

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 15/02/2021 16:46 (SGT)
Date of Accident 13/02/2021 01:05 (SGT)
Exact Location of Accident 22 Upper Weld Rd, Singapore 207379
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMH2305L

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner NG CHEE MENG
NRIC No SXXXX045D
Email Address daven12_leo@hotmail.com
Mobile Phone No (Phone) +65-84180330
Alternative Phone No +65-84180330

VEHICLE PARTICULARS

Manufacturer Mazda
Model 5
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 NTUC
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 5107298783-01
Cover Note Number -

DRIVER

Name of Driver NG CHEE MENG
NRIC No SXXXX045D
Date Of Birth 12/08/1975
Occupation Outdoor

Date Of Driving Pass	13/11/1998
Driving experience	22 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84180330
Alt. Phone Number	+65-84180330
Email Address	daven12_leo@hotmail.com
Address	BLK 476 SEMBAWANG DRIVE
Address complement	#10-311
Postcode	750476
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	5
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	Rochor Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002949999
Alt. Police Station Phone No	(Fax) +65-63918583
Police Station Address	11 Kampong Kapur Road Singapore 208678
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT:T/20210213/2009

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	SLU2825X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	NARAYANSAMY ELAMARAN
NRIC No	SXXXX975J

Contact Number	(Phone) +65-90600953
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	GBG3658Y
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 3

Vehicle Registration Number	GBG1840A
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 4

Vehicle Registration Number	GBD690M
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

IMPORTANT NOTICE

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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

22 Upper Weld Road

A - SMH 2305L
 B - BLN 2825X
 C - G86 3658Y
 D - G86 1840H
 E - G8D 690M


Describe Circumstances of the Accident


As per police report No. T/20210213/2009

Declaration

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

 15/02/21
Witnessed by Reporting Centre Personnel



**SINGAPORE
POLICE FORCE**



T/20210213/2009

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

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Report No. T/20210213/2009

CONTINUATION OF REPORT

Driver			
Name	NARAYANSAMY ELAMARAN		ID No. S8284975J
Related Vehicle	SLU2825X (Car)		Contact No. NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Vehicle Owner			
Name	NG CHEE MENG		ID No. S7529045D
Related Vehicle	SMH2305L (Car)		Contact No. 84180330
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 13/02/2021 at about 0105hrs, I was at home and suddenly heard a loud bang as my kitchen window was facing the carpark. My vehicle was parked at lot no. 22. I then went to make a check at the kitchen window and saw my vehicle (license registration no. SMH2305L) was already damaged and the vehicle (license registration no. SLU2825X) rear bumper had already collided onto my vehicle front bumper. The alarm of my vehicle also went off.

At that point of time, my vehicle rear bumper had collided onto a lorry's front bumper (license registration no. GBG3658Y). The lorry rear bumper had collided onto a van's front bumper (license registration no. GBG1840A). The van rear bumper had collided onto another lorry's front bumper (license registration no. GBD690M).

