

SS1Y21310001 / SME MOTOR PTE LTD
ENTRY DATE & TIME: 01/03/2021 17:55 (SGT)
SUBMITTED BY: Chia Pei Ying
VERSION: 1 (01/03/2021 17:55 (SGT))

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	01/03/2021 17:55 (SGT)
Date of Accident	27/02/2021 21:40 (SGT)
Exact Location of Accident	Bedok North Street 3, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMX9809U
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	SILVERLAU SERVUCES
Company Reg No	5XXX454W
Email Address	silverylau000@gmail.com
Mobile Phone No	(Phone) +65-84281365
Alternative Phone No	+65-84281365

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Vezel
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
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	5120919409
Cover Note Number	-

DRIVER

Name of Driver	LAU SIEW HOON
NRIC No	SXXXX957G
Date Of Birth	20/12/1965
Occupation	Outdoor

Date Of Driving Pass	03/03/1987
Driving experience	33 YEARS AND 11 MONTHS
Gender	Female
Mobile Number	(Phone) +65-84281365
Alt. Phone Number	-
Email Address	silverylau000@ymail.com
Address	BLK 140C CORPORATION DRIVE #09-62
Address complement	-
Postcode	613140
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)	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	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT: T/20210228/2032.

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	SKN5187H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	SNG CHYE HUAT
Contact Number	-

Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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7. By the lodgment 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.
- (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:

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

1550 HRS
01/3/2021

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

GIARMC_SignoffForm_v01

PREMIUM
CARE

SKETCH PLAN

Vehicle A: SMX9804
B: SKN5187H

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to Board's report attached no.: 7/2020278/2032

DECLARATION

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



Policyholder's Signature
Date & Time:

GaRMA: SketchPlatform_V3

Driver's Signature
(If driver is not the policyholder)

Date & Time: 15:00 HRS
01/3/2021

Reporting Centre Personnel's Signature

Name: _____
NRIC/FIN No.: _____

Please email a copy of the accident report to awtcr.g@premiumcarz.com.sg


**SINGAPORE
POLICE FORCE**


T/20210228/2032

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Report No. T/20210228/2032

Police Station Of Origin:
Hong Kah South NPP
510 Jurong West Street 52 #01-90
SINGAPORE 640510
Tel No: 1800-5648999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/02/2021 13:00	Vide Report No.:	Station Diary No.: 9
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Informant's Particulars

Name of Informant: LAU SIEW HOON			Address: APT BLK 140C CORPORATION DRIVE #09-62 SINGAPORE 613140	
ID Type / ID No.: NRIC NO / S1704957G			Contact No.:	Mobile: 84281365
Nationality: SINGAPORE CITIZEN			Home/Office:	
			Email:	
Sex: Female	Age: 55	Date of Birth: 20/12/1965	Type of Informant: Driver	
Race: Chinese		Language: Chinese		Institution / School Name:
Occupation: PHV DRIVER			Driving Licence Information: Class:	
			Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 27/02/2021 21:40	Type of Location: Straight Road
Location: BEDOK NORTH STREET 3				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
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
SKN5187H	Car	TOYOTA	CAMRY 2.5 AUTO	Grey	Slightly Damaged	0
SMX9809U	Car	HONDA	VEZEL 1.5X CVT	Purple	Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	Use of Pedestrian Crossing: NA	
No. of Pedestrians Injured: NIL		



**SINGAPORE
POLICE FORCE**



T/20210228/2032

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Report No. T/20210228/2032

Police Station Of Origin:
Hong Kah South NPP
510 Jurong West Street 52 #01-90
SINGAPORE 640510
Tel No: 1800-5648999

CONTINUATION OF REPORT

Driver			
Name	SNG CHYE HUAT	ID No.	S1263626A
Related Vehicle	SKN5187H (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
Driver			
Name	LAU SIEW HOON	ID No.	S1704957G
Related Vehicle	SMX9809U (Car)	Contact No.	84281365
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

Brief Details.

On 27/02/2021 at about 2140hrs, I had parked my vehicle at the road side along Bedok North St 3 as I was instructed by a passenger to wait the said location. I had turned on my hazard light and came to a complete stop.

Moments later, a car bearing plate number SKN5187H (V1) had sideswiped my vehicle from the rear right and stopped. I was unable open my door as V1 is preventing it. I had signaled V1's driver to either move off however the driver was not responsive. I also tried to move forward, but I cant as my vehicle is stuck. A passer by then instructed V1's driver to reverse which he then did then parked V1 behind my vehicle.

I made a check and discovered there were scratches seen on the right rear door and rear fender of my vehicle. We then exchanged particulars and left. No one claimed injured at that point of time. My vehicle have an in-car camera. I believe V1's driver is drunk at that point of time.

The driver requested for a private settlement however his behavior is a bit rude and I declined and decided to proceed and made insurance claim.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Hong Kah South NPP
510 Jurong West Street 52 #01-90
SINGAPORE 640510
Tel No: 1800-5648999



T/20210228/2032

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Report No. T/20210228/2032

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: J / Sgt 2 FAIZUL BIN NENWARI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 28/02/2021 13:00
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp NP168	SN 125
Signature: Singapore Police Force	