

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 03/02/2021 15:54 (SGT)
Date of Accident 23/10/2020 12:00 (SGT)
Exact Location of Accident 131 Geylang East Ave 1, Singapore 380131
Additional Location Information CARPARK
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJA1195R

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner SENSES LIVING
Company Reg No 5XXXXX31C
Email Address SENSESLIVING@GMAIL.COM
Mobile Phone No (Phone) +65-90071488
Alternative Phone No +65-90071488

VEHICLE PARTICULARS

Manufacturer Toyota
Model Axio
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 hire

INSURANCE COMPANY

Name of Insurance Company NTUC
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 5096003301-02
Cover Note Number -

DRIVER

Name of Driver SIM JUN HAO ALAN
NRIC No SXXXX335E
Date Of Birth 21/04/1970
Occupation Outdoor

Date Of Driving Pass	22/04/1995
Driving experience	25 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90071488
Alt. Phone Number	-
Email Address	SENSESLIVING@GMAIL.COM
Address	BLK 37 BEDOK SOUTH AVE 2 #07-445
Address complement	-
Postcode	460037
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Other
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	Geylang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008486999
Alt. Police Station Phone No	(Fax) +65-68486799
Police Station Address	1 Cassia Link Singapore 397618
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT T/20201023/2088

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	GW6951L
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) -

SKETCH PLAN

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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.

  	
Policyholder's Signature / Date & Time	Driver's Signature (If driver is not the policyholder) / Date & Time
Witnessed by Reporting Centre Personnel	

Sketch Plan

BK 131 Geylang East Avenue 1
Open space car park
Lot NO. 208

Veh A: STA1195R
Veh B: GW1951L



Describe Circumstances of the Accident

Refer to police report

Report No: T/20301033 / 2088

Declaration

We declare the foregoing particulars are true in every respect.

[Signature]



Policyholder's Signature / Date & Time

[Signature]

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

[Signature]