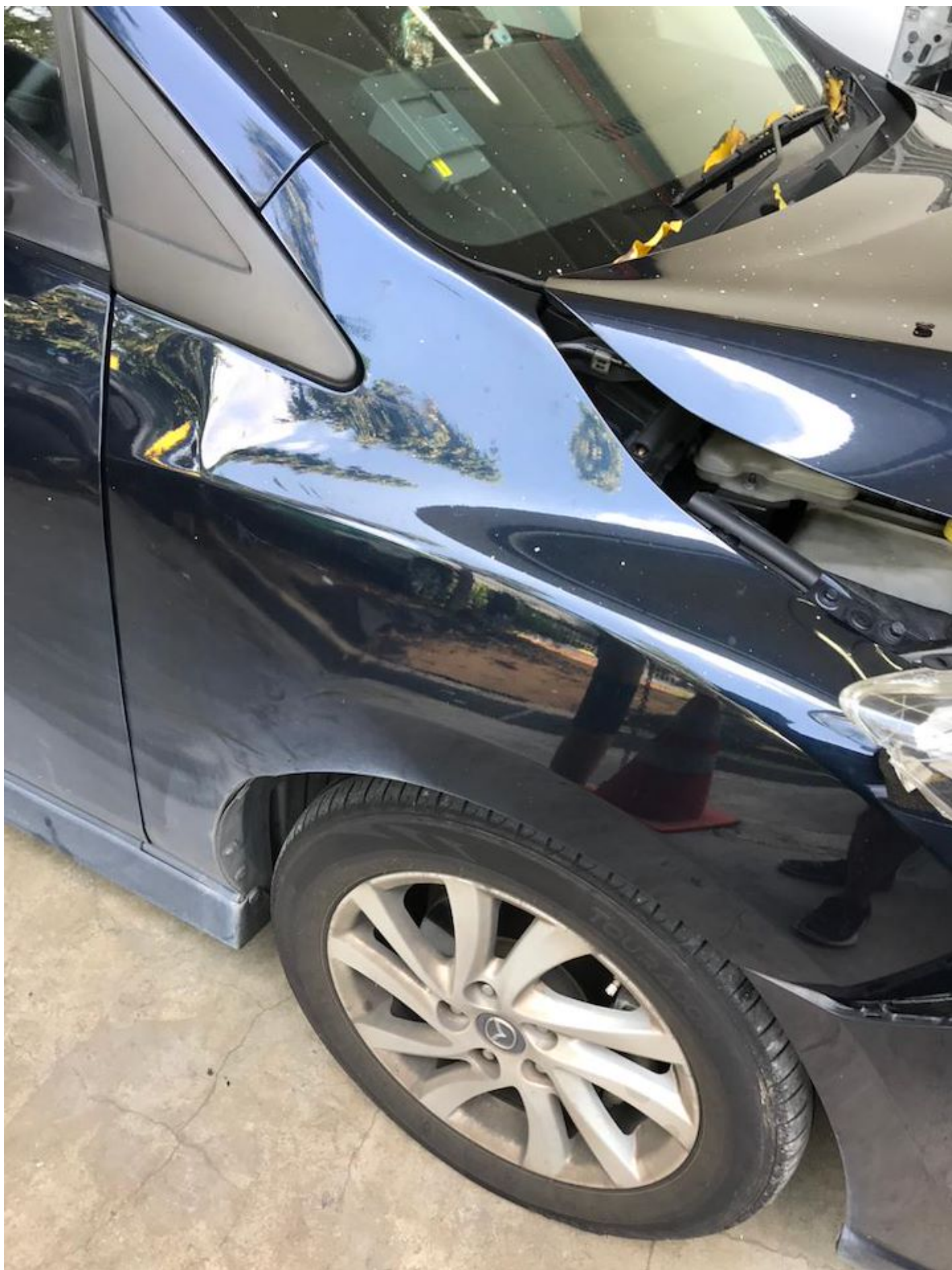
Subsequently, I went down and approached the vehicle owner (Narayansamy) who was driving vehicle (license registration no. SLU2825X) as his vehicle was parked in front of my vehicle. When I went down, Narayansamy's vehicle had already moved to the front. When Narayansamy came down from the vehicle, I asked him to exchange particulars with me however, he asked me not to report the matter to the police. Subsequently, I managed to take Narayansamy's particulars. I called for police assistance as there were 5 vehicles involved in this accident. Police attended to the incident and advised me to lodge a police report.

My vehicle's front bumper was dented and had scratches. The rear windscreen of my vehicle was shattered into pieces.



