

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	02/03/2021 16:34 (SGT)
Date of Accident	25/02/2021 17:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	18 HOUGANG AVE 3 S(530018) CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBH6550Z
-----------------------------	----------

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	LINDE MATERIAL HANDLING ASIA PACIFIC PTE LTD
Company Reg No	1XXXXX183C
Email Address	dexter.ng@linde-mh.com.sg
Mobile Phone No	(Phone) +65-90104286
Alternative Phone No	+65-90104286

VEHICLE PARTICULARS

Manufacturer	Opel
Model	Vivaro
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	Yes
Vehicle Category	Commercial vehicle

INSURANCE COMPANY

Name of Insurance Company	Allied World
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	BVFCB0010582109
Cover Note Number	-

DRIVER

Name of Driver	POH DONG YANG
Passport No/FIN	GXXXX721K
Date Of Birth	17/03/1992
Occupation	Indoor

Date Of Driving Pass	14/01/2015
Driving experience	6 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-90104286
Alt. Phone Number	-
Email Address	dexter.ng@linde-mh.com.sg
Address	18 HOUGANG AVE 3 #06-179
Address complement	-
Postcode	530018
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	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?	No
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	Pasir Ris Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18005852999
Alt. Police Station Phone No	(Fax) +65-65855261
Police Station Address	1 Pasir Ris Drive 4 #01-01 Singapore 519457
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT T/20210302/2017

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No



**SINGAPORE
POLICE FORCE**



T/20210302/2017

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

1 of 3

Report No. T/20210302/2017

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 02/03/2021 10:17	Vide Report No.:	Station Diary No.: 30
--	------------------	--------------------------

Informant's Particulars

Name of Informant: POH DONG YANG			Address: 18 Hougang Avenue 3 #06-179 SINGAPORE 530018		
ID Type / ID No.: FIN NO / G2149721K			Contact No.: Home/Office: Mobile: 97736111		
Nationality: MALAYSIAN			Email:		
Sex: Male	Age: 28	Date of Birth: 17/03/1992	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: TECHNICIAN			Driving Licence Information: Class: 2B,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 25/02/2021 17:00	Type of Location: Car Park
Location: HOUGANG AVENUE 3				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: HIT AND RUN				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBH6550Z	Van				Slightly Damaged	0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20210302/2017

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

2 of 3

Report No. T/20210302/2017

CONTINUATION OF REPORT

Driver			
Name	POH DONG YANG		ID No. G2149721K
Related Vehicle	GBH6550Z (Van)		Contact No. 97736111
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 2B,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 25/02/2021 at 1700hrs, I picked up my vehicle (GBH 6550Z) that was parked at B/18 Hougang Avenue 3 opened-space carpark; lot 128. When I reached my working place, my friend told me the left headlight of my vehicle was broken.

I observed my vehicle and noticed that the glass of the headlight was shattered. As I reached home at about 2042hrs, I went back to the same carpark lot and noticed that there were pieces of glass on the floor.

I wish to state that I remembered that I parked my vehicle at 0015hrs. That point of time, there were vehicles parked on my left and right side. My vehicle was in a good condition and I did not notice any damages. I could only remember that when I parked my car, I noticed that a van was parked on my left.

I had a video recorder installed in front of my vehicle. However, the engine was switched off, resulting to the recorder not on as well.



**SINGAPORE
POLICE FORCE**



T/20210302/2017

3 of 3

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

Report No. T/20210302/2017

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 2 Lee Wan Jing

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

02/03/2021 10:17

Officer In Charge Of Case:

TP / HRT /

SI NOR AFFENDY BIN JAFFAR

Contact No.: 65476368

Classification Of Case:

Authentication Stamp

NP168



SINGAPORE
POLICE FORCE

SIGNATURE