MNA120080964 / National Assessment Centre Services - Ubi ENTRY DATE & TIME: 17/09/2020 17:28 SUBMITTED BY: Liew Shan Hui

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Driving Experience

Mobile Number

Fax Number Contact Number

EMail Address

Gender

- 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 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	17/09/2020 17:28
Date Of Accident	11/09/2020 13:55
Exact Location Of Accident	31 WOODLANDS CLOSE #02-23 LOT 89
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJW9669Y
Insured/Policyholder	
Name Of Registered Owner	CAI JIE FENG
NRIC No	SXXXX253C
Email Address	JFCAI1985@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91091901
Alternative Phone No	OFFICE-91091901
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	HARRIER
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	5114824935
Cover Note Number	
Driver	
Name of Driver	CAI JIE FENG
NRIC No	SXXXX253C
Date Of Birth	12/08/1985
Occupation	INDOOR
Date Of Driving Pass	01/05/2005

15 YEARS AND 4 MONTHS

(LOCAL) +65-91091901

JFCAI1985@GMAIL.COM

OFFICE-91091901

MALE

Address BLK 196C PUNGGOL FIELD #11-493

Postcode 823196

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 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 ANG MO KIO DIVISION HQ

Police Station Address ROAD: 51 ANG MO KIO AVENUE 9, POSTCODE: 569784, COUNTRY:

SINGAPORE

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

REFER TO POLICE REPORT F/20200914/7072

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

YES YES

NO

Remarks/ Reasons: W

WITH DRIVER

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBJ6432X

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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- 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) of:
 - 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

NRIC/FIN No.:

Accident Sketch Plan

			A:	: SJW	96694
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				- 663	6432X
	BIANT				
	84				
31 w	roodlands close #	02 - 23			
RIBE CIRCUMSTANCE	S OF THE ACCIDENT				
Refer +	· Police Report	F/202	00914	17.72	
		/			
	/				
	ticulars are true in every respect.				
	ticulars are true in every respect.				
ARATION leclare the foregoing particular signature	ticulars are true in every respect. Driver's Signature			*************************************	el's Signature

POLICE REPORT





Report No. F/20200914/7072

POLICE REPORT (NP299)

Police Station Of Origin Ang Mo Kio Division HQ 51 Ang Mo Kio Avenue 9 SINGAPORE 569784 Tel No:1800-2180000

Date/Time Report Made Vide Report No. Station Diary No. 14/09/2020 22:25 Name Of Informant Address CAI JIEFENG 196C PUNGGOL FIELD #11-493 SINGAPORE 823196 ID Type / ID No. Contact No. NRIC NO / S8523253C Home/Office: Mobile: 91091901 Nationality Email Address SINGAPORE CITIZEN PROJECTDECREATION@GMAIL.COM Occupation Sex Age Date of Birth Race Working proprietor (retail trade) Male 35 12/08/1985 Chinese Institution/School Name Language English Date/Time Of Incident Location Of Incident 11/09/2020 13:55 - 11/09/2020 14:05 196C PUNGGOL FIELD #11-493 SINGAPORE 823196

Brief details.

My car Toyota Harrier White SJW 9669 Y was parked at lot 89 at 31 woodlands close #02-23. S737855. When I came back from lunch, I saw that the car was hit at the left rear bumper and the driver who hit my car did not leave any note. My in car cam also recorded the impact. I went to the security for video as there is 2 video cam at the area.

Today the guard shown me the video footage during the timing my car was hit and confirmed that it is a lorry from Star city construction pte ltd. I went to took pic of the lorry and found out that the damage on the lorry driver door was similar to the damage on my car.

Signature Of Officer Recording The Report:	Signature Of Informant:
Not applicable	The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 14/09/2020 22:25
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp

POLICE REPORT





2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20200914/7072

Suspect		MONTH OF THE PARTY OF	CONTRACTOR VINCENTAL		
Person Name	Starcity Construction Pte Ltd				
Gender	Unknown	Address	31 WOODLANDS CLOSE #02- 17 woodlands horizon SINGAPORE 737855		
Home/Office No	67538919				
Victim		C Description			
Person Name	CAI JIEFENG				
ID Type	NRIC NO	ID No	S8523253C		
Gender	Male	Age	35		
Race	Chinese	Language	English		
Occupation	Working proprietor (retail trade)	Address	196C PUNGGOL FIELD #11- 493 SINGAPORE 823196		
Mobile No	91091901	Is Informant A Victim?	Yes		
Mobile No Person Name	91091901 CAI JIEFENG (Informant)	A STATE OF THE PARTY OF THE PAR	100000000000000000000000000000000000000		

Signature Of Officer Recording The Report:	Signature Of Informant:
Not applicable	The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 14/09/2020 22:25
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	

























