



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 15:10 (SGT)
Date of Accident	20/03/2021 15:00 (SGT)
Exact Location of Accident	Alps Ave, Singapore
Additional Location Information	LOADING BAY & UNLOADING BAY
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP9159L
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	SG SAGAWA AMERIOD PTE. LTD.
Company Reg No	1XXXXX423D
Email Address	ziv.ong@sgh-global.com
Mobile Phone No	(Phone) +65-66029932
Alternative Phone No	(Office) +65-66029932

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Fuso
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?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	7545

INSURANCE COMPANY

Name of Insurance Company	MSIG Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	J400000359MKF
Cover Note Number	-

DRIVER

Name of Driver	WANG DAYONG
Passport No/FIN	GXXXX188T



Date Of Birth	11/01/1986
Occupation	Outdoor
Date Of Driving Pass	12/08/2015
Driving experience	5 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96620508
Alt. Phone Number	-
Email Address	ziv.ong@sgh-global.com
Address	BLK 458 TAMPINES ST 42 #07-300
Address complement	-
Postcode	520458
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?	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	Jurong West Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002689999
Alt. Police Station Phone No	(Fax) +65-62672438
Police Station Address	700 Corporation Road Singapore 649818
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN

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	YQ2540J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle

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 PLANIMPORTANT NOTICE

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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 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:

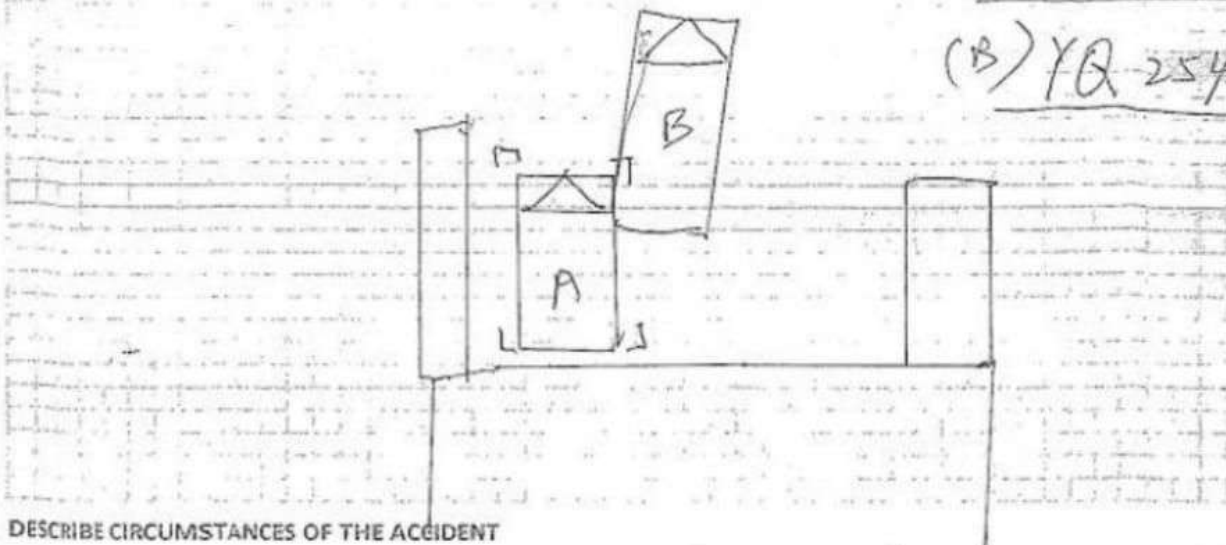
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.



26/3/2021 13:30

[Signature]

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report T/20210326/2031

DECLARATION

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

X



Policyholder's Signature
Date & Time:

26/3/2021 13:30

Driver's Signature
If driver is not the policyholder

☐ Claim own policy
☒ Claim third party
☐ Claim OD / TP at other workshop
☐ For record purpose

Policy No. 54
 Insurer MSIG Veh No. YP-71596

Reporting Centre Personnel's Signature
Name


**SINGAPORE
POLICE FORCE**


T/20210326/2031

1 of 3

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Report No. T/20210326/2031

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/03/2021 12:53		Vide Report No.:		Station Diary No.: 36	
Informant's Particulars					
Name of Informant: WANG DAYONG			Address: APT BLK 458 Tampines Street 42 #07-300 SINGAPORE 520458		
ID Type / ID No.: FIN NO / G6758188T			Contact No.: Home/Office: Mobile: 96620508		
Nationality: CHINESE			Email:		
Sex: Male	Age: 35	Date of Birth: 11/01/1986	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: DRIVER			Driving Licence Information: Class: 4 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 20/03/2021 15:00	Type of Location: Loading / unloading Bay
Location: ALPS AVENUE				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: Heavy
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
YP9159L	Lorry	MITSUBISHI	FUSO FK62FMZ1R DEC	White	Slightly Damaged	0
YQ2540J	Lorry	MITSUBISHI	FUSO FK62FMZ1R DEC	White	Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20210326/2031

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

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Report No. T/20210326/2031

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	WANG DAYONG	ID No.	G6758188T
Related Vehicle	YP9159L (Lorry)	Contact No.	96620508
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Person Involved			
Name	Unknown	ID No.	NIL
Related Vehicle	YQ2540J (Lorry)	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

Brief Details.

On 20/03/2021 at 1400hrs, I parked my lorry bearing the car plate number of (YP9159L) at the loading and unloading bay of 20 Alps Ave My company area. I ended my shift and went home afterwards.

On 22/03/2021 at 0700hrs, I went back to my vehicle and noticed a scratch on my right side lorry area. I informed my company supervisor and they made a check on the CCTV.

On 25/03/2021 at 1500hrs, My supervisor informed me that they had view the CCTV Footage and discovered that on 20/03/2021 at 1450hrs, there was this white colored lorry bearing the car plate number of (YQ2540J) tried to reverse into the parking lot beside my vehicle which cause the scratch onto my lorry. Upon scratching my vehicle, the lorry readjust and continue to park into the lot and unload his items subsequently left without leaving a note onto my lorry or inform anyone. The CCTV Footage had captured the incident and I was informed by my supervisor to lodge a traffic accident report for insurance purpose. No one was injured and no government property was damaged.



SINGAPORE POLICE FORCE



T/20210326/2031

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Report No. T/20210326/2031

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

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 KELVIN KOK JING XIANG

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

26/03/2021 12:53

Officer In Charge Of Case:

TP / HRT /

Sr Staff Sgt NEO ZHI YUAN

Contact No.: 65476079

Classification Of Case:

