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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	26/08/2020 15:35
Date Of Accident	24/08/2020 13:30
Exact Location Of Accident	BLK 513 BISHAN ST 13 CARPARK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SFV3369E
Insured/Policyholder	
Name Of Registered Owner	TAN SIEW KUAN JUNETTE
NRIC No	SXXXX580A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91875855
Alternative Phone No	OFFICE-91875855
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	E 250CGI
Exact Purpose for which vehicle was being used at time of accident	PRIVATE 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 CAR
Insurance Company	
Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	20-MS005373-R01
Cover Note Number	
Driver	
Name of Driver	CHNG JUN RUI

Name of Driver

CHNG JUN RUI

NRIC No

SXXXX302E

Date Of Birth

13/04/1998

Occupation

INDOOR

Date Of Driving Pass

17/08/2017

Driving Experience 3 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91875855

Fax Number

Contact Number OFFICE-91875855

EMail Address NOEMAIL

Address BLK 252 COMPASSVALE STREET

#11-13

Postcode 540252

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured CHILDREN

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company 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?

Number of vehicles (including own vehicle)

involved in the accident

NO

Was any body injured in the Accident?
Was any injured conveyed to hospital by

ambulance?

NO

2

Was any other material or property damaged? YES
I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

0

YES

NO

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Number of Passengers (Including Driver)

Police Station Name BISHAN NEIGHBOURHOOD POLICE CENTRE

ROAD: 20 BISHAN STREET 23 , POSTCODE: 579757 , COUNTRY:

Police Station Address SINGAPORE

Police Station Contact **TEL NO**: 1800-5529999 - **FAX NO**: 65561905

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT - T/20200824/2082 & T/20200824/2087.

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 YQ8889P

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Page 2 of 20

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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- 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.
- 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.
- 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)
 - 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:
 - 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:

NRIC/FIN No.:

-16 SKETCH PLAN BIK 513 Bishan Street 13 DESCRIBE CIRCUMSTANCES OF THE ACCIDENT 7/20200824 /2082 Note: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check your policy for more information. DECLARATION I/We declare the foregoing particulars are true in every respect. Policyholder's Signature Driver's Signature Reporting Centre Personnel Signature (If driver is not the policyholder) Date & Time: Name: Date & Time: NRIC/FIN No.:





Police Station Of Origin: Bishan N.P.C 20 Bishan Street 23 SINGAPORE 579757 Tel No: 1800-5529999 1 of 3 Report No. T/20200824/2082

REPORT	OF A TRAFFI	C ACCIDENT				
Date/Time Report Made: 24/08/2020 15:10			Vide Report No.:	Station Diary No.: 46		
Informa	nt's Partic	ulars				
Name of CHNG J	f Informant: IUN RUI		Address: APT BLK 252 COMPASSVAL 540252	E STREET #11-13 SINGAPORE		
ID Type / ID No.: NRIC NO / S9814302E			Contact No.: Home/Office:	Mobile: 91875855		
Nationality: SINGAPORE CITIZEN			Email:			
Sex: Age: Date of Birth: Male 22 13/04/1998		THE RESIDENCE OF THE PARTY OF T	Type of Informant: Driver			
Race: Chinese			Language: English	Institution / School Name:		
Occupation: NSF			Driving Licence Information: Class: 3 Date of Expiry:			

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident; 24/08/2020 13	30	Type of Location Car Park
Location: BISHAN STR Weather: Clear	EET 13	Road Surface:			d Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic	
Type of Collis Moving Vehic	sion: cle Against - Parked Ve	ehicle			one conveyed by pulance:

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SFV3369E	Car	MERCEDES BENZ	E 250CGI	Beige	Slightly Damaged	0

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

Police Report



T/20200824/2082

Police Station Of Origin: Bishan N.P.C

20 Bishan Street 23 SINGAPORE 579757

Tel No: 1800-5529999

2 of 3 Report No. T/20200824/2082

CONTINUATION OF REPORT

Driver	District of the last					
Name	CHNG JUN RUI			ID No		S9814302E
Related Vehicle	SFV3369E (Car)			Conta	ct No.	91875855
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	-	NIL	

Brief Details.

On 24/08/2020 at about 1320hrs, I had parked my vehicle(SFV3369E) in Bik 513 Bishan St 13 carpark along the roadside. I subsequently returned at about 1330hrs, to discover damages on the front right corner of my vehicle bumper. I wish to state that I do have an in car camera that was recording during the time that I was gone, and I am able to furnish the video upon request. I also recall there being CCTV cameras directed at my vehicle during that time. This is the first time such an incident has happened. I am lodging this report for police follow up actions.





Police Station Of Origin: Bishan N.P.C 20 Bishan Street 23 SINGAPORE 579757 Tel No: 1800-5529999 3 of 3 Report No. T/20200824/2082

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: E / Sgt 2 LEE QI, THEODORE	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 24/08/2020 15:10
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt IRMAN BIN MOHAMAD SAID Contact No.: 65476145	Classification Of Case:
Authentication Stamp	

SIGNATURE

SN 061

SINGAPORE POLICE FORCE



1 of 3

Report No. T/20200824/2087

Case Summary Form (CSF For NP168)

Manual NP168 Form Serial No 0

Report Number

T/20200824/2087

Vide Report Number

T/20200824/2082

Date/Time of Report Made

24/08/2020 15:27

Place Report Lodged

Traffic Police

Type of Informant

Driver

Name of Informant

CHNG JUN RUI

ID Type / ID No.

NRIC NO / \$9814302E

BISHAN NPC 20 BISHAN STREET 20 SINGAPORE 579757 CEL: 1850-552959

Home/Office

91875855

Mobile

91875855

Email

Type of Accident

Non-Injury / Hit and Run

Drink Drive

No

Anyone conveyed by

No

ambulance

Date/Time of Accident

24/08/2020 13:30

Accident Location

BISHAN STREET 13

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenge
SFV3369E	Car				Slightly Damaged	0
YQ8889P	Lorry					0

Police Report



T/20200824/2087

2 of 3

Report No. T/20200824/2087

Continuation of CSF For NP168

Brief Facts.

With reference to my previous report T/20200824/2082, I wish to add for the record that the carpark number was BIBE22 next to block 512 Bishan St 13 OSCP(behind the kopitiam), and also that during the time I parked my vehicle at the location, a lorry(YQ8889P) was parked very near to my car, and I strongly suspect that vehicle to be involved in the damages to my vehicle as it appeared on the same side of where the lorry was parked. The lorry was also gone by the time I returned to my vehicle.



















