

# 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 Submission .....	22/12/2020 08:14 (SGT)
Date of Accident .....	19/12/2020 23:20 (SGT)
Exact Location of Accident .....	Woodlands Drive 16, Singapore
Additional Location Information .....	HDB MSCP 574 DECK 3B
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SJM2975L
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### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	LIEW YAU SEONG
NRIC No .....	SXXXX157H
Email Address .....	WANHUI.LIEW@GMAIL.COM
Mobile Phone No .....	(Phone) +65-98572623
Alternative Phone No .....	(Home) +65-98572623

### VEHICLE PARTICULARS

Manufacturer .....	Kia
Model .....	Cerato
Variant .....	-
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 - Claiming third party
Vehicle Category .....	Private car

### INSURANCE COMPANY

Name of Insurance Company .....	NTUC
Type of Coverage .....	ThirdParty
Fleet Policy .....	No
Policy Number .....	5113386150
Cover Note Number .....	-

### DRIVER

Name of Driver .....	LIEW WAN HUI
NRIC No .....	SXXXX595A
Date Of Birth .....	24/09/1989
Occupation .....	Indoor

Date Of Driving Pass .....	14/09/2011
Driving experience .....	9 YEARS AND 3 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-90223087
Alt. Phone Number .....	-
Email Address .....	WANHUI.LIEW@GMAIL.COM
Address .....	BLK 309B #16-69 ANCHORVALE ROAD
Address complement .....	-
Postcode .....	542309
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Child
Does Driver Own Other Vehicles? .....	No
Vehicle Registration Number of Other Vehicle Owned by Driver .....	-
Insurance Company of Other Vehicle Owned by Driver .....	-

#### 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 the accident? .....	No
Number of vehicles involved in the accident .....	2
Was anybody injured in the Accident? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
Was any other material or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	0
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Thomson Neighbourhood Police Post
Police Station Phone No .....	(Phone) +65-18004529999
Alt. Police Station Phone No .....	(Fax) +65-65535740
Police Station Address .....	Blk 25 Sin Ming Road #01-180 Singapore 570025
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT AND ATTACHED; REMARKS:TYPE OF ACCIDENT PLEASE REFER TO ATTACHED AND ATTACHED STATEMENT.

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes
Was there any audio recorded? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	GBB6468K
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
Name of Driver .....	-

Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	REFER TO POLICE REPORT AND ATTACHED
Details of property damaged in accident .....	REFER TO POLICE REPORT AND ATTACHED
No. Of Passenger (Including Driver) .....	-

## WITNESS DETAILS

### WITNESS 1

Name .....	UNKNOWN
Phone .....	(Phone) +65-97247619
Email .....	-

**SKETCH PLAN****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**.
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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.

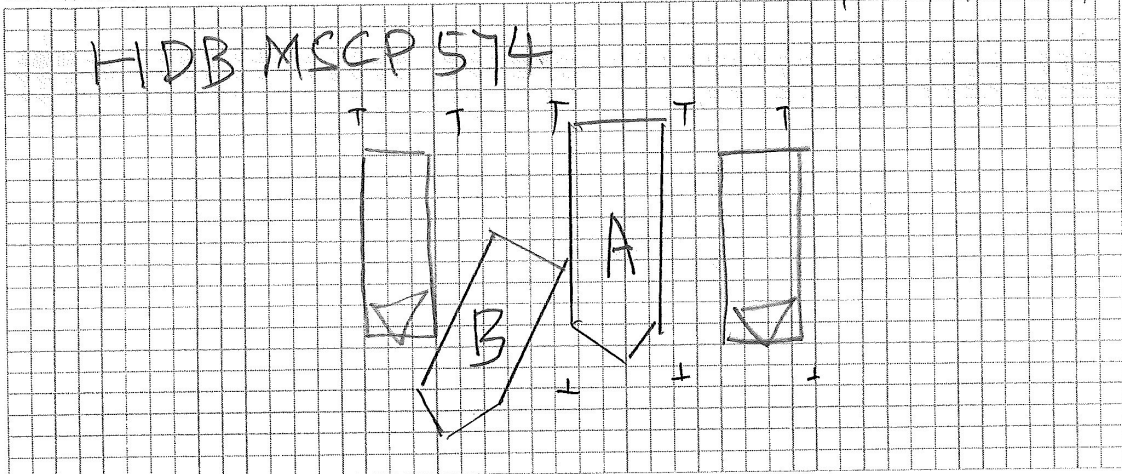
Policyholder's Signature  
Date & Time:

