2 of 3 Report No. T/20190125/7019

### CONTINUATION OF REPORT

Details of Perso	n Involved					
Any Pedestrian I	nvolved: No					
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA			
Driver						
Name	SAFEN BIN SAFIE		ID No	•	S1537007F	
Related Vehicle	SKA7103E (Car)			Conta	ct No.	94563589
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g	Class: 2B,2A,3,3A Date of Expiry: NIL
Date Treatment	NIL	Date Disc	harge	NIL		
No. of Days granted Medical Leave NIL		Degree of	fInjury	NIL		

At about 1425hrs, I was driving alone in my car bearing plate SKA7103E, a black Toyota Wish, along New Bridge Road towards People's Park Complex taxi stand on the way to pick up a passenger. While driving along the four-lane road on the 3rd lane, I signaled and changed to the 2nd lane to make a right turn in front of Chinatown MRT Station, while driving in my lane, a blue Honda Vezel bearing plate 'SLP4121G' changed lane into the 2nd lane from the 1st lane and hit me on my rear right passenger door. I immediately stopped the car as I did not want to cause more damage to the car. I then looked at the driver of the car and gestured to the driver to stop at the side. The driver, a Chinese male in his mid twenties, was with 2 passangers, a male Chinese in his late fifties in the front seat and a female Chinese in her late fifties.

Upon gesturing to the driver to stop at the side, the driver looked at me and turned away while the male passanger gestured to the driver to keep going foward. The driver then drove foward causing a longer scratch on the side of the car. I then followed the driver along Upper Cross Street but the driver continued to drive, seemingly without an intention to stop. At Park Crescent, the driver of the car turned into a multi storey carpark.

The collision caused my car to sustain damages, multiple scratches ranging from 10cm - 70cm on my right rear passanger door and a 45cm scratch on my side skirt. I have a front dashboard camera and it has recorded the whole incident.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

3 of 3 Report No. T/20190125/7019

CONTINUATION OF REPORT

Sketch Plan

NP168

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 25/01/2019 23:12
Officer In Charge Of Case: TP / TPIB / IRMAN BIN MOHAMAD SAID Contact No.: 65476145	Classification Of Case:
Authentication Stamp	







# **Accident Photo**









# **Accident Photo**





