

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 25/02/2021 10:50 (SGT)
Date of Accident 05/02/2021 19:30 (SGT)
Exact Location of Accident Singapore
Additional Location Information TAMPINES ST 43 MSCP
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GW5374J

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner RYH JENG ENGINEERING TRADING
Company Reg No 39492800L
Email Address ryh_jeng@yahoo.com.sg
Mobile Phone No (Phone) +65-98374628
Alternative Phone No (Office) +65-67822617

VEHICLE PARTICULARS

Manufacturer Toyota
Model Liteace
Variant -
Exact purpose for which vehicle was being used at time of accident -
Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only
Vehicle Category Commercial vehicle

INSURANCE COMPANY

Name of Insurance Company AIG
Type of Coverage ThirdParty
Fleet Policy No
Policy Number 0100339505-17
Cover Note Number -

DRIVER

Name of Driver LIM TIANG CHOON
NRIC No S2553202C
Date Of Birth 25/10/1949
Occupation Outdoor

Date Of Driving Pass	16/02/1981
Driving experience	40 YEARS
Gender	Male
Mobile Number	(Phone) +65-98374628
Alt. Phone Number	-
Email Address	ryh_jeng@yahoo.com.sg
Address	APT BLK 495E TAMPINES ST 43 #08-366
Address complement	-
Postcode	524495
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	Collided into Parked Vehicle
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)	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	Tampines Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18005871999
Alt. Police Station Phone No	(Fax) +65-65871699
Police Station Address	6 Tampines Ave 4 Singapore 529682
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER WITH ATTACH.

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	SLQ5603X
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

fax : 6748 1006

email : boo @ kant's . net

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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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

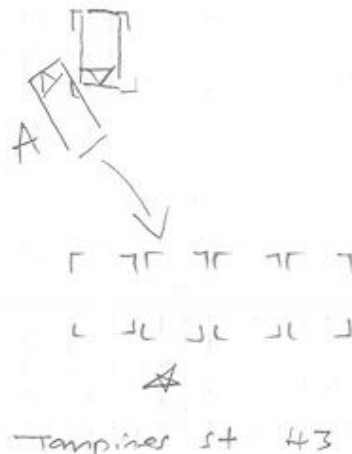


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



A: GW5374J

B: SLQ 5603 X

Describe Circumstances of the Accident


On 5/2/2021 at around 1930hrs, I drove my van GW5374J at my residence place -tempnet st H3 multi storey car park looking for a lot.

As I spotted a lot and do a reversing my van to that lot and suddenly felt a jerk. Then realised had lightly touched the parked car SLQ4603X front right portion. I went down to check the car and no visible damaged to the car.

Declaration

I/We declare the foregoing particulars are true in every respect.

 X
Policyholder's Signature / Date & Time

 24-2-21
4:54
Driver's Signature (if driver is not the policyholder) / Date & Time


Witnessed by Reporting Centre Personnel

















**SINGAPORE
POLICE FORCE**



T/20210224/2091

1 of 3

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

Report No. T/20210224/2091

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/02/2021 18:59	Vide Report No.:	Station Diary No.: 94
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Informant's Particulars

Name of Informant: LIM TIANG CHOON			Address: APT BLK 495E TAMPINES STREET 43 #08-366 SINGAPORE 524495		
ID Type / ID No.: NRIC NO / S2553202C			Contact No.: Home/Office: Mobile: 98374628		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 71	Date of Birth: 25/10/1949	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Delivery			Driving Licence Information: Class: 2B,2A,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 05/02/2021 19:30	Type of Location: Car Park
Location: TAMPINES STREET 43				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
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
GW5374J	Van				No Damage	0
SLQ5603X	Car					0



**SINGAPORE
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T/20210224/2091

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Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

Report No. T/20210224/2091

CONTINUATION OF REPORT

Brief Details.

On 5th February 2021 at about 1930hrs, I drove my van bearing registration plate GW5374J at BIK 494F Tampines Street 43 MSCP looking for available lot. As I spotted an available lot hence, I reversed my van inside the lot. While reversing suddenly I felt a jerk. Then I realised that I had lightly touched the parked car SLQ5603X front right portion. I went down to check the car however no visible damaged to the car.



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3 of 3

Report No. T/20210224/2091

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 NURHIDAYAH BINTE IADIL

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

24/02/2021 18:59

Officer In Charge Of Case:

TP / GIA /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Classification Of Case:



**SINGAPORE
POLICE FORCE**
Authentication Stamp

NP168

SIGNATURE