A215H000B / CYCLE & CARRIAGE AUTOMOTIVE PTE LTD TRY DATE & TIME: 17/05/2021 16:10 (SGT)
UBMITTED BY: TAN SHIEH YUEN VERSION: 1 (17/05/2021 16:10 (SGT))



# SINGAPORE ACCIDENT STATEMENT

Please report correctly the details of the accident to speed up the claims process.

This Form must be completed by the Policyholder and/or the Authorised Driver

- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate
- 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.

- 4. The issue and acceptance of the Police for investigation.
  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 afcresaid

#### ACCIDENT STATEMENT

Date of Submission Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

Vehicle Registration Number

17/05/2021 16:10 (SGT) 15/05/2021 19:40 (SGT) Lor 1 Toa Payoh, Singapore **BLK 43 LORONG TOA PAYOH OSCP** Singapore

## EDETAILS OF OWN VEHICLE

SKV7558R

INSURED/POLICYHOLDER Is company? Name Of Registered Owner OH SOON SENG NRIC No ...... SXXXX564Z Email Address BOBBYOH28@GMAIL.COM Mobile Phone No (Phone) +65-94503319 Alternative Phone No +65-94503319 VEHICLE PARTICULARS Manufacturer

Model Stonic Exact purpose for which vehicle was being used at time of Private use Are you claiming under your own insurance policy for repair to your vehicle? Yes Vehicle Category Private car Transmission Auto CC 998

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy No Policy Number 1900099056 Cover Note Number

DRIVER

OH SOON SENG SXXXX564Z

//	
Lata	28/05/1965
of Birth	Outdoor
pation	27/04/1993
e Of Driving Pass	28 YEARS AND 1 MONTH
hving experience	Male
Gender	(Phone) +65-94503319
Mobile Number	+65-94503319
Alt. Phone Number	BOBBYOH28@GMAIL.COM
Email Address	BLK 671B JURONG WEST ST 65 #05-114
Address	DER OF IB CONTROL
Address complement	642671
Postcode	Yes
Is the driver the policyholder?	165
If No, Relationship of the Driver with the Insured	No
Does Driver Own Other Vehicles?	NO
Vehicle Registration Number of Other Vehicle Owned by Driver	
Insurance Company of Other Vehicle Owned by Driver	-
Insurance Company of Other Verlicle Owned by Sixter	
GENERAL INFORMATION OF THE ACCIDENT	
	Hit and run / Vandalism / Damaged whilst parked
Type of Accident	
Weather Conditions	Clear
Road Surface	Dry
All Control of the Co	
OTHER INFORMATION	
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	4
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
Soliciting/orienting decident states	special control and the second section of the
DETAILS OF POLICE ACTION	
DETAILS OF FOLIOL ACTION	
Was the accident reported to the police?	Yes
Police Station Name	Toa Payoh Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002519999
Alt. Police Station Phone No	- > 05 00549740
Police Station Address	93 Toa Payoh Central Toa Payoh Community Building #01-02
	Singapore 319194
Was notice of intended Prosecution given?	No
If yes, against whom?	-
1 = -, 17 page	
CIRCUMSTANCES OF ACCIDENT	
REFER TO ATTACHMENT	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No
DETAILS OF OTHE	R VEHICLE PROPERTY 11
Vehicle Registration Number	GBF7058H
Vehicle Manufacturer	I <b>*</b>
Vehicle Model	•
Vehicle Variant	<b>■</b>
Vehicle Colour	⊼
	정 의 경

4.7	
11	
/ · · · · · · · · · · · · · · · · · · ·	Commercial vehicle
e Category	•
e of Driver	
nact Number	2
LIACS	2
Address complement	2
	2 2
rance Company Name	
	CAR B
Details of property damaged in accident No. Of Passenger (Including Driver)	
No. Of Passenger (including briter)	
TOPTAL & OF OTHER	WEHICLE PROPERTY 2:
DETAILS OF CIRE.	WEITIGHT THE E
Vehicle Registration Number	SMP2100T
Vehicle Manufacturer	
Vehicle Model	
Vehicle Variant	*
Vehicle Colour	¥
Vehicle Category	Private car
Name of Driver	HONG LENG SAN
Contact Number	(Phone) +65-96863998
Address	•
Address complement	•
Postcode	<u>.</u>
Insurance Company Name	÷
Nature Of Damage	
Details of property damaged in accident	CAR C
No. Of Passenger (Including Driver)	-
CONTRACTOR DETAILS OF OTHER	WEHICLE PROPERTY 3
	allowed and the state of the st
	SLA6002H
Vehicle Registration Number	32,000211
Vehicle Manufacturer	•
Vehicle Model	•
Vehicle Variant	
Vehicle Colour	Private car
Vehicle Category	- Illyate cai
Name of Driver	
Contact Number	•
Address	
Address complement	
Postcode	-
Insurance Company Name	
Nature Of Damage	CAR D
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	
The street of th	AC DETAIL CO
WITNES	SS DETAILS:
WITNESS 1	

HONG LENG SAN (Phone) +65-96863998

Phone Email

#### SKETCH PLAN

# IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust 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 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' 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' 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.

fau .

