

# 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 ..... 01/02/2021 10:05 (SGT)  
Date of Accident ..... 28/01/2021 09:45 (SGT)  
Exact Location of Accident ..... Holland Cl, Singapore  
Additional Location Information ..... NEAR BLK 6 OSCP  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... PC3112K

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... RITZ SCHOOL OF LEARNERS AND STUDENT CARE CENTRE LLP  
Company Reg No ..... TXXXXX536A  
Email Address ..... anthony@ritz.edu.sg  
Mobile Phone No ..... (Phone) +65-96534084  
Alternative Phone No ..... +65-96534084

### VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... Hiace  
Variant ..... -  
Exact purpose for which vehicle was being used at time of accident ..... Employment  
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 ..... NTUC  
Type of Coverage ..... ThirdPartyFireTheft  
Fleet Policy ..... No  
Policy Number ..... 5068753298-06  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... ZHANG YAJUAN  
Passport No/FIN ..... GXXXX201K  
Date Of Birth ..... 27/10/1972

Occupation .....	Outdoor
Date Of Driving Pass .....	19/11/2019
Driving experience .....	1 YEAR AND 2 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-84559132
Alt. Phone Number .....	-
Email Address .....	pauline@ritz.edu.sg
Address .....	713 JURONG WEST STREET 71
Address complement .....	#B1-37
Postcode .....	640713
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Employee
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 .....	3
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 .....	Alexandra Neighbourhood Police Post
Police Station Phone No .....	(Phone) +65-18004739999
Alt. Police Station Phone No .....	(Fax) +65-64713569
Police Station Address .....	Blk 46-2 Commonwealth Drive #01-382A Singapore 140462
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT:T/20210128/2112

#### 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 .....	YN4555U
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 .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

## DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number .....	SKK477U
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****IMPORTANT NOTICE**

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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.
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.

Ritz School Of Learners & Student Care Centre LLP

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

**Sketch Plan**

Veh A: PC3112K  
Veh B: YN4555U  
Veh C: SKK477U

**Describe Circumstances of the Accident**

Refer to police report

Report No: T/20210128/2112

## Declaration

We declare the foregoing particulars are true in every respect.

Ritz School Of Learners &amp; Student Care Centre LLP

School Of Learners & Student Care Centre LLP

Policyholder's Signature / Date &  
Time

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

Witnessed by Reporting Centre  
Personnel





**SINGAPORE  
POLICE FORCE**



T/20210128/2112

2 of 3

Report No. T/20210128/2112

Police Station Of Origin:  
Alexandra NPP  
46 Tanglin Halt Road #01-328 SINGAPORE  
140462  
Tel No: 1800-4739999

**CONTINUATION OF REPORT**

**Brief Details.**

On 28/01/2021 at about 9.45am, my staff had told me that our company vehicle which was park at the open space carpark near Blk 6 Holland Close last night was hit by an unknown vehicle. the impact had caused our vehicle's rear to hit onto a black Mercedes Benz's rear(SKK477U) next to us. The damage to my vehicle is a badly dent right rear door and left rear. One witness(Town council cleaner) told us that it is a lorry that was reversing hit onto our vehicle. He also told us that the driver had stay for 5mins and then drove off. The cleaner then give us the lorry plate number, YM5444U however the plate numbers was wrong.



TRAFFIC POLICE  
AMENDMENT

Traffic Police Department  
Charge Office  
10 Ubi Avenue 3  
Singapore 408865

NP 168 No : T/20210128/2112 Name : Anthony Chua Soon Reng  
 Accident Date/Time : 28/01/2021 @ 0945 Address : 638 Woodlands Ring Rd  
 Vehicle(s) involved : PC3112K #05-47 S(730638)  
 \_\_\_\_\_ NRIC No : 59329423H  
 \_\_\_\_\_ Tel No : 96534084  
 \_\_\_\_\_ Date : 29/01/2021

Dear Sir / Madam

I wish to amend as follows :

1) I have found out the correct vehicle number of the vehicle which hit - and - run my company's vehicle. The vehicle number is ~~YM 4555E~~ YM 4555U ~~YN 4555U~~.

That's all.