Witnessed by Reporting Centre Personnel

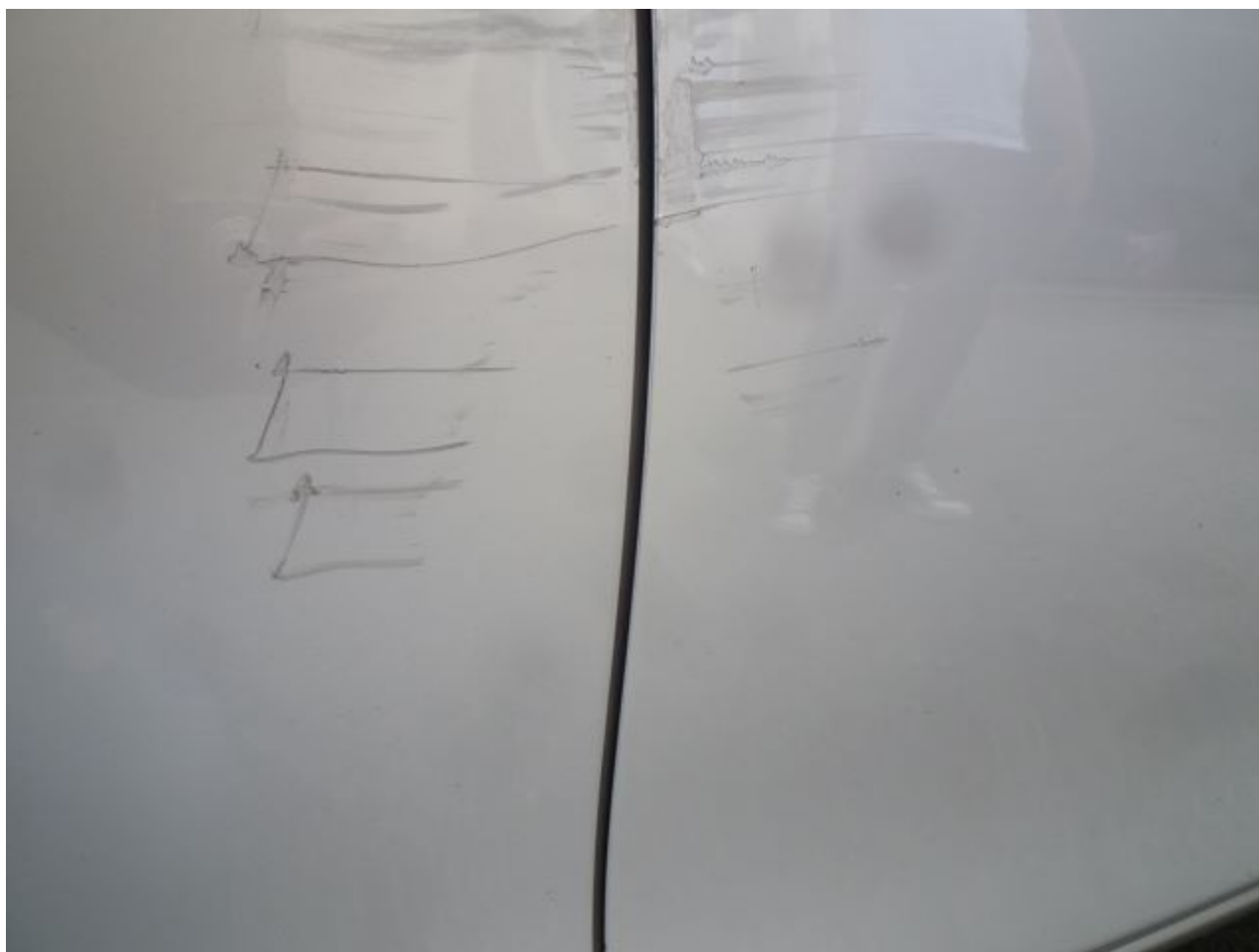




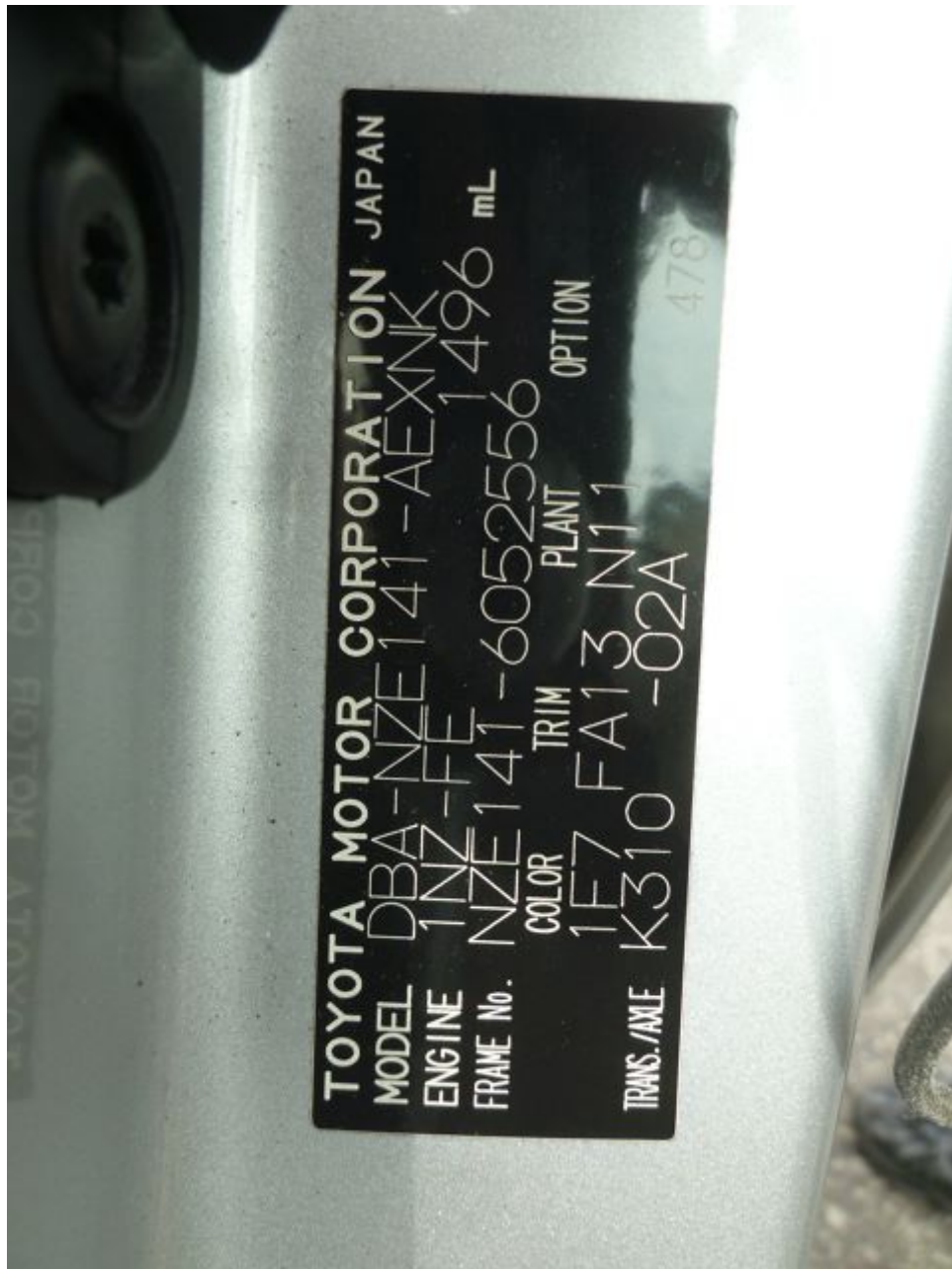













**SINGAPORE
POLICE FORCE**


T/20201023/2088

Police Station Of Origin:
Geylang N.P.C
1 Cassia Link SINGAPORE 397618
Tel No: 1800-8486999

1 of 3

Report No: T/20201023/2088

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/10/2020 17:31	Vide Report No.:	Station Diary No.: 79
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Informant's Particulars

Name of Informant: SIM JUN HAO ALAN		Address: APT BLK 37 BEDOK SOUTH AVENUE 2 #07-445 SINGAPORE 460037	
ID Type / ID No.: NRIC NO / S7012335E		Contact No.: Home/Office: Mobile: 90071488	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 50	Date of Birth: 21/04/1970	Type of Informant: Vehicle Owner
Race: Chinese		Language:	Institution / School Name:
Occupation: PRIVATE HIRE DRIVER		Driving Licence Information: Class: 2B,2A,3 Date of Expiry:	

General Information of the Accident

Type of Accident: Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 23/10/2020 12:00	Type of Location: Car Park
Location: GEYLANG EAST AVENUE 1			
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
SJA1195R		TOYOTA	COROLLA AXIO 1.5X A	Silver	Slightly Damaged	0



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2 of 3

Report No. T/20201023/2088

CONTINUATION OF REPORT

Brief Details.

I am working as a Grab driver. I am driving a company's rented vehicle bearing registration plate number SJA1195R, a silver Toyota.

On 23/10/2020 at about 12pm, I had parked my car at lot number 208 located at Blk 131 Geylang East Avenue 1. I left shortly after to have my lunch

On the same date at about 2.30pm, I returned to my car and discovered that there were scratches on the right side of the car. The scratches were found on the driver side and passenger side of the car. I have in car camera installed in my car and viewed the footage. I witnessed a silver lorry doing a reverse park in parking lot 207. There was a loud thud sound while he was reversing. The lorry then quickly accelerated and drove away. The footage was unable to capture the lorry's registration plate number.



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T/20201023/2088

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1 Cassia Link SINGAPORE 397618
Tel No: 1800-8486999

3 of 3

Report No. T/20201023/2088

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:
G /
Sgt 3 TAN CHUAN SIN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
23/10/2020 17:31

Officer In Charge Of Case:
TP / HRT /
✓ SI TAN JEOK LENG
Contact No.: 65476144

Classification Of Case:

Authentication Stamp
NP168

SIGNATURE

