

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	26/10/2020 15:30
Date Of Accident	26/10/2020 11:10
Exact Location Of Accident	NEAR BLK 111 LOR 1 TOA PAYOH OPEN SPACE CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJR2838Z
Insured/Policyholder	
Name Of Registered Owner	+PLUSMOTO RENTAL
Co Reg No	5XXXX358E
Email Address	ANDY_LEE_4HEALTH@YAHOO.COM
Mobile Phone No	(LOCAL) +65-83225356
Alternative Phone No	OFFICE-83225356

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	CAR WAS 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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5114212444
Cover Note Number	

Driver

Name of Driver	LEE CHEE SENG ANDY
NRIC No	SXXXX999E
Date Of Birth	23/08/1967
Occupation	OUTDOOR
Date Of Driving Pass	11/05/1999
Driving Experience	21 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83225356
Fax Number	
Contact Number	OTHERS-83225356
Email Address	ANDY_LEE_4HEALTH@YAHOO.COM

Address	BLK 115 LORONG 1 TOA PAYOH #01-410
Postcode	310115
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	NO
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	TOA PAYOH CENTRAL
Police Station Address	ROAD: 93 TOA PAYOH CENTRAL , POSTCODE: 319194 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20201026/2053

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 Witness 1

Name	KELVIN
Phone Number	94565673
Email Address	

Details of Witness 2

Name	DAVID
Phone Number	82898175
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YK18T
Vehicle Make/Model/Colour	LORRY

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

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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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:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 1450

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN

UNKNOWN CAR WAS PARKED

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT 7/20201026/2052

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: Debi Nath
NRIC/FIN No.: 990101000000

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20201026/2053

1 of 3

Police Station Of Origin:
Toa Payoh N.P.C
93 Toa Payoh Central #01-02 Toa Payoh
Community Building SINGAPORE 319194
Tel No: 1800-2519999

Report No. T/20201026/2053

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/10/2020 12:54		Vide Report No.:		Station Diary No.: 47	
Informant's Particulars					
Name of Informant: LEE CHEE SENG ANDY			Address: APT BLK 115 LORONG 1 TOA PAYOH #01-410 SINGAPORE 310115		
ID Type / ID No.: NRIC NO / S1798999E			Contact No.: Home/Office: Mobile: 83225356		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 53	Date of Birth: 23/08/1967	Type of Informant: Vehicle Owner		
Race: Chinese			Language: English		Institution / School Name:
Occupation: GRAB DRIVER			Driving Licence Information: Class: 2B,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 26/10/2020 11:10	Type of Location: Car Park
Location: LORONG 1 TOA PAYOH				
Weather: Clear		Road Surface: Wet	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
SJR2838Z	Car					0
YK18X	Lorry					0

POLICE REPORT



**SINGAPORE
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T/20201026/2053

2 of 3

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Toa Payoh N.P.C

93 Toa Payoh Central #01-02 Toa Payoh

Community Building SINGAPORE 319194

Tel No: 1800-2519999

Report No. T/20201026/2053

CONTINUATION OF REPORT

Brief Details.

On 26/10/2020, at about 1130hrs, I went to retrieve my vehicle (SJR2838Z) at the open space carpark near to Blk 111 Lorong 1 Toa Payoh and discovered there was one dent mark on the front left bumper area. I also discovered there were 2 pieces of white paper left over my windscreen area, written by two different person. I then take the papers to read and the writing stated that there was one lorry with the registration plate number YK18X, have reversed and hit my vehicle. The said lorry driver did not leave anything and drove off to unknown location. The last time I parked my vehicle at the open space carpark was around 1100hrs, where I went off to do my errands after I secured my vehicle.

I wish to state that I did called up both witness namely Kelvin, HP: 94565673 and David, HP: 82898178, who both informed that they did saw the said lorry hit my vehicle and drove off. David also snap one photo of the said lorry and sent it to my phone where he witnessed the said lorry. There is no in-built camera inside my vehicle.

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20201026/2053

Police Station Of Origin:

Toa Payoh N.P.C

93 Toa Payoh Central #01-02 Toa Payoh

Community Building SINGAPORE 319194

Tel No: 1800-2519999

3 of 3

Report No. T/20201026/2053

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 /

Staff Sgt LIM RONG HOE

Signature Of Informant:

Date/Time:

26/10/2020 12:54

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / HRT /

SI NOR AFFENDY BIN JAFFAR

Contact No.: 65476368

Classification Of Case:

Authentication Stamp

NP168

RENTAL AGREEMENT

+Plusmoto Rental

317 Outram Road B1-37 Concorde Shopping Centre
Singapore 169075
TEL : +65 6733 1970
Co. Regn. No.: 53389358E

RENTAL AGREEMENT

NO. 1054

HIRER PARTICULAR		
NAME <i>Lee Chee Seng Andy</i>	NRIC/ROC <i>S1798999E</i>	
ADDRESS <i>Blk 115 Lor 1 Toa Payoh #01-140 S(310115)</i>		
CONTACT (HP) <i>83225356</i>	(OFFICE)	FAX

DRIVER'S PARTICULAR		
NAME	NRIC/PERMIT	
ADDRESS		
DRIVING EXPERIENCE	LICENSE NO.	DOB

VEHICLE & CHARGES			
VEHICLE NO <i>SJR2B382</i>	MAKE & MODEL	<i>Toyota Corolla Altis</i>	
RENTAL PERIOD <i>3month</i>	CHARGES <i>\$300/-</i>	DEPOSIT <i>\$500/-</i>	
DATE OUT <i>9 May 2020</i>	TIME <i>12pm</i>	MILAGE	FUEL LEVEL

* INTEREST OF LATE PAYMENT 1.5% PER MONTH

IMPORTANT NOTES: Restricted to Singapore use only.

