# **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 witholding 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.

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   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 10:22 (SGT) Date of Accident 29/03/2021 11:40 (SGT) Exact Location of Accident Tampines Street 23, Singapore Additional Location Information **BLK 201B OPEN SPACE CARPARK** Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

**BMW** 

Vehicle Registration Number SMF1129X

### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner TAN GUAT KWEE NRIC No. SXXXX622E Email Address GUAZHONG33@GMAIL.COM Mobile Phone No (Phone) +65-97361489 Alternative Phone No +65-91084098

## VEHICLE PARTICULARS

Manufacturer

Model 420i 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 1998

# **INSURANCE COMPANY**

Name of Insurance Company FWD Singapore Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number PNPV2020-00009126 Cover Note Number

# DRIVER

Name of Driver **SWOO GUO ZHONG** NRIC No. SXXXX614F

Date Of Birth 06/10/1992 Occupation Indoor Date Of Driving Pass 29/04/2011 Driving experience 9 YEARS AND 11 MONTHS Gender Mobile Number (Phone) +65-91084098 Alt. Phone Number Email Address GUAZHONG33@GMAIL.COM Address BLK 332 TAMPINES ST 32 #07-546 Address complement Postcode 520332 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured Child Does Driver Own Other Vehicles? Nο 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 Was anybody injured in the Accident? Nο Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? Yes Number of Passengers (Including Driver) 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 **Bedok Division Headquarters** Police Station Phone No (Phone) +65-18002440000 Alt. Police Station Phone No (Fax) +65-64443009 Police Station Address 30 Bedok North Road Singapore 469676 Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO ATTACHED STATEMENT RECORDED BY LILY - PROGRESSIVE CAR CARE PTE LTD 67415336 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 SJC1636A

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

### IMPORTANT NOTICE

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- 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)

Lunderstand, 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' law yers/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
- (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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

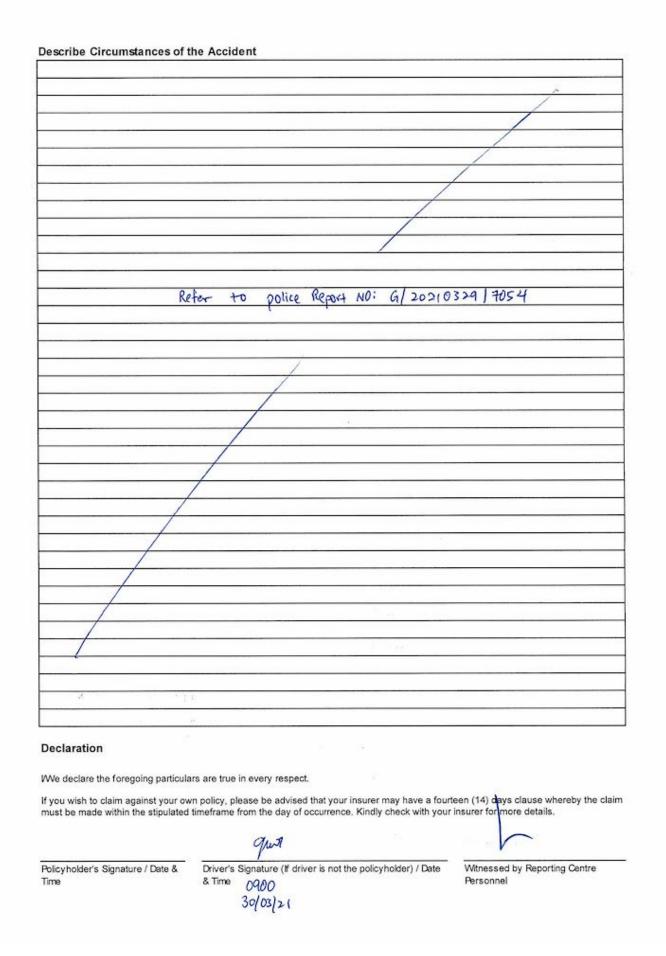
Driver's Signature (If driver is not the policyholder) / Date 0900 & Time

