

# 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 ..... 25/01/2021 23:51 (SGT)  
Date of Accident ..... 23/01/2021 18:45 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... MAJU AVE  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SKU7103A

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... LEE MOE KIM  
NRIC No ..... SXXXX592I  
Email Address ..... leexinyi2108@gmail.com  
Mobile Phone No ..... (Phone) +65-90601912  
Alternative Phone No ..... +65-90601912

### VEHICLE PARTICULARS

Manufacturer ..... Honda  
Model ..... Hr-v  
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 ..... Sompo  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... D20MTPV01010498  
Cover Note Number ..... 12/08/2020 - 11/08/2021

### DRIVER

Name of Driver ..... LEE XIN YI  
NRIC No ..... SXXXX168Z  
Date Of Birth ..... 21/08/1996  
Occupation ..... Indoor

Date Of Driving Pass .....	29/05/2015
Driving experience .....	5 YEARS AND 8 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-90601912
Alt. Phone Number .....	-
Email Address .....	leexinyi2108@gmail.com
Address .....	67 BLANDFORD DRIVE
Address complement .....	-
Postcode .....	559860
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 .....	DRIZZLING
Road Surface .....	Wet

#### 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) .....	1
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 .....	Traffic Police
Police Station Phone No .....	(Phone) +65-65470000
Alt. Police Station Phone No .....	(Fax) +65-65474900
Police Station Address .....	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO POLICE REPORT

#### 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 .....	SKU9015H
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**

1. VEHICLE NO. SKU7103A  
 2. INSURER CO. OMP  
 3. ACCIDENT DATE & TIME 23/11/21 @ 1845

**IMPORTANT NOTICE**

- Please report accurately the details of the accident to speed up the claims process.
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- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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.
- 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/are disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time \_\_\_\_\_  
 Driver's Signature (if driver is not the policyholder) / Date & Time \_\_\_\_\_  
 Witnessed By Reporting Centre Personnel 4/11/21 23/11/21

**Sketch Plan**

PLEASE TURN OVER

Sketch Plan

A: SKU7103A (Saline)

B: SKU9015H

Describe CIRCUMSTANCES OF THE ACCIDENT

Vehicle No: SKU7103A (Saline)

Date & Time: 23/01/2021 @ 14:45 (Dazzling Light)

Refer to police report.

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: [Signature]

Date & Time: 25/01/21

Driver's Signature: [Signature]

(If driver is not the policyholder)

Date & Time: 25/01/21

Reporting Centre Personnel's Signature: [Signature]

Name: [Name]

NRIC/IN No: [NRIC/IN No]

( ) Claim Own Policy ( ) Claim Third Party ( ) Reporting Only

( ) Claim ODTP at other workshop

**SINGAPORE POLICE FORCE**

1 of 3  
Report No. T/20210123/7026

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000



**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 23/01/2021 20:46		Vide Report No.:	Station Diary No.:
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<b>Informant's Particulars</b>			
Name of Informant: LEE XIN YI		Address: 67 BLANDFORD DRIVE SINGAPORE 559860	
ID Type / ID No.: NRIC NO / S9629168Z		Contact No.: Home/Office: Mobile: 90601912	
Nationality: SINGAPORE CITIZEN		Email: LEEXINYI2108@GMAIL.COM	
Sex: Female	Age: 24	Date of Birth: 21/08/1996	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: Sales and related associate professional nec		Driving Licence Information: Class:	Date of Expiry:

<b>General Information of the Accident</b>			
Type of Accident: Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 23/01/2021 18:45	Type of Location: Car Park
Location: MAJU AVENUE			
Weather: Drizzling	Road Surface: Wet	Road Speed Limit: 15 Km/h	
Traffic Flow: One Way	Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Moving Vehicle Against - Parked Vehicle		Anyone conveyed by ambulance: No	

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of
SKU7103A	Car	HONDA	HRV	Maroon	Slightly Damaged	0
SKU9015H	Car	SUBARU		Blue		1

 <b>SINGAPORE POLICE FORCE</b>		 T20210123/7026																			
Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000		2 of 3 Report No. T20210123/7026																			
CONTINUATION OF REPORT																					
<b>Details of Person Involved</b>																					
Any Pedestrian Involved: No																					
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA																			
<b>Driver</b>																					
Name	LEE XIN YI	ID No.	S9629168Z																		
Related Vehicle	SKU7103A (Car)	Contact No.	90601912																		
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL																		
Date	NIL	Date	NIL																		
No. of Days granted Medical Leave	NIL	Degree of	NIL																		
<b>Brief Details.</b> I was parked along Maju Avenue Car Park (M0038) and was inside the stationary vehicle as the driver. It was drizzling and I saw vehicle SKU9015H trying to parallel park behind the lot that was adjacent to me. As vehicle SKU9015H was reversing, I heard a screeching sound on the driver side. Once vehicle SKU9015H was parked, I went down to check if there was any damage and saw that the right side of my vehicle was badly scratched. When approaching the driver of vehicle SKU9015H, they were extremely defensive and claimed that they did not hit my vehicle. They walked away without taking responsibility for the accident. There was no witness and there was no injury. I do have a video footage that exceeds 2MB in size that showed vehicle SKU9015H reversing into the lot and images of the vehicles and damages.  Note: I am unable to attach any photos (despite being less than 2MB and in the correct format) onto the portal. I have tried with different browsers but there is no way around it. Please reach out to me for the video footage and images. Thanks.																					
<table border="1"> <thead> <tr> <th>Vehicle No.</th> <th>Make</th> <th>Model</th> <th>Year</th> <th>Color</th> <th>Damage</th> </tr> </thead> <tbody> <tr> <td>SKU7103A</td> <td>Toyota</td> <td>Yaris</td> <td>2018</td> <td>White</td> <td>Scratched</td> </tr> <tr> <td>SKU9015H</td> <td>Toyota</td> <td>Yaris</td> <td>2018</td> <td>White</td> <td>Scratched</td> </tr> </tbody> </table>				Vehicle No.	Make	Model	Year	Color	Damage	SKU7103A	Toyota	Yaris	2018	White	Scratched	SKU9015H	Toyota	Yaris	2018	White	Scratched
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**SINGAPORE  
POLICE FORCE**



T/20210123/7026

3 of 3

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Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20210123/7026

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPIB /  
TAN JEOK LENG  
Contact No.: 65476144

Authentication Stamp  
NP168

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by SingPass. No signature is  
required.

Date/Time:  
23/01/2021 20:46

Classification Of Case: