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Professor Weep / No. ( ) / Non-INC ( ).  TP Particulars: Veh No. ( ) / Non-INC ( ).  Owner / Driver: ( ) Period: ( ) Cover Type: ( ).  Policy No. ( ) Period: ( ) Date: Times )  Confirmed by: ( ) [Note-Est. Status (WO): N: 0-20%; P: 21-79%. P: 80-100%]  Year of Registration: ( ) Warranty: YES ( )/NO ( )  Excess: (\$ ) Londing: \$1,000 ( )/\$2,000 ( )  Outel Market Market Coverner: Customer's Information strictly Confidential & Strictly No refer of repairer.  ( ) Walle-In Customer: Customer's Information strictly Confidential & Strictly No refer of repairer.	)
TP Particulars:  Owner / Driver:  Policy No: ( ) Period: ( ) Cover Type: ( )  Confirmed by: ( ) Date: Time: )  Insured/Driver Liability: ( %) [Note-Est Status (WO): N: 0-20%; P: 21-79% P: 80-100%]  Year of Registration: ( ) Warranty: YES ( )/NO ( )  Excess: (\$ ) Loading: \$1,000 ( )/\$2,000 ( )  Confirmed by: ( ) Cover Type: ( )  Warranty: YES ( )/NO ( )  Confirmed by: ( ) Cover Type: ( )  Period: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Period: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Policy No: ( ) Period: ( ) Period: ( )  Period: ( ) Period: ( ) Period: ( ) Period: ( )  Period: ( ) Period: ( ) Period: ( ) Period: ( )  Period: ( ) Period: ( ) Period: ( ) Period: ( )  Period: ( ) Period: ( ) Period: ( ) Period: ( )  Period: ( ) Period: ( ) Period: ( ) Period: ( )  Period: ( ) Period: ( ) Period: ( ) Period: ( )  Period: ( ) Period: ( ) Period: ( ) Period: ( )  Period: ( ) Period: ( ) Period: ( ) Period: ( )  Period: ( ) Period: ( ) Period: ( ) Period: ( )  Period: ( ) Period: ( ) Period: ( ) Period: ( )  Period: ( ) Period: ( ) Period: ( ) Period: ( )  Period: ( ) Period: ( ) Period: ( ) Period: ( )  Period: ( ) Period: ( ) Period: ( ) Period: ( )  Period: ( ) Period: ( )	
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# **SINGAPORE ACCIDENT STATEMENT**

#### IMPORTANT NOTICE

- 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.

- 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 31/05/2021 11:57 (SGT) Date of Accident 29/05/2021 12:55 (SGT) Exact Location of Accident 452 Ang Mo Kio Ave 10, Block 452, Singapore 560452 Additional Location Information CARPARK Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SMQ3151J

#### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner TEO POH HUA NRIC No SXXXX094H **Email Address** kfchin\_b@hotmail.com Mobile Phone No (Phone) +65-92298885 Alternative Phone No +65-92298885

#### VEHICLE PARTICULARS

Manufacturer Honda Model Shuttle Variant 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? No - Claiming third party Vehicle Category Private car Transmission Auto CC 1496

### INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number DMPCSNW00160452000 Cover Note Number

### DRIVER

Name of Driver KWOK YOKE WAH NRIC No SXXXX921F

Date Of Birth 09/06/1970 Occupation Indoor Date Of Driving Pass 04/06/1993 Driving experience 27 YEARS AND 11 MONTHS Gender Mobile Number (Phone) +65-92298885 Alt. Phone Number Email Address kfchin\_b@hotmail.com Address BLK 831 JURONG WEST STREET 81 #11-256 Address complement Postcode 640831 Is the driver the policyholder? No If No. Relationship of the Driver with the Insured Spouse 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 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 Nanyang Neighbourhood Police Centre Police Station Phone No. (Phone) +65-18007929999 Alt. Police Station Phone No. (Fax) +65-67912972 Police Station Address No. 2 Jurong West Avenue 5 Singapore 649482 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO SKETCH AND POLICE REPORT T/20210530/2068 AND T/20210530/2070 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 **GBJ3248G** Vehicle Manufacturer Toyota Vehicle Model Dyna Vehicle Variant Vehicle Colour Vehicle Category Commercial vehicle

Name of Driver	23
Contact Number	_
Address	_
Address complement	
Postcode	_
nsurance Company Name	_
Nature Of Damage	_
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	_