Witnessed by Reporting Centre Personnel

Sketch Plan

30/03/21

SMF 1129 X SJC 1636 A

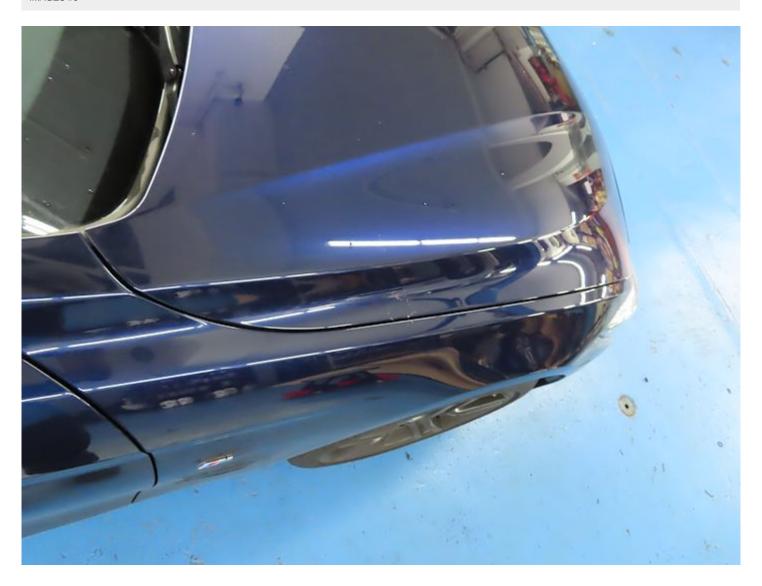




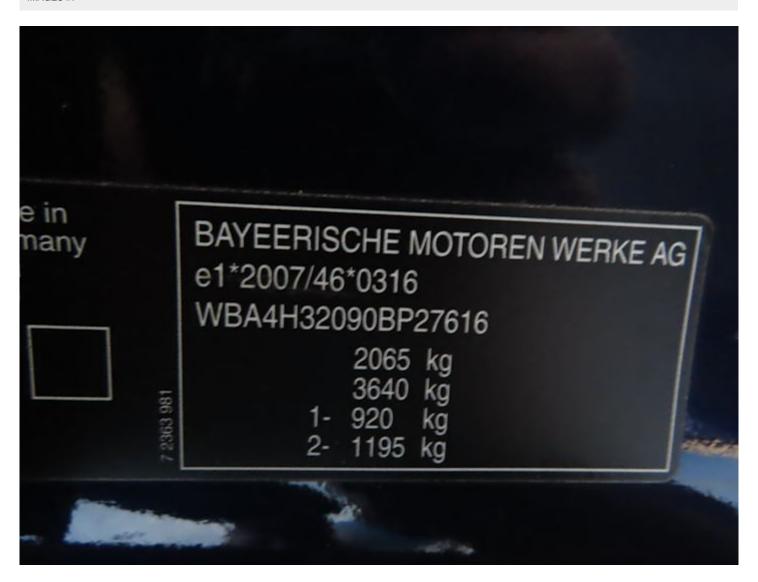


















1 of :

POLICE REPORT (NP299)

Police Station Of Origin Bedok Division HQ 30 Bedok North Road SINGAPORE 469676 Tel No:1800-2440000 Report No. G/20210329/7054

Date/Time Report Made 29/03/2021 19:34	Vide Re	port No.		Station Diary No.
Name Of Informant	Address			
SWOO GUO ZHONG	332 TAMPINES STREET 32 #07-546 SINGAPORE 520332			
ID Type / ID No.	Contact No.			
NRIC NO / S9236614F	Home/O	ffice:	Mobile:	
	91084098		91084098	
Nationality	Email Address			
SINGAPORE CITIZEN	GUOZHONG33@GMAIL.COM			
Occupation	Sex	Age	Date of Birth	Race
Self employed	Male	28	06/10/1992	Chinese
Institution/School Name	Language English			
Date/Time Of Incident	Location Of Incident			
29/03/2021 11:30 - 29/03/2021 12:00	332 TAMPINES STREET 32 #07-546 SINGAPORE			
	520332			

# Brief details.

On 29 March 2021, at about 11.30 Hr, I parked my car at Tampines St 21 201B N2 shopping street car park for lunch.

I came back to my car and noticed the damage on my front right bumper is damaged.

Hence, I exstract the video from my car camera and notice car plate number (SJC 1636 A) hit my car while trying to park, and drove off immediately after the hit.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 29/03/2021 19:34
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp





2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20210329/7054

As there is an upload limit, can I instead whatapp you the full video? Thanks.

Victim			
Person Name	SWOO GUO ZHONG		
ID Type	NRIC NO	ID No	S9236614F
Gender	Male	Age	28
Race	Chinese	Language	English
Occupation	Self employed	Address	332 TAMPINES STREET 32 #07-546 SINGAPORE 520332
Mobile No	91084098	Is Informant A Victim?	Yes
		Victim?	
Person Name	SWOO GUO ZHONG (I	nformant)	

Signature Of Officer Recording The Report:	Signature Of Informant:
Not applicable	The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 29/03/2021 19:34
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	(a) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c