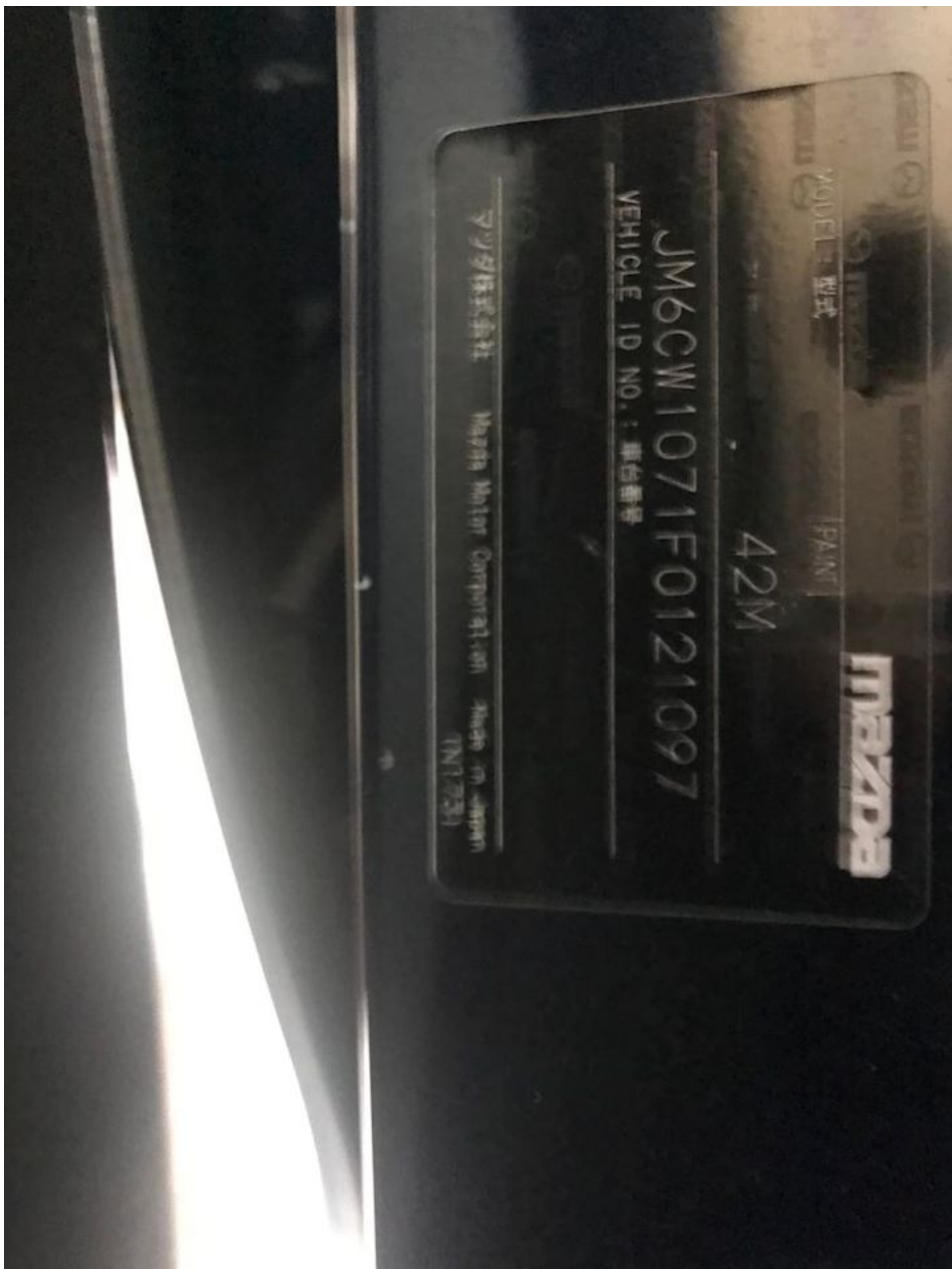


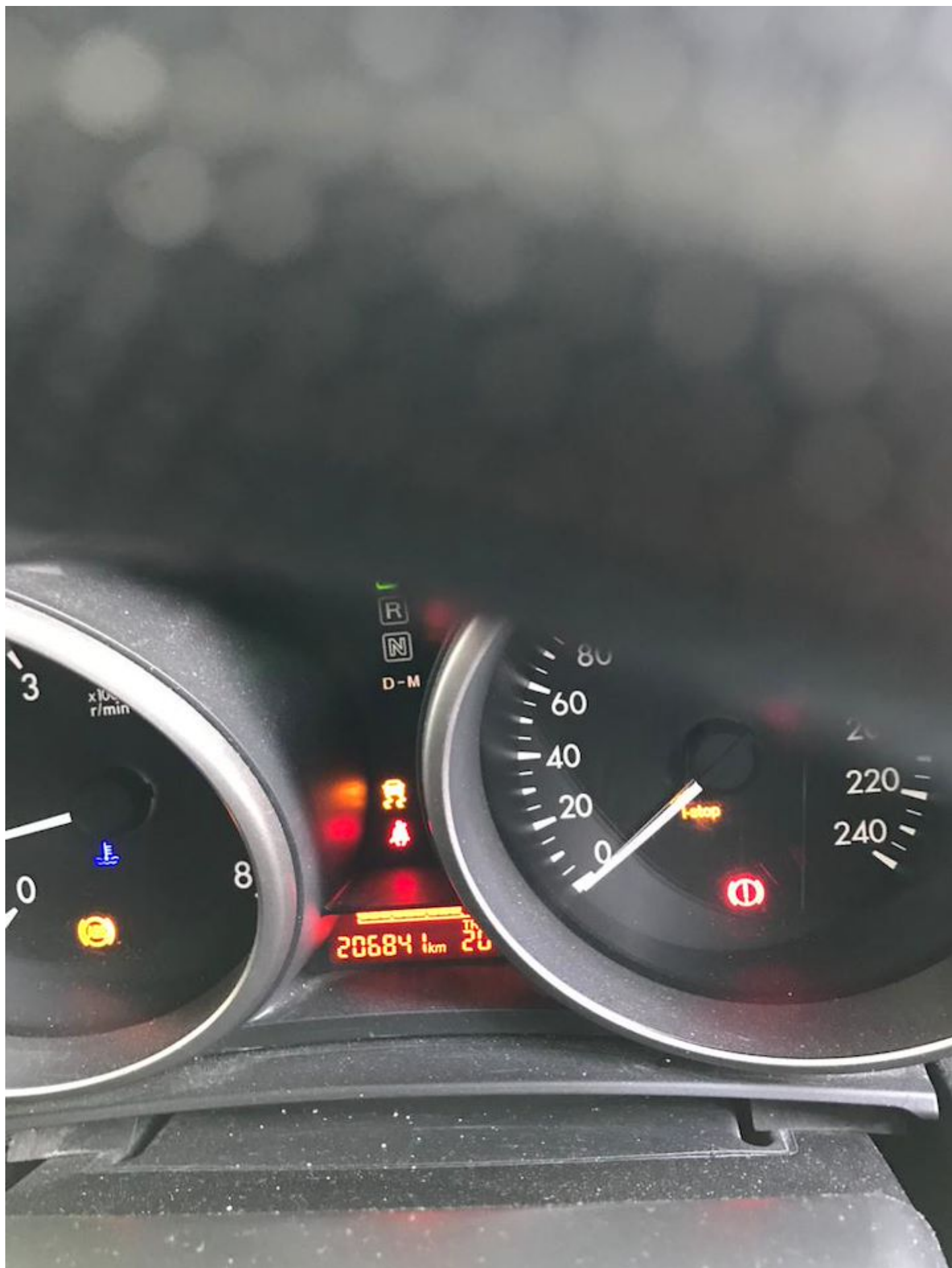













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T/20210213/2009

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

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Report No. T/20210213/2009

CONTINUATION OF REPORT

Driver			
Name	NARAYANSAMY ELAMARAN		ID No. S8284975J
Related Vehicle	SLU2825X (Car)		Contact No. NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Vehicle Owner			
Name	NG CHEE MENG		ID No. S7529045D
Related Vehicle	SMH2305L (Car)		Contact No. 84180330
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

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At that point of time, my vehicle rear bumper had collided onto a lorry's front bumper (license registration no. GBG3658Y). The lorry rear bumper had collided onto a van's front bumper (license registration no. GBG1840A). The van rear bumper had collided onto another lorry's front bumper (license registration no. GBD690M).

Subsequently, I went down and approached the vehicle owner (Narayansamy) who was driving vehicle (license registration no. SLU2825X) as his vehicle was parked in front of my vehicle. When I went down, Narayansamy's vehicle had already moved to the front. When Narayansamy came down from the vehicle, I asked him to exchange particulars with me however, he asked me not to report the matter to the police. Subsequently, I managed to take Narayansamy's particulars. I called for police assistance as there were 5 vehicles involved in this accident. Police attended to the incident and advised me to lodge a police report.

