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

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	ACCIDENT STATEMENT
Date Of Report	22/09/2020 09:30
Date Of Accident	20/09/2020 20:30
Exact Location Of Accident	BEATTY LANE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLL3323T
Insured/Policyholder	
Name Of Registered Owner	LIU YAT HENG
NRIC No	SXXXX887I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-88583323
Alternative Phone No	OFFICE-88583323
Vehicle Particulars	
Manufacturer	MASERATI
Model	GRANTURISMO
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSNW00090102000
Cover Note Number	
Driver	
Name of Driver	LIU YAT HENG

Name of Driver

NRIC No

SXXXX887I

Date Of Birth

23/05/1975

Occupation

INDOOR

Date Of Driving Pass

31/01/2000

Driving Experience 20 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-88583323

Fax Number

Contact Number OFFICE-88583323

EMail Address NOEMAIL

Address BLK 9 BOON KENG RD #34-164

Postcode 330009

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?

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 MOULMEIN NEIGHBOURHOOD POLICE POST

Police Station Address ROAD: BLK 101 JALAN RAJAH , POSTCODE: 320101 , COUNTRY:

SINGAPORE

Police Station Contact **TEL NO**: 1800-2508999 - **FAX NO**: 63554312

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

REFER TO POLICE REPORT T/20200921/2065

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 SGH7872D

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Page 2 of 21

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) 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

1

Namer

NRIC/FIN No.:

Accident Sketch Plan

A) SLL 33; B) SGH 78 CIRCUMSTANCES OF THE ACCIDENT * Refer the attached Police Report No: T/20200921/2065.
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* Refer the attached Police Report No: T/20200921/2065.
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ION The foregoing particulars are true in every respect.
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POLICE REPORT





Police Station Of Origin: Moulmein NPP 101 Jalan Rajah #01-01 SINGAPORE 321101 Tel No: 1800-25089999

1 of 3 Report No. T/20200921/2065

DEDODT	OF A	TRAFFIC	ACCIDENT

	ate/Time Report Made: 1/09/2020 13:55		Vide Report No.:	Station Diary No.: 16	
Informa	nt's Partic	ulars	A TOWNS OF THE	1000年代春天中央中国100天安全	
Name of Informant: Address: LIU YAT HENG APT BLK 9 BC 330009			APT BLK 9 BOON KE	NG ROAD #34-164 SINGAPORE	
	/ ID No.: D / S751488	371	Contact No.: Home/Office: Mobile: 88583323		
National SINGAP	ity: ORE CITIZ	EN	Email:		
Sex: Age: Date of Birth: Male 45 23/05/1975		Type of Informant: Vehicle Owner			
Race: Chinese		Language:	Institution / School Name:		
Occupation: HOTEL MANAGEMENT		ENT	Driving Licence Inform Class; 3	Date of Expiry:	

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 20/09/2020 20:30	Type of Location Straight Road
Location: BEATTY LAN Weather: Clear	E	Road Surface: Dry		Road Speed Limit:
Traffic Flow: Traffic Control: One Way Not Controlled			Traffic Volume:	
Traffic Flow:				Light

Details of V	ehicle Invo	lved			A VERTICAL TO	MATERIAL PROPERTY.
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGH7872D	Car	NISSAN	Sylphy	Black	No Damage	0
SLL3323T	Car	MASERATI		Black	Slightly Damaged	0

Details of V	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLL3323T	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW000901 02000	20/07/2020	19/07/2021

POLICE REPORT



T/20200821/2085

Police Station Of Origin: Moulmein NPP 101 Jalan Rajah #01-01 SINGAPORE 321101 Tel No: 1800-25089999

2 of 3 Report No. T/20200921/2065

CONTINUATION OF REPORT

Details of Perso			E. Peringe	17.00	25 At 2	SOUTH THE STATE OF
Any Pedestrian I						Secure State of the State of th
No. of Pedestrian	trians Injured: NIL		Use of Pedestrian Crossing: NA			sing: NA
Vehicle Owner		DISTRIBUTE			1745	A COLUMN TO THE PARTY OF THE PA
Name	LIU YAT HENG			ID No).	S7514887I
Related Vehicle	SLL3323T (Car)			Conta	act No.	88583323
Hospital/Clinic	NIL			Class Drivin Licens Expiry	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	- Name - I	Date Disc		NIL	
No. of Days grant	ted Medical Leave	NIL	Degree of	THE RESERVE AND ADDRESS OF THE PERSON NAMED IN	_	

Brief Details

On 20/09/2020 @ about 1928hrs, I parked my car, one Black Maserati (SLL3323T), in front of Thekchen Choling Temple. I then came back to my car at about 2100hrs, and discovered the right rear bumper and rim moderately damaged. While I was checking the damages, one male Chinese (Patrick, 90908755) approached me and informed me that he earlier witnessed one grey Nissan Sylphy (SGH7872D), parked directly behind my Maserati, had side swiped my car while attempting to turn out from the lot, and subsequently drove off. He then passed me video footages from his in-car camera, which aligned with his facts.

I reviewed my in-car camera footage and saw one grey vehicle, parked behind my car, come to an abrupt stop beside my car while turning out from their lot as well.

I wish to state that I am unsure of the exact lot number and am unsure if there are any CCTVs around.

POLICE REPORT





Police Station Of Origin: Moulmein NPP 101 Jalan Rajah #01-01 SINGAPORE 321101 Tel No: 1800-25089999

3 of 3 Report No. T/20200921/2065

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report. E / Sgt 2 ADAM MALIK BIN MOHAMED ABUSALI	Signature Of Informant;
Signature Of Interpreter: Not applicable	Date/Time: 21/09/2020 13:55
Officer In Charge Of Case:	Classification Of Case:
Sr Staff Sgt NEO ZHI YUAN Contact No.: 65476079	734 St. 1

