### SKETCH PLAN

### IMPORTANT NOTICE

- Please report <u>correctly</u> 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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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' 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 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 tawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

	Sient 3100 N/1
Policyholder's Signature / Date &	Driver's Signature (If driver is not the policyholder) / Date Witnessed by Reporting Centre
Time	& Time Personnel
Sketch Plan	BIK 452 Any Mo Kio Are 10
	Asm@315/7
A	B)4BJ3248G
B	
NE I	
(5)	
T Stop 1	
Josep J	

bescribe Circumstances of the Accident
My car was parked at lot 24, of carpark A37, BIK 452 Ang Mo
,
Kia Ave 10 when a long, GBJ 3248G, Reverse and hit my car (A).
I got the video footage from a car parked opposite of mine.
there was nobody in the car during the accident.
I only realised that my cars from portion was damaged when I
got to my car B.
Police empoer 1/2020/2068 & 7/20210530/2070
16

### Declaration

We declare the foregoing particulars are true in every respect. Delany

Policyholder's Signature / Date &

Time

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

Witnessed by Reporting Centre Personnel

PERSUNAL PARTICULARS 12 CE
Date of Accident: 29/05/2021 Time of Accident: 429/05/2021
Vehicle No: Sm Q 31517 Vehicle Make/Mor Manda-Shutfle 1.56
Exact Location of Accident: Carpark of Any Mo Kis Ave lo
Owner's Name/NRIC: Teo Poh Mug / 56846094H
Driver's Name/NRIC: Kwok Yoke Wah /52202921E
Driver's Contact: 92298885 Insurance Co & Policy No: China Taiping / pmpc suwoo 16045
Driver's Email Address: Kf chin kfchin b@ hotmail.com
Relationship between Owner & Driver: Spouse/Children/Friend/Parents/Others specify:
What do you wish to claim (Please circle one only)  1) Own Insurance 2) Other Vehicle (The one you want to claim against) 3) Reporting (For Recording Purposes)
Exact Purpose for which the vehicle was being used at time of accident? (Please circle one only)  Private Use / Work Purpose
Weather Condition & Road Conditions? Clear & Dry / Raining & Wet / After-Rain & Wet / Drizzling & Wet
Occupation Indoor / Outdoor
Any Injuries? (MC of 3 Days or more, police report is required)
Yes / No If Yes, which police station?
The Other Party (Vehicle B) Details  Driver's Name/IC: Vehicle No: Vehicle No:
Insurance Company: Driver's Contact:
(If more than 2 vehicles involved, please indicate the other party vehicle numbers below)
Other Vehicle (Vehicle C):
Independent Witness (If Any): Contact:
Preferred Workshop (If Any): Contact:
<ul><li>* If no proper document are produced, IDAC should not file the report.</li><li>* Information will be discarded after one week.</li></ul>





1 of 3

Report No. T/20210530/2068

Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482

Tel No: 1800-7929999

### REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/05/2021 21:50		ade:	Vide Report No.:	Station Diary No.: 100	
Informant	's Particu	lars			
Name of Informant:			Address:		
KWOK YOKE WAH			APT BLK 831 JURONG WEST STREET 81 #11-256		
The state of the s			SINGAPORE 640831		
ID Type / ID No.:			Contact No.:		
NRIC NO / S2202921E			Home/Office: 92298885 Mobile:		
Nationality:			Email:		
SINGAPORE CITIZEN		EN	7-97		
Sex:	Age:	Date of Birth:	Type of Informant:		
Female	50	09/06/1970	Vehicle Owner		
Race:			Language:	Institution / School Name:	
Chinese					
Occupation	n:		Driving Licence Information:		
STALL VENDOR			Class:	Date of Expiry:	

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 29/05/2021 12:55	Type of Location: Straight Road	
Location: ANG MO KIC	AVENUE 10				
Weather: Clear		Road Surface: Dry		Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light	
The state of the state of		Not Controlled		Ligit	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GBJ3248G	Lorry	ТОУОТА	DYNA 150 5MT	Silver		0
SMQ3151J	Car	HONDA	SHUTTLE 1.5G CVT SENSING	Silver	Seriously Damaged	