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SINGAPORE POLICE FORCE



T/20210213/2009

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Report No. T/20210213/2009

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/02/2021 04:25	Vide Report No.: A/20210213/0019	Station Diary No.: 30
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Informant's Particulars

Name of Informant: NG CHEE MENG		Address: APT BLK 476 SEMBAWANG DRIVE #10-311 SINGAPORE 750476	
ID Type / ID No.: NRIC NO / S7529045D		Contact No.: Home/Office: Mobile: 84180330	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 45	Date of Birth: 12/08/1975	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: Grab Driver		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 13/02/2021 01:05	Type of Location: Straight Road
Location: UPPER WELD ROAD				
Weather: Clear	Road Surface: Dry		Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Traffic Light - Working		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
GBD690M	Lorry				No Damage	0
GBG1840A	Van				Slightly Damaged	0
GBG3658Y	Lorry				Slightly Damaged	0
SLU2825X	Car				Slightly Damaged	0

**SINGAPORE
POLICE FORCE**

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Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999



T/20210213/2009

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Report No. T/20210213/2009

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:

A /

Sgt 2 LEE JUN LIANG, KENNETH

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

13/02/2021 04:25

Officer In Charge Of Case:

TP / GIT /

SI MOHAMMAD ABDILLAH BIN PALIL

Contact No.: 65476246

Classification Of Case:

Authentication Stamp

NP168

POLICE FORCE