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

A:SKV7558R

B:GBF7058H

C:SMP2100T

B:SLAG002H

A:SKV7558R

scribe Circumsta	ices of the					
POLICE	REPORT	NO ;	E/2021	0515/0	202	

### Declaration

We declare the foregoing particulars are true in every respect.

So.

Policyholder's Signature / Date & Time

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

Ju

Witnessed by Reporting Centre Personnel



Student



1 013 Report No. T/20210515/2106

police Station Of Origin: Toa Payoh N.P.C 93 Toa Payoh Central #01-02 Toa Payoh Community Building SINGAPORE 319194 Tel No: 1800-2519999

REPORT	FA TRAFFIC	ACCIDENT		Station Diary No
Date/Time Report Made: 15/05/2021 22:12		lade:	Vide Report No.:         Station           E/20210515/0202         135	
Informa	nt's Particu	ulars		
	Informant: ON SENG		Address: APT BLK 671B JURONG WE SINGAPORE 642671	EST STREET 65 #05-114
ID Type / ID No.: NRIC NO / S 564Z		64Z	Contact No.: Home/Office:	Mobile: 94503319
National SINGAP	ity: ORE CITIZ	EN	Email:	
Sex: Male	Age:	Date of Birth: 28/05/1965	Type of Informant: Vehicle Owner	Le week Cahaal Nama'
Race: Chinese			Language:	Institution / School Name:
Occupation:			Driving Licence Information:	Date of Expiry:

Class:

General Inform	mation of the Accident	and the second section of the section of the second section of the section of the second section of the	proprieta de la companya del companya del companya de la companya	Type of Location:
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 15/05/2021 19:40	Car Park
Location:				
LORONG 5 T	OA PAYOH			
Weather:		Road Surface:		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume:
Type of Collisi	on:		8	Anyone conveyed by ambulance:

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBF7058H	Lorry					0
SKV7558R	Car				Seriously	0
SMP2100T	Car				Damaged	





Police Station Of Origin: Toa Payoh N.P.C 93 Toa Payoh Central #01-02 Toa Payoh Community Building SINGAPORE 319194 Tel No: 1800-2519999

2 of 3 Report No. T/20210515/2106

CONTINUATION OF REPORT

Details of Perso	n Involved					
Any Pedestrian Ir	volved: No	-	talan dalah kecamalan dalah senden begila ancersa			
No. of Pedestrian	s Injured: NIL		Use of P	edestria	n Cross	sing: NA
Vehicle Owner	The Table 1 and 1		i i i i i i i i i i i i i i i i i i i			
Name	OH SOON SENG		ID N	0.	S4000564Z	
Related Vehicle	SKV7558R (Car)			Cont	act No.	94503319
Hospital/Clinic	NIL			Class Drivir Licen	ng	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc	harge	NIL	
No of Days gran	ted Medical Leave	NIL	Degree of	finjury	NIL	

Brief Details.

On 15/05/2021 at about 1430hrs, I arrived and parked at Blk 43 Lorong 5 Toa Payoh OSCP lot 173. At that point in time, my car (SKV7558R) was intact. At about 2030hrs, I came back to my car and discovered that my car has been damaged and there are Traffic Police (TP) officers around.

I was then informed by the TP officers that a lorry (GBF7058H) had collided into my car and the car parked on my right (SMP2100T) at lot 172. I did not know what had happened and was only told by the vehicle owner of SMP2100T that the lorry had collided into our cars and attempted to run away. However, the lorry driver was eventually called to come back.

I wish to state that I have an in-car camera but it does not record when the car is parked. After the case concluded, the TP officers passed me a case card (E/20210515/0202) and told me to proceed to lodge a police report.





3 of 3

Report No. T/20210515/2106

police Station Of Origin: Toa Payoh N.P.C 70a Toa Payoh Central #01-02 Toa Payoh Community Building SINGAPORE 319194 Tel No: 1800-2519999

CONTINUATION OF REPORT

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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: E / Sgt 2 GARY LEW QI HAN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 15/05/2021 22:12
Officer In Charge Of Case: TP / GIT / Sr Staff Sgt CHONG GUAN FATT Contact No.: 65476083	Classification Of Case:
Authentication Stamp	J L