

# 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 ..... 30/03/2021 19:43 (SGT)  
Date of Accident ..... 28/03/2021 20:10 (SGT)  
Exact Location of Accident ..... Queen St, Singapore  
Additional Location Information ..... CARPARK  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SKK84U

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... WANG QINCUI  
NRIC No ..... SXXXX941F  
Email Address ..... JUSTIN@VENUSGRP.COM.SH  
Mobile Phone No ..... (Phone) +65-83668884  
Alternative Phone No ..... +65-83668884

### VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... Vellfire  
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 ..... Manual  
CC ..... 2493

### INSURANCE COMPANY

Name of Insurance Company ..... NTUC Income Insurance Co-operative Ltd  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... 5118530934  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... JANSON TAY CHEE HIAN(ZHENG ZHIXIAN)  
NRIC No ..... SXXXX701H

Date Of Birth .....	18/01/1981
Occupation .....	Outdoor
Date Of Driving Pass .....	20/06/2005
Driving experience .....	15 YEARS AND 9 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-88334438
Alt. Phone Number .....	-
Email Address .....	JANSON_1984@YAHOO.COM.SG
Address .....	BLK 823 JURONG WEST ST 81
Address complement .....	#09-462
Postcode .....	640823
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 .....	Collided into Parked Vehicle
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 .....	Marina Bay Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18002229999
Alt. Police Station Phone No .....	(Fax) +65-64359276
Police Station Address .....	No 70 Marina View Singapore 018962
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT:T/20210329/2095

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes
Reasons for not uploading a video of the accident .....	WITH WORKSHOP
Was there any audio recorded? .....	Yes

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SJV4228A
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) .....	-

#### WITNESS DETAILS

##### WITNESS 1

Name .....	ADRIAN
Phone .....	(Phone) +65-83221807
Email .....	-

## SKETCH PLAN

### 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 willful 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. The 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.
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;

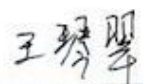


(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

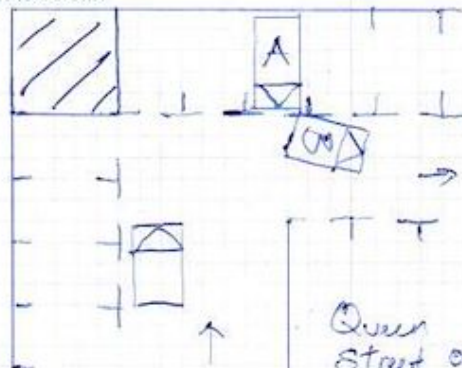
(collectively the "Purposes")

(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



Queen  
Street openspace  
Car Park (Opposite Bugis +)

A: SKK 84U

B: SJV 4228A



**Describe Circumstances of the Accident**

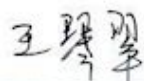
On time and date mentioned: i parked my vehicle (SKK 840) at Queen Street open space carpark (opposite Bugis +) and went to eat dinner. When i came back to my vehicle, i was approach by a guy, he told me that a vet B (80V 4228A) had collided into my vehicle and did not stop. He managed to get the vehicle's contact number and had the whole incident recorded in his in-car camera. He sent the information to me and the witness has called traffic police. :  
Witness: Admin - 83221807.


Refer to Police Report.


Report No. : T/20210329/2095.

**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

 30/03/21  
Witnessed by Reporting Centre Personnel



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Marina Bay N.P.C  
70 Marina View SINGAPORE 018962  
Tel No: 1800-2229999



T/20210329/2095

2 of 3

Report No. T/20210329/2095

**CONTINUATION OF REPORT**

Driver			
Name	JANSON TAY CHEE HIAN	ID No.	S8101701H
Related Vehicle	NIL	Contact No.	88334438
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4,5 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On the above mentioned date, time and location I parked my vehicle SKK84U at Queen Street open space carpark opposite Bugis Plus and went to eat dinner. When I returned to my vehicle, a guy namely Adrian HP: 83221807 approached me and informed me that earlier on another vehicle SJV 4228A had collided into my vehicle and did not stop. However, he managed to get the contact details of the said driver whose name is Kai HP: 96799929. Witness Adrian had also provided me with his in-car camera footage of the whole incident. Witness also informed that he had called for police assistance before I returned to my vehicle and Traffic police officers came and attended to him. I have contacted the driver and he admitted in colliding into my said vehicle and requested me to claim insurance. This report is lodge for insurance claiming purposes. That is all.

























**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Marina Bay N.P.C  
70 Marina View SINGAPORE 018962  
Tel No: 1800-2229999



T/20210329/2095

1 of 3

Report No. T/20210329/2095

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 29/03/2021 17:35	Vide Report No.:	Station Diary No.: 23
--	------------------	--------------------------

Informant's Particulars			
Name of Informant: JANSON TAY CHEE HIAN		Address: APT BLK 823 JURONG WEST STREET 81 #09-462 SINGAPORE 640823	
ID Type / ID No.: NRIC NO / S8101701H		Contact No.: Home/Office: Mobile: 88334438	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 40	Date of Birth: 18/01/1981	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: PERSONAL DRIVER		Driving Licence Information: Class: 2B,2A,2,3,4,5 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 28/03/2021 20:10	Type of Location: Car Park
Location: QUEEN STREET				
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
SJV4228A	Car					0
SKK84U	Car	TOYOTA	Vellfire	Black	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/20210329/2095

Police Station Of Origin:  
Marina Bay N.P.C  
70 Marina View SINGAPORE 018962  
Tel No: 1800-2229999

2 of 3

Report No. T/20210329/2095

**CONTINUATION OF REPORT**

Driver			
Name	JANSON TAY CHEE HIAN	ID No.	S8101701H
Related Vehicle	NIL	Contact No.	88334438
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4,5 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On the above mentioned date, time and location I parked my vehicle SKK84U at Queen Street open space carpark opposite Bugis Plus and went to eat dinner. When I returned to my vehicle, a guy namely Adrian HP: 83221807 approached me and informed me that earlier on another vehicle SJV 4228A had collided into my vehicle and did not stop. However, he managed to get the contact details of the said driver whose name is Kai HP: 96799929. Witness Adrian had also provided me with his in-car camera footage of the whole incident. Witness also informed that he had called for police assistance before I returned to my vehicle and Traffic police officers came and attended to him. I have contacted the driver and he admitted in colliding into my said vehicle and requested me to claim insurance. This report is lodge for insurance claiming purposes. That is all.





**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Marina Bay N.P.C  
70 Marina View SINGAPORE 018962  
Tel No: 1800-2229999



T/20210329/2095

3 of 3

Report No. T/20210329/2095

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 /

Staff Sgt NGO FENG WEI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

29/03/2021 17:35

Officer In Charge Of Case:

TP / GIT /

Sgt 3 MUHAMMAD SYARIFUDDIN

MUHAMMAD AJMAIN

Contact No.: 65476367

Classification Of Case:

Authentication Stamp

NP168