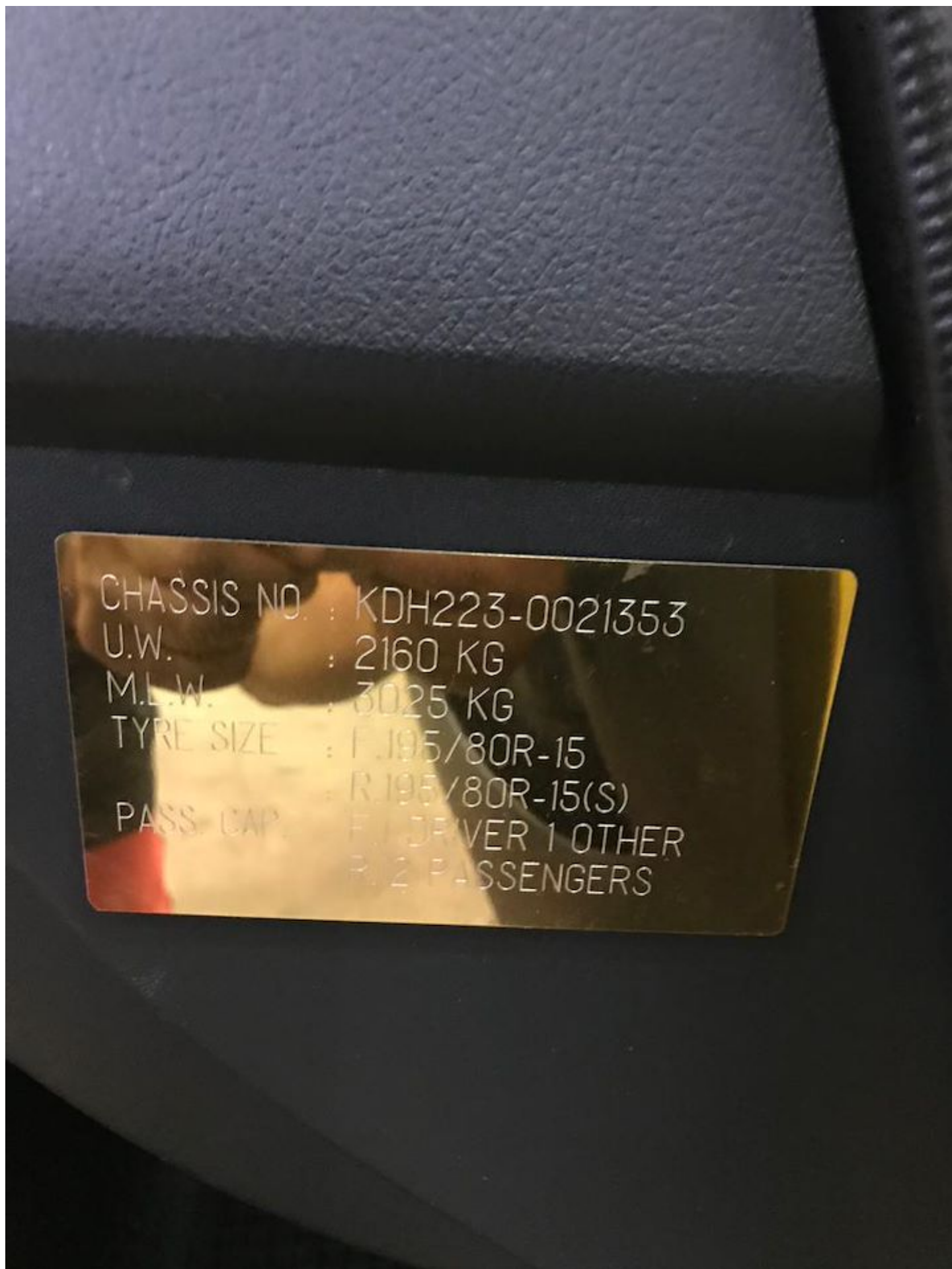
Anthony Chua  
59329423H  
 Yours faithfully

SSS Tan Wei Jian  
 Alexandra  
 Neighbourhood Police Post  
 Blk 45-2 Commonwealth Drive  
 #01-382A  
 Singapore 140462









CHASSIS NO. : KDH223-0021353  
U.W. : 2160 KG  
M.L.W. : 3025 KG  
TYRE SIZE : F J195/80R-15  
                  : R J195/80R-15(S)  
PASS. CAP. : F1 DRIVER 1 OTHER  
                  : R12 PASSENGERS





























**SINGAPORE  
POLICE FORCE**



T/20210128/2112

1 of 3

Police Station Of Origin:  
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140462  
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Report No. T/20210128/2112

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 28/01/2021 18:46	Vide Report No.:	Station Diary No.: 16
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**Informant's Particulars**

Name of Informant: ANTHONY CHUA BOON RONG			Address: APT BLK 638 WOODLANDS RING ROAD #05-47 SINGAPORE 730638	
ID Type / ID No.: NRIC NO / S9329423H			Contact No.:	Mobile: 96534084
Nationality: SINGAPORE CITIZEN			Home/Office:	
			Email:	
Sex: Male	Age: 27	Date of Birth: 16/08/1993	Type of Informant: Company Staff	
Race: Chinese			Language: English	Institution / School Name:
Occupation: SUPERVISOR			Driving Licence Information: Class:	

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 28/01/2021 09:45	Type of Location: Car Park
Location:  HOLLAND CLOSE				
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
PC3112K	Bus/Coach/Mi nibus	TOYOTA	HIACE COMMUTER GL	Yellow	Seriously Damaged	0





**SINGAPORE  
POLICE FORCE**



T/20210128/2112

2 of 3

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3 of 3

Report No. T/20210128/2112

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:

D /  
Sgt 3 LEE HONG HAI

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
28/01/2021 18:46

Officer In Charge Of Case:  
TP / HRT /  
Sr Staff Sgt NEO ZHI YUAN  
Contact No.: 65476079

Classification Of Case:

Authentication Stamp  
NP168

SN 47



TRAFFIC POLICE  
AMENDMENT

Traffic Police Department  
Charge Office  
10 Ubi Avenue 3  
Singapore 408865

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