

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	25/08/2020 14:13
Date Of Accident	24/08/2020 13:00
Exact Location Of Accident	ORCHARD PLAZA BASEMENT 2 CARPARK LOT NO 37
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLT5411S
Insured/Policyholder	
Name Of Registered Owner	CHANG YANG CHUANG
NRIC No	SXXXX843H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90303200
Alternative Phone No	OFFICE-90303200

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL
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	5095272624-02
Cover Note Number	

Driver

Name of Driver	ANG SWEE ENG
NRIC No	SXXXX491C
Date Of Birth	09/10/1966
Occupation	INDOOR
Date Of Driving Pass	19/01/1983
Driving Experience	37 YEARS AND 7 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98199308
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 46 BENDEMEER RD #12-1433
Postcode	330046
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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	ROCHOR NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 11 KAMPONG KAPOR ROAD , POSTCODE: 208678 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2949999 - FAX NO: 63918583
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT T/20200824/2154

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLB5447J
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)

Accident Sketch Plan


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.

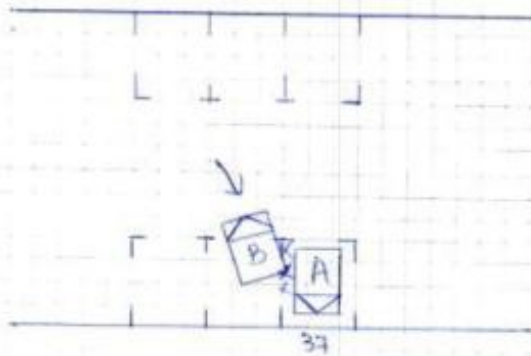
X

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.:

Accident Sketch Plan

SKETCH PLAN



Veh A: SLT 5411S

Veh B: SLB 5447J

Orchard Plaza Basement 2 car park

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report

Report No: T/20200824/2154

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.:

POLICE REPORT



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999



T/20200824/2154

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Report No: T/20200824/2154

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:
24/08/2020 23:55

Vide Report No:
E/20200824/0085

Station Diary No:
152

Informant's Particulars

Name of Informant: ANG SWEE ENG			Address: APT BLK 46 BENDEMEER ROAD #12-1433 SINGAPORE 330046		
ID Type / ID No: NRIC NO / S1777491C			Contact No: Home/Office: Mobile: 98199308		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 53	Date of Birth: 09/10/1996	Type of Informant: Driver		
Race: Chinese			Language: Chinese		
Occupation: FLOURIST			Institution / School Name:		
			Driving Licence Information: Class: 3		
			Date of Expiry:		

General Information of the Accident

Type of Accident: Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 24/08/2020 13:00	Type of Location: Car Park
Location: ORCHARD ROAD			
Weather: In multistory	Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Not Controlled	Traffic Volume: No Traffic	
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
SLB5447J	Car	HONDA	VEZEL 1.5X CVT	White		0
SLT5411S	Car	HONDA	VEZEL 1.5X CVT	White	Slightly Damaged	0

Details of Person Involved

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

POLICE REPORT



**SINGAPORE
POLICE FORCE**

Police Station Of Origin
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
206678
Tel No: 1800-2949099



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Report No. T/20200824/2154



Police Station Of Origin
Rochor N.P.C
11 Kampong Kapur Road
206678
Tel No: 1800-2949099

CONTINUATION OF REPORT

Vehicle Owner Name	ANG SWEE ENG	ID No.	S1777491C
Related Vehicle	NIL	Contact No.	98199308
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 24/08/2020 at about 0945hrs, I parked my vehicle at the carpark of Orchard Plaza, "Vehicle registration no: SLT5411S, White Honda Vezel" head-in at lot 37 located at Basement 2 of the building.

At about 1300hrs, my husband namely Chang Yang Chuang (Contact No: 90303200) came to me and told me that my vehicle got hit by another vehicle. Hence, I went to check and found scratches and dents to the right center of my vehicle.

I then approached the management of orchard plaza where they assisted me to view CCTV inside carpark and discovered that at about 1125hrs, one White Honda Vezel with the vehicle registration no: SLB5447J had collided with my vehicle and drove off to an unknown location.

Prior Traffic Police arrival, my husband had shift the car to carpark lot 38 to prevent any further damages to the vehicle. I would like to say that my vehicle does not have a dashcam installed at the rear.

I am lodging this report for insurance claims purposes.

POLICE REPORT

SINGAPORE
POLICE FORCE

Police Station Of Origin
Rochor N.P.C
11 Kampong Kapor Road SINGAPORE
208678
Tel No: 1800-2949999

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Report No: 70250080402154

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:

A /

Sgt 2 Damien Lee Kai Cong

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

24/08/2020 23:55

Officer In Charge Of Case:

TP / HRT /

Sr Staff Sgt IRMAN BIN MOHAMAD SAID

Contact No: 65476145

Classification Of Case:

Authentication Stamp

NP168

POLICE FORCE

SIGNATURE

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

