

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 26/03/2021 15:22 (SGT)
Date of Accident 02/02/2021 16:20 (SGT)
Exact Location of Accident Telok Blangah Way, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SGC8000Z

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner YONG CHONG POH
NRIC No SXXXX114Z
Email Address JOEY.JIDELAI@GMAIL.COM
Mobile Phone No (Phone) +65-97988788
Alternative Phone No +65-97988788

VEHICLE PARTICULARS

Manufacturer Toyota
Model Alphard
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
Transmission Auto
CC 2500

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 5097472560-03
Cover Note Number -

DRIVER

Name of Driver YONG CHONG POH
NRIC No SXXXX114Z

Date Of Birth	13/06/1973
Occupation	Indoor
Date Of Driving Pass	11/04/1994
Driving experience	26 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97988788
Alt. Phone Number	+65-97988788
Email Address	JOEY.JIDELAI@GMAIL.COM
Address	50 AMBER RD #15-04
Address complement	-
Postcode	439888
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	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)	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	Bukit Merah West Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18003779999
Alt. Police Station Phone No	(Fax) +65-63773923
Police Station Address	500 Bukit Merah View #01-01 Singapore 159682
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT T/20210202/2116

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	SJX7306C
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

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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

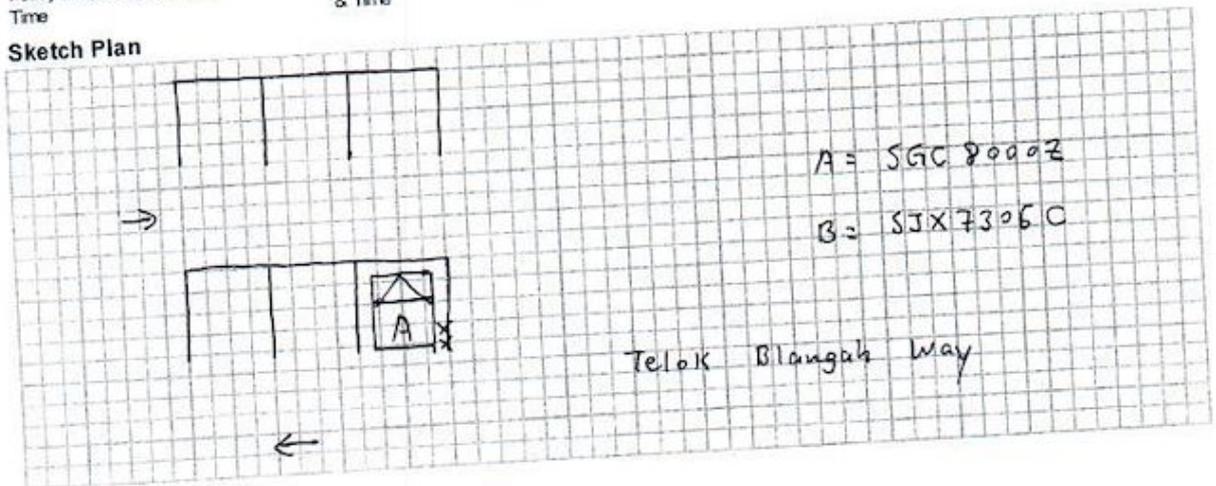


 Driver's Signature (If driver is not the policyholder) / Date & Time



 Witnessed by Reporting Centre Personnel

Sketch Plan



















 SINGAPORE POLICE FORCE		 T/20210202/2116				
Police Station Of Origin: Bukit Merah West N.P.C 500 Bukit Merah View #01-01 SINGAPORE 159682 Tel No: 1800-3779999			1 of 3 Report No. T/20210202/2116			
REPORT OF A TRAFFIC ACCIDENT						
Date/Time Report Made: 02/02/2021 18:37		Vide Report No.:	Station Diary No.: 44			
Informant's Particulars						
Name of Informant: YONG CHONG POH		Address: 50 AMBER ROAD #15-04 SINGAPORE 439888				
ID Type / ID No.: NRIC NO / S7321114Z		Contact No.:	Home/Office: Mobile: 97988788			
Nationality: SINGAPORE CITIZEN		Email:				
Sex: Male	Age: 47	Date of Birth: 13/06/1973	Type of Informant: Driver			
Race: Chinese		Language:	Institution / School Name:			
Occupation: SELF EMPLOYED		Driving Licence Information: Class: 3	Date of Expiry:			
General Information of the Accident						
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 02/02/2021 16:20	Type of Location: Car Park		
Location: TELOK BLANGAH WAY						
Weather: Clear		Road Surface: Dry		Road Speed Limit:		
Traffic Flow: Two Way		Traffic Control: Not Controlled		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
SGC8000Z	Car	TOYOTA	ALPHARD 2.5 SC CVT ABS 2WD 5DR	White	Slightly Damaged	0
SJX7306C	Car					0
Details of Vehicle Insurance						
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date		


**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Bukit Merah West N.P.C
500 Bukit Merah View #01-01 SINGAPORE
159682
Tel No: 1800-3779999



T/20210202/2116

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Report No. T/20210202/2116

CONTINUATION OF REPORT

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGC8000Z	NTUC Income Insurance Co-Operative Limited	5097472560-03	29/01/2021	28/01/2022

Details of Person Involved

Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	YONG CHONG POH	ID No.	S7321114Z
Related Vehicle	SGC8000Z (Car)	Contact No.	97988788
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 02/02/2021 at around 1600hrs, I parked at the basement carpark of Safra Mount Faber. I then went to eat at the restaurant there. At around 1730hrs, I went back to the carpark where I parked my car and discovered there were damages to my car. My rear bumper at the rear right corner came off and there were scratches and dents at the rear right corner of my car. I looked around the carpark and saw that there were CCTV cameras.

I then went to the management office of Safra Mount Faber. I informed the management of what had happened. They informed me that from their CCTV footage, they saw one Black Coloured Audi with carplate number SJX7306C was the one that had hit my car at 1621hrs. They did not show me the CCTV footage. They informed me that I have to make a Police report in order to retrieve the CCTV footages from them.

The management informed me that the person to contact regarding the CCTV footage would be Ms Hui Shan. The contact details would be: Safra Mount Faber, 2 Telok Blangah Way, Tel: 63773662.

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 **SINGAPORE
POLICE FORCE**

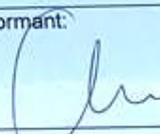
Police Station Of Origin:
Bukit Merah West N.P.C
500 Bukit Merah View #01-01 SINGAPORE
159682
Tel No: 1800-3779999

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3 of 3
Report No. T/20210202/2116

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: D / Staff Sgt MUHAMMAD DANIAL BIN JAFFAR	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 02/02/2021 18:37
Officer In Charge Of Case: TP / HRT / SI KALESWARI PALANI Contact No.: 65476902	Classification Of Case:

Authentication Stamp
NP168
SN 45

SIGNATURE