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

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

A = 5Jm 2975L  
B = GBB6468K

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


On 19-12-2020 at 11.20pm  
My car was stationary at  
HDB Carpark MSCP 574, a  
lorry GBB6468K reversed  
and collided onto the right  
side of my car


The accident caused  
severe damages to my  
vehicle


Reported to police station @ adminally during noon time after  
the accident (hit & run) happened. The officer on duty told me  
to resolve the incident by myself as there are no damage to the  
government property and no injuries to any person, and I sustained  
no injury. Thus no police report is submitted as they told  
me it is not required.

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:  
NRIC/FIN No.:































**SINGAPORE  
POLICE FORCE**



T/20201221/2075

1 of 3

Police Station Of Origin:  
Thomson NPP  
25 Sin Ming Road #01-180 SINGAPORE  
570025  
Tel No: 1800-4529999

Report No. T/20201221/2075

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 21/12/2020 15:58	Vide Report No.:	Station Diary No.: 43
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**Informant's Particulars**

Name of Informant: LIEW WAN HUI			Address: 19A WOODLANDS AVENUE 6 #05-30 SINGAPORE 739000		
ID Type / ID No.: NRIC NO / S8932595A			Contact No.: Home/Office: Mobile: 90223087		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 31	Date of Birth: 24/09/1989	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: SOFTWARE ENGINEER			Driving Licence Information: Class: 3 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 19/12/2020 23:20	Type of Location: Car Park
Location:  WOODLANDS DRIVE 16				
Weather: Clear		Road Surface: Dry		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
GBB6468K	Lorry				No Damage	0
SJM2975L	Car				Slightly Damaged	0

**Details of Person Involved**

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





**SINGAPORE  
POLICE FORCE**



T/20201221/2075

Police Station Of Origin:  
Thomson NPP  
25 Sin Ming Road #01-180 SINGAPORE  
570025  
Tel No: 1800-4529999

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Report No. T/20201221/2075

**CONTINUATION OF REPORT**

Driver			
Name	LIEW WAN HUI	ID No.	S8932595A
Related Vehicle	SJM2975L (Car)	Contact No.	90223087
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 19/12/2020 at around 2200hrs, I parked my vehicle bearing registration number SJM2975L at Blk 574 Woodlands MSCP at deck 3B lot 156. Everything was intact at the moment I parked my vehicle.

Later at around 2320hrs, a lorry bearing registration number GBB6468K was trying to park and started reversing into the lot beside my vehicle. However, the lorry driver knocked onto the right of my vehicle leaving a scratch and dent on the door of the driver seat. After which, the driver parked his vehicle and left the scene without leaving a note.

I wish to state that my dash cam recorded the hit and run, and the lorry driver seemed to be drunk. I also wish to state that there are witnesses who witnessed the hit and run and provided me with their dashcam footages.

I am lodging this police report for police investigations and insurance claims purposes.





**SINGAPORE  
POLICE FORCE**



T/20201221/2075

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Report No. T/20201221/2075

Police Station Of Origin:  
Thomson NPP  
25 Sin Ming Road #01-180 SINGAPORE  
570025  
Tel No: 1800-4529999

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 ONG WEI SHENG BRIAN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / HRT /

SI KALESWARI PALANI

Contact No.: 65476902

Signature Of Informant:

Date/Time:

21/12/2020 15:58

Classification Of Case:

SP 070

Authentication Stamp

NP168