T/20210530/2068

2 of 3

Report No. T/20210530/2068

Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482

Tel No: 1800-7929999

### CONTINUATION OF REPORT

### **Brief Details.**

At the above mentioned date and time, at carpark A37, of Block 452, Ang Mo Kio Avenue 10, my parked car was hit in the front by a lorry, GBJ3248G. At 0600hrs, I parked my car in lot 24, of the carpark. Subsequently, I came to drove off my car at around 1315hrs. That's when I saw the dent in my car's right front. The bumper too, was slightly detached from the main body of the car. I checked my in-car video camera, however the video footage ended at 1000hrs. Hence on 30/05/2021, at about 1300hrs, I asked the owner of the car parked opposite for his footage. His car is normally parked there and he too works in the market in the provision shop. His camera was able to show the accident happening at 1256hrs. I did not find any note of apology or contact from the driver of GBJ3248G. The driver came out of the vehicle to check my car, he did not take any action, he did not stay in the area for long, and left the carpark. I did not see the lorry, GBJ3248G, when I came out at 1315hrs. I have the in- car video of the car parked opposite to me, and the photos of the damages done to my car. I am not sure of the estimated cost of the damages.





T/20210530/2068

3 of 3

Report No. T/20210530/2068

Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482

CONTINUATION OF REPORT Tel No: 1800-7929999

### 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 / SC2 KANNAN VENKATESH	Signature Of Informant:
Signature Of Interpreter:	Date/Time:
Not applicable	30/05/2021 21:50
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt STEPHANIE, CHEUNG TSZ YING Contact No.: 962086323 SINGAPORE	Classification Of Case:
POLICE FORCE	
Authentication Stamp	
NP168	



Report No. T/20210530/2070

## Case Summary Form (CSF For NP168)

Manual NP168 Form Serial No T/20210530/2068

Report Number

T/20210530/2070

Vide Report Number

T/20210530/2068

Date/Time of Report Made

30/05/2021 22:08

Place Report Lodged

Traffic Police

Type of Informant

Vehicle Owner

Name of Informant

KWOH YOKE WAH

ID Type / ID No.

NRIC NO / S2202921E

Home/Office

92298885

Mobile

Email

Type of Accident

Non-Injury / Hit and Run

Drink Drive

No

Anyone conveyed by

No

ambulance

Date/Time of Accident

29/05/2021 12:55

Accident Location

ANG MO KIO AVENUE 10

### **Brief Facts.**

I would like to state that the type of accident is between Moving Vehicle and Stationary Parked vehicle. All above mentioned facts are correct.



T/20210530/2070

2 of 2

Report No. T/20210530/2070

### **Continuation of CSF For NP168**

### 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.

Case Sensitivity

No

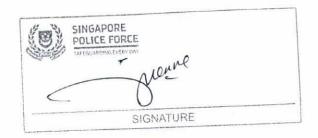
Officer-In-Charge of Case

TP / HRT /

STEPHANIE, CHEUNG TSZ YING

Classification of Case

1) NON-INJURY / HIT AND RUN



Motor Private Car

MX1F

AN0086A

Cov. Type:C

CERTIFICATE No.

DMPCSNW00160452000

Engine No.: L15B6020819 Cha. No.: GK82100693

Index Mark and Registration

SM03151J

Number of Vehicle

AUTOSAFE

2. Name of Policy Holder

TEO POH HUA

Named Drivers Ex Sect. I:

\$\$500.00

Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment

08/11/2020

07/11/2021

Additional Ex Other than Named Drivers: Ex Sect. 1 - Age <= 25

5\$3,000.00

CERTIFICATE OF INSURANCE Motor Varioles (Trird-Party Risks and Compensation) Act (Chapter 180) Motor Vehicles (Third-Party Risks and Compensation) Rules, 1060 Road Transport Act, 1987 (Mellaysia) Motor Varioles (Third-Party Risks) Rules, 1956 (Malaysia)

Ex Sect. 1 - Age >= 26

\$\$500.00

\* Age as at date of accident EX ON WINDSCREEN.

\$\$100.00

5. Persons or Classes of Persons entitled to drive\*

(a) The Policyholder.

4. Date of Expiry of Insurance

(b) Any other person who is driving on the Policyholder's order or with his permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor

#### 6. Limitations as to use:

Use for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled.

One time Walver of Excess for the first \$\$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

HIRE PURCHASE CO.: OCBC BANK LTD

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Fisks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1997 (Malaysia), are not to be included under these headings.

I/We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: CKINSURANCE AGENCY PTE LTD **Authorised Officer** 

**Authorised Signatory** 

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