No refund will be given for fuel left in vehicle.

Hirer is liable to pay first insurance Excess S\$ *\$2000 (Sect 1)* *\$2000 (Sect 2)* In any accident plus lost of earnings while damaged vehicle is under repair. Hirer is liable for all Parking Fines and Traffic Violations.

Driver must be above 23 years with minimum 2 years driving experience.

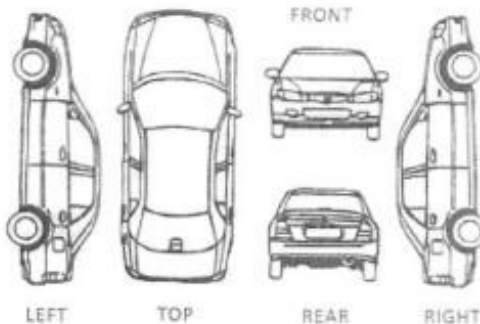
Vehicle return during office hour only. No services on Public Holiday and Sunday.

- ☒ I/WE DECLARE THAT THE ABOVE PARTICULARS ARE TRUE AND CORRECT IN EVERY RESPECT AND
☒ I/WE HAVE READ AND UNDERSTOOD THE TERMS AND CONDITIONS OF THIS RENTAL AGREEMENT AND AGREE TO

COMPANY'S STAMP / HIRER'S SIGNATURE & DATE



INDICATE:
D-DENTS
S-SCRATCHES
A-ACCIDENT



DATE IN	TIME	MILAGE	FUEL LEVEL
CHECKED BY	DEPOSIT REFUND		
REMARKS			

SIGNATURE OF HIRER / DRIVER

Accident Photo



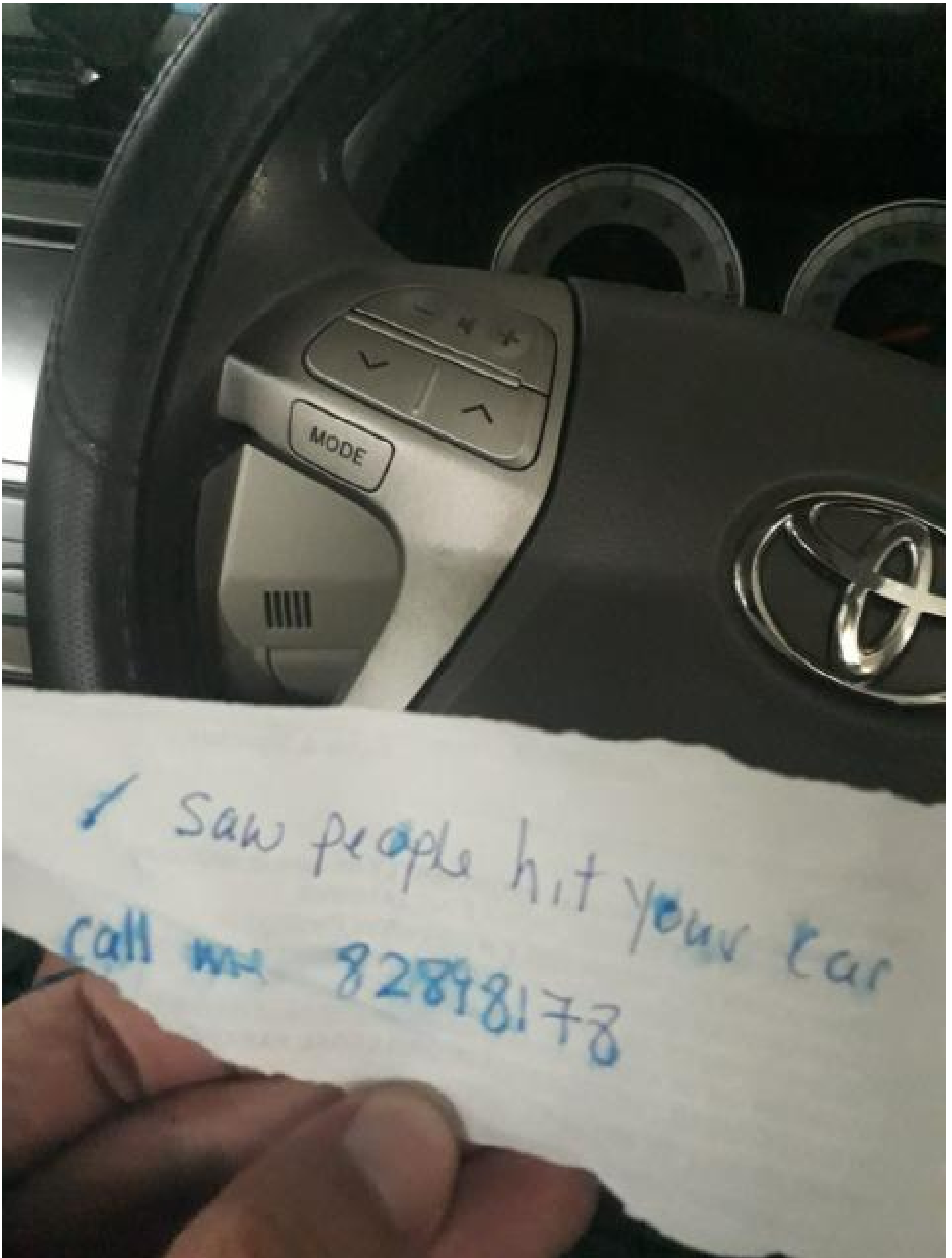
Accident Photo



fli a lorry YK 18X
reverse and hit your car
I can be witness,
HP 94565673.

Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



