

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	17/02/2021 16:22 (SGT)
Date of Accident	16/02/2021 18:35 (SGT)
Exact Location of Accident	Central Blvd, Singapore
Additional Location Information	CENTRAL BOULEVARD AND BAYFRONT AVENUE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLN1686Z
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	GOH HONG JUN, IVAN
NRIC No	SXXXX700Z
Email Address	ivan_goh@live.com
Mobile Phone No	(Phone) +65-93382999
Alternative Phone No	+65-93382999

VEHICLE PARTICULARS

Manufacturer	Kia
Model	Forte
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	EQ
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPPHQ20-002627
Cover Note Number	NA

DRIVER

Name of Driver	GOH HONG JUN, IVAN
NRIC No	SXXXX700Z
Date Of Birth	29/07/1985
Occupation	Indoor

Date Of Driving Pass	26/01/2006
Driving experience	15 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-93382999
Alt. Phone Number	+65-93382999
Email Address	ivan_goh@live.com
Address	Siglap V, 2 First Street 458278 #04-01
Address complement	-
Postcode	-
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	Side Swipe
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	Central Division Headquarters
Police Station Phone No	(Phone) +65-18002240000
Alt. Police Station Phone No	(Fax) +65-62200877
Police Station Address	391 New Bridge Road #03-112 Police Cantonment Complex Block A Singapore 088762
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

My car, SLN1686Z was on the right most lane and I was driving straight along Central Boulevard. The car, SLF4913R which was on my left, was on the straight-only lane had instead made a right turn therefore hitting my car. I immediately stopped my car when that happened, wanting to take photographs and exchange contact details but the car, SLF4913R drove off without checking.

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	SLF4913R
Vehicle Manufacturer	Toyota
Vehicle Model	Prius
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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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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



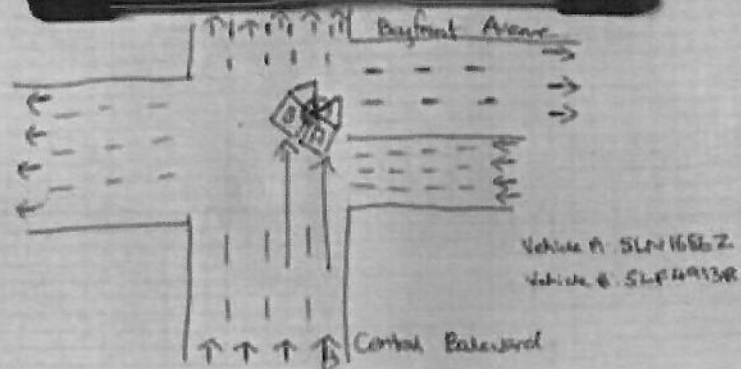
Policyholder's Signature
Date & Time:

17 Feb 2021

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

VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
MOHAMED SAIFULLAH S/O SYED MASOOD

Reporting Centre Personnel's Signature
Name:
NRIC/HIN No.:



REFER TO ATTACHED STATEMENT.

REFER TO ATTACHED STATEMENT.

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

VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
MOHAMED SAIFULLAH S/O SYED MASOOD

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No:



**SINGAPORE
POLICE FORCE**



A/20210216/7028

1 of 2

POLICE REPORT (NP299)

Report No. A/20210216/7028

Police Station Of Origin
Central Division HQ
A 391 New Bridge Road #03-112 Police
Cantonment Complex SINGAPORE 088762
Tel No:1800-2240000

Date/Time Report Made 16/02/2021 22:34	Vide Report No.	Station Diary No.
Name Of Informant GOH HONG JUN, IVAN	Address 2 FIRST STREET #04-01 SINGAPORE 458278	
ID Type / ID No. NRIC NO / S8524700Z	Contact No. Home/Office:	Mobile: 93382999
Nationality SINGAPORE CITIZEN	Email Address IVAN GOH@LIVE.COM	
Occupation Treasury manager	Sex Male	Age 35
Institution/School Name	Date of Birth 29/07/1985	Race Chinese
Date/Time Of Incident 16/02/2021 18:35	Location Of Incident CENTRAL BOULEVARD	

Brief details.

My car, SLN1686Z was on the right most lane and I was driving straight along Central Boulevard. The car, SLF4913R which was on my left, was on the straight-only lane had instead made a right turn therefore hitting my car. I immediately stopped my car when that happened, wanting to take photographs and exchange contact details but the car, SLF4913R drove off without checking.

Subjects Involved	
Suspect	
Person Name	Unknown
Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 16/02/2021 22:34
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	



**SINGAPORE
POLICE FORCE**



A/20210216/7028

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. A/20210216/7028

Gender	Unknown	Habits & Oddities	vehicle number SLF4913R
Victim			
Person Name	GOH HONG JUN, IVAN		
ID Type	NRIC NO	ID No	S8524700Z
Gender	Male	Age	35
Race	Chinese	Language	English
Occupation	Treasury manager	Address	2 FIRST STREET #04-01 SINGAPORE 458278
Mobile No	93382999	Is Informant A Victim?	Yes
Person Name	GOH HONG JUN, IVAN (Informant)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 16/02/2021 22:34
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	