

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 04/01/2021 21:05 (SGT)
Date of Accident 01/01/2021 02:05 (SGT)
Exact Location of Accident 115 Ho Ching Rd, Singapore
Additional Location Information MSCP
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SGG8688T

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner LIM TZE HSIEN
NRIC No SXXXX748J
Email Address limtzehsien.89@gmail.com
Mobile Phone No (Phone) +65-97557657
Alternative Phone No +65-97557657

VEHICLE PARTICULARS

Manufacturer Mitsubishi
Model Lancer
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 China Taiping Insurance
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMPCSNA00108282001
Cover Note Number -

DRIVER

Name of Driver LIM TZE HSIEN
NRIC No SXXXX748J
Date Of Birth 03/01/1989
Occupation Indoor

Date Of Driving Pass	27/12/2013
Driving experience	7 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-97557657
Alt. Phone Number	+65-97557657
Email Address	limtzehsien.89@gmail.com
Address	BLK 111 HO CHING ROAD #08-22
Address complement	-
Postcode	610111
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Jurong Division Headquarters
Police Station Phone No	(Phone) +65-18007910000
Alt. Police Station Phone No	(Fax) +65-68965647
Police Station Address	No. 2 Jurong West Avenue 5 Singapore 649482
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT J/20200102/7028

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	SMF2811C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-

Address -
Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

SKETCH PLAN

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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 Person's Signature
Name:
NRIC/IN No.:

SHAWSON PERSOON (S) PTE LTD





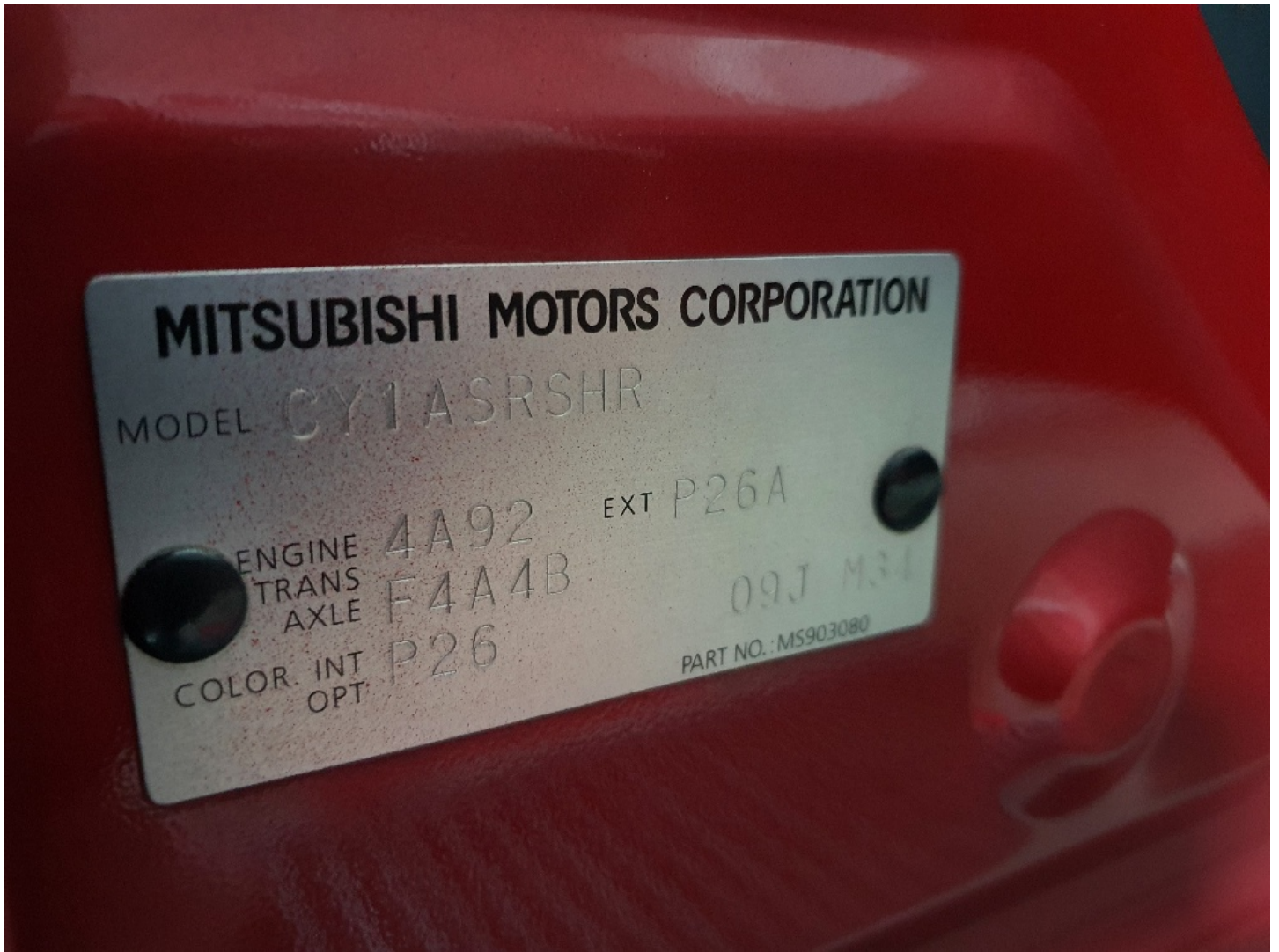












SINGAPORE
POLICE FORCE

J/20210102/7028

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POLICE REPORT (NP299)

Report No. J/20210102/7028

Police Station Of Origin
Jurong Division HQ
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No:1800-7910000

Date/Time Report Made 02/01/2021 23:40	Vide Report No.	Station Diary No.
Name Of Informant LIM TZE HSIEN	Address 111 HO CHING ROAD #08-22 SINGAPORE 610111	
ID Type / ID No. NRIC NO / S8972748J	Contact No.	Mobile: 97557657
Nationality SINGAPORE CITIZEN	Email Address limtzehsien.89@gmail.com	
Occupation Project manager	Sex Male	Age 31
Institution/School Name	Date of Birth 03/01/1989	Race Chinese
Date/Time Of Incident 01/01/2021 02:05 - 01/01/2021 02:30	Location Of Incident 111 HO CHING ROAD #08-22 SINGAPORE 610111	

Brief details.

On 1/1/2020 and the time provided at this MSCP - Blk 115A Ho Ching Road
An Audi white car (SMF2811C) has collided my stationary parked car while trying to maneuver to park his car in. I'm solely making this report for a Hit and Run purpose for my insurance claim against him.
My car plate is SGG8688T.
Do contact me for video footage if required as I can't attach the video to your online platform.

Subjects Involved	
Victim	
Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 02/01/2021 23:40
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	

**SINGAPORE
POLICE FORCE**

J/20210102/7028

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20210102/7028

Person Name	LIM TZE HSIEN		
ID Type	NRIC NO	ID No	S8972748J
Gender	Male	Age	31
Race	Chinese	Language	English
Occupation	Project manager	Address	111 HO CHING ROAD #08-22
Mobile No	97557657	Is Informant A	Yes
		Victim?	
Person Name	LIM TZE HSIEN (Informant)		

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:	Date/Time:
Not applicable	02/01/2021 23:40
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	