

## 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	08/10/2020 12:09
Date Of Accident	01/10/2020 10:45
Exact Location Of Accident	ANG MO KIO AVE 4 CAR PARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLS3993Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN KOH SAN
NRIC No	S0209063E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97563993
Alternative Phone No	OTHERS-97563993

### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	GLC250-2.0 4MATIC COUPE (A)
Exact Purpose for which vehicle was being used at time of accident	PTE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
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	DMPCSNW0011557200
Cover Note Number	22/09/20 - 21/09/21

### Driver

Name of Driver	TAN KOH SAN
NRIC No	S0209063E
Date Of Birth	08/05/1952
Occupation	INDOOR
Date Of Driving Pass	16/12/1972
Driving Experience	47 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97563993
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 612 ANG MO KIO AVE 4 #08-1137
Postcode	560612
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	COLLIDED INTO PARKED VEHICLE
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)	1

#### 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 NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 51 ANG MO KIO AVE 9 , <b>POSTCODE:</b> 569784 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-4849999 - <b>FAX NO:</b> 62181399
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT ATTACHED.

#### 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	SMK2655K
Vehicle Make/Model/Colour	PARKED
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)

## Sketch Plan

### SKETCH PLAN

1. VEHICLE NO.: SLS 3993Y  
2. INSURER CO.: China  
3. ACCIDENT  
DATE & TIME: 01/10/20 @ 10:45am

### 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. 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.
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) 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.

Policyholder's Signature  
Date & Time:

08/10/20

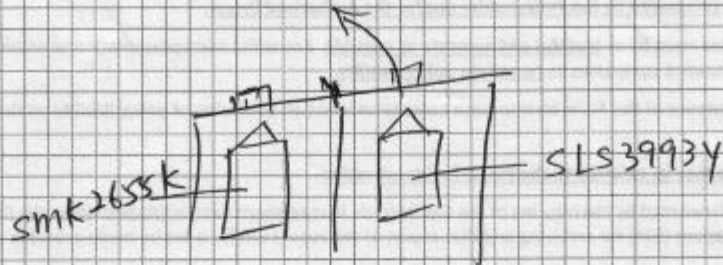
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature  
Name: (Amk)  
NRIC/FIN No.: 080120

# Sketch Plan #2

## SKETCH PLAN

Ang Mo Kio Ave 4 Car Park



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report No: T/20201007/2016

Note : Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information.

## DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature  
Date & Time: 08/10/20

Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature  
Name: (Pmk)  
NRIC/FIN No.:  
Reporting Only

GIARMC SketchPlanForm\_V3 ( ) Claim Own Policy ( ) Claim Third Party ( ) Claim OD/TP at other workshop ( ) Reporting Only



**SINGAPORE  
POLICE FORCE**



T/20201007/2016

1 of 3

Police Station Of Origin:  
Ang Mo Kio North N.P.C  
51 Ang Mo Kio Avenue 9 SINGAPORE  
569784  
Tel No: 1800-4849999

Report No. T/20201007/2016

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 07/10/2020 10:59	Vide Report No.:	Station Diary No.: 19
--	------------------	--------------------------

**Informant's Particulars**

Name of Informant: TAN KOH SAN			Address: APT BLK 612 ANG MO KIO AVENUE 4 #08-1137 SINGAPORE 560612	
ID Type / ID No.: NRIC NO / S0209063E			Contact No.: Home/Office: Mobile: 97563993	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 68	Date of Birth: 08/05/1952	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: RETIRED			Driving Licence Information: Class: Date of Expiry:	

**General Information of the Accident**

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 01/10/2020 10:45	Type of Location: Car Park
Location:  ANG MO KIO AVENUE 4				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
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
SLS3993Y	Car	MERCEDES BENZ	GLC250 4MATIC COUPE AUTO	Silver	No Damage	0
SMK2655K	Car				Slightly Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
-------------	-------------------	--------------	-----------	-------------





**SINGAPORE  
POLICE FORCE**



T/20201007/2016

Police Station Of Origin:  
Ang Mo Kio North N.P.C  
51 Ang Mo Kio Avenue 9 SINGAPORE  
569784  
Tel No: 1800-4849999

2 of 3

Report No. T/20201007/2016

**CONTINUATION OF REPORT**

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLS3993Y	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW001155 72000	22/09/2020	21/09/2021

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAN KOH SAN	ID No.	S0209063E
Related Vehicle	SLS3993Y (Car)	Contact No.	97563993
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

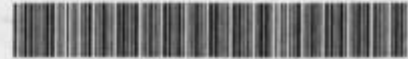
**Brief Details.**

On 01/10/2020 at about 1000hrs, I parked my vehicle bearing SLS3993Y at the carpark near Block 159 Ang Mo Kio Avenue 4. Everything was intact and normal. On the same day at about 1045hrs, I wanted to drive out of the carpark and proceed to move my vehicle out. There was a vehicle bearing SMK2655K parked on the left side of my vehicle. As I was coming out of the lot, I turned left and might have brushed onto his vehicle. I was not sure as it was raining heavily that day and came down to make a check. I did not observed any damages to my car or did not observe any damage to the other vehicle. I took a photo of the said vehicle as I was not sure how to contact the owner. I continued with my journey soon after.

On 06/10/2020 I received a letter from Traffic Police ref TP/IP/42991/2020 and was informed to lodge this Police report.



**SINGAPORE  
POLICE FORCE**



T/20201007/2016

Police Station Of Origin:  
Ang Mo Kio North N.P.C  
51 Ang Mo Kio Avenue 9 SINGAPORE  
569784  
Tel No: 1800-4849999

3 of 3

Report No. T/20201007/2016

**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:  
F /  
Sgt 1 JORDAN TOH JIAJUN

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
07/10/2020 10:59

Officer In Charge Of Case:  
TP / GIA /  
Staff Sgt WONG SIEU LUI  
Contact No.: 65476151

Classification Of Case:

Authentication Stamp  
NP168



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S0209063E



Name

TAN KOH SAN

陳高山

Race

CHINESE

Date of birth

08-05-1952

Country/Place of birth

SINGAPORE

Sex

M

S0209063E

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S0209063E

Name

TAN KOH SAN

Birth Date: 08 May 1952

Issue Date: 28 Apr 2003



000424001F

6221688



NRIC No S0209063E



Date of issue

21-06-2019

Address

APT BLK 612 ANG MO KIO AVENUE 4

#08-1137

SINGAPORE 560612

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE

Class 3

Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

16 Dec 1977



Licence No: S0209063E

NP 426A

Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



SCENE



SCENE

