

# 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 ..... 26/02/2021 16:40 (SGT)  
Date of Accident ..... 21/02/2021 18:00 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... BLK 311 UBI AVENUE 1 CARPARK  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SMX4062P

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... Trans Leasing Pte Ltd  
Company Reg No ..... 2XXXXX575K  
Email Address ..... claims@transcab.com.sg  
Mobile Phone No ..... (Phone) +65-62876666  
Alternative Phone No ..... (Office) +65-62876666

### VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... Prius  
Variant ..... -  
Exact purpose for which vehicle was being used at time of accident ..... Private hire  
Are you claiming under your own insurance policy for repair to your vehicle? ..... No - Claiming third party  
Vehicle Category ..... Commercial vehicle

### INSURANCE COMPANY

Name of Insurance Company ..... Etiqa  
Type of Coverage ..... ThirdParty  
Fleet Policy ..... No  
Policy Number ..... M0015914  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... SEAH LEE CHEONG  
NRIC No ..... SXXXX814H  
Date Of Birth ..... 25/09/1956  
Occupation ..... Outdoor

Date Of Driving Pass .....	14/04/1978
Driving experience .....	42 YEARS AND 10 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-93886065
Alt. Phone Number .....	-
Email Address .....	seah_lee_cheong@yahoo.com.sg
Address .....	BLK 311 UBI AVENUE 1
Address complement .....	#09-377
Postcode .....	400311
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Hirer
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 .....	Fire, explosion or lightning
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 .....	Ang Mo Kio North Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18004849999
Alt. Police Station Phone No .....	(Fax) +65-62181399
Police Station Address .....	51 Ang Mo Kio Avenue 9 Singapore 569784
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT F/20210122/2012

#### 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 .....	GBD8221G
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Goods vehicle
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

NIL.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report. F/2021 0122/2012.

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.:

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:

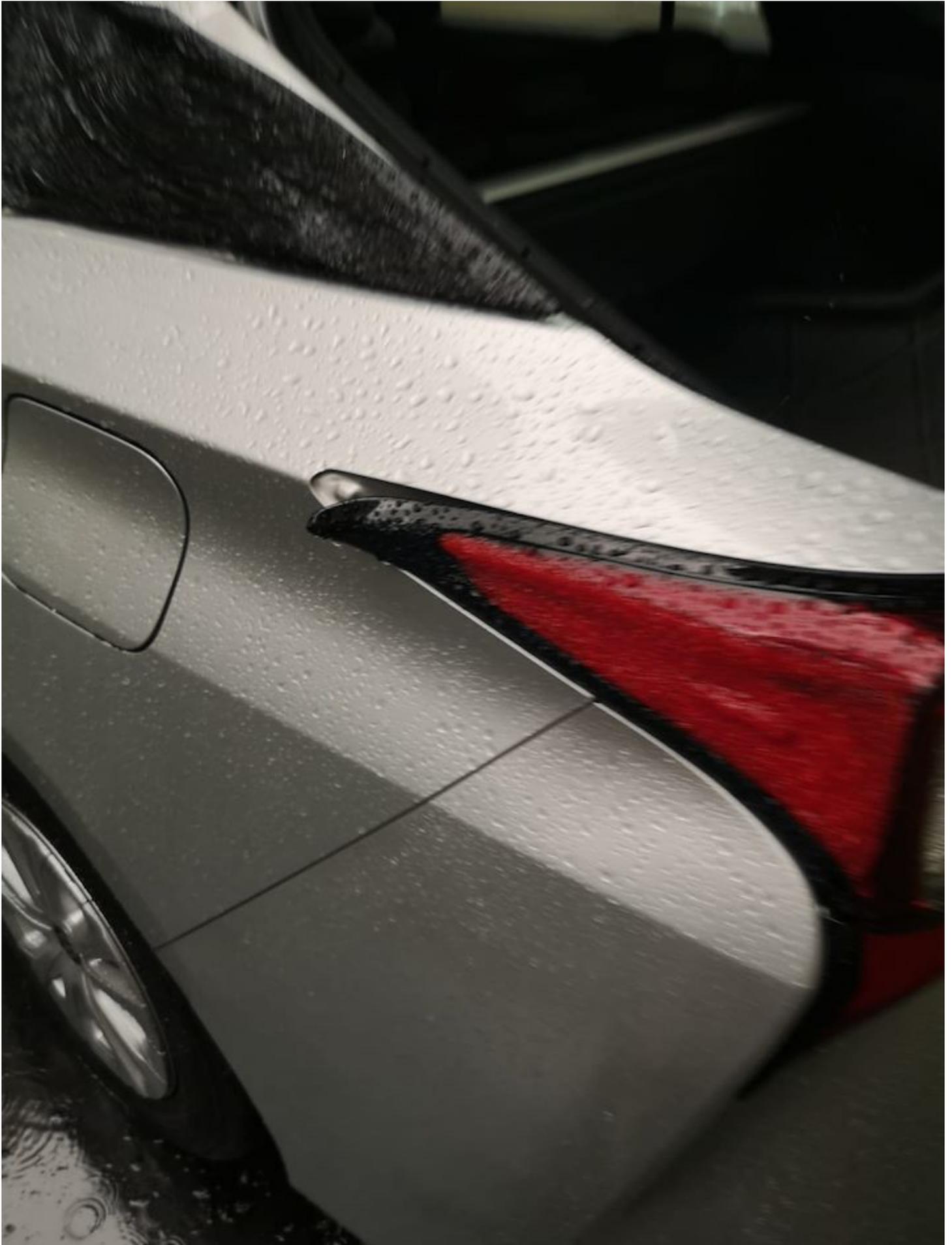
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.

<p>_____                  Policyholder's Signature                  Date &amp; Time:</p>	 _____ Driver's Signature (If driver is not the policyholder) Date & Time:	 _____ Reporting Centre Personnel's Signature Name: NRIC/FIN No.:
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SINGAPORE  
POLICE FORCE



F/20210122/2012

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20210122/2012

my aforesaid car. There was already a big crowd gathering and both the Police and Civil Defence were at the said fire scene. As a result of the said fire, my car sustained serious damages to its left side. I estimate that the cost of damages to be at least S10,000. Throughout the whole fire incident I do not know who is the owner / driver of the burnt motor-van. I cannot recall if the motor-van was already parked at the lot (250) near to mine or not when I first parked at the said carpark. The motor-van number is 'GBD9221G'. I do not know the colour, make and model of the said motor-van.

SCDF Investigator "Rahman" (HP 90211564) has since contacted me with regards to this fire case. I am lodging this cover report as directed by my leasing Company 'TRANS LEASING PTE LTD' for the purpose of their insurance claiming against the other party. The police in-charge for yesterday's incident is one Staff Sergeant Muhd Asri Bin Ishak from GEYLANG NEIGHBOURHOOD POLICE CENTRE. Tel: 65142744

Signature Of Officer Recording This Report

F / SI MOHAMMED BIN ZAINOL

Signature Of Informant

Signature Of Interpreter  
Not applicable

Date/Time  
22/01/2021 08:59

Officer In-Charge Of Case  
F / Ang Mo Kio Police Divisional Investigation Branch /  
Insp ELANGO GOPALAN  
Contact No: 62181343

Classification Of Case

Authentication Stamp





