SN0921670003 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 07/06/2021 12:43 (SGT) SUBMITTED BY: Roslinda Binte A. Wahab VERSION: 1 (07/06/2021 12:43 (SGT))

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 07/06/2021 12:43 (SGT) Date of Accident 27/05/2021 12:00 (SGT) Exact Location of Accident MacPherson Rd, Singapore Additional Location Information **CARPARK LOT 33** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Private use

Private car

No - Claiming third party

Vehicle Registration Number SMF62381

INSURED/POLICYHOLDER

Is company? No

Name Of Registered Owner **CHAN KIT WAYNE** NRIC No SXXXX940C

Email Address WAYNE CHAN80@YAHOO.COM.SG

Mobile Phone No (Phone) +65-97500602

Alternative Phone No +65-97500602

VEHICLE PARTICULARS

Manufacturer Porsche Model Panamera

Variant

Exact purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category

Transmission CC

Auto 2999

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.

Type of Coverage Comprehensive

Fleet Policy

Policy Number DMPCSNW00095392101

Cover Note Number

DRIVER

Name of Driver **CHAN KIT WAYNE** NRIC No SXXXX940C

Date Of Birth 17/11/1980 Occupation Indoor Date Of Driving Pass 09/09/2019 Driving experience 1 YEAR AND 8 MONTHS Gender Mobile Number (Phone) +65-97500602 Alt. Phone Number +65-97500602 Email Address WAYNE CHAN80@YAHOO.COM.SG Address **BLK 146 POTONG PASIR AVE 1** Address complement #04-109 Postcode 350146 Is the driver the policyholder? Yes If No. Relationship of the Driver with the Insured 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 Was anybody injured in the Accident? 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? Nο **DETAILS OF POLICE ACTION** Was the accident reported to the police? Yes Police Station Name Tanglin Division Headquaters Police Station Phone No (Phone) +65-18003910000 Alt. Police Station Phone No (Fax) +65-63964900 Police Station Address 21 Kampong Java Road Singapore 228892 Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLS REFER TO THE POLICE REPORT: E/20210603/7019 ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Nο Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number GY1534F Vehicle Manufacturer Vehicle Model

Commercial vehicle

Vehicle Variant
Vehicle Colour
Vehicle Category

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

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
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- 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.

- (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.

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

Witnessed by Reporting Centre

Sketch Plan

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POLICE REPORT (NP299)

Police Station Of Origin Tanglin Division HQ 21 Kampong Java Road SINGAPORE 228892

Tel No:1800-3910000

Report No. E/20210603/7019

Date/Time Report Made	Vide Rep	ort No.		Station Diary No.
03/06/2021 15:41 Name Of Informant CHAN KIT WAYNE	Address 146 POT 350146	ONG PASI	R AVENUE 1 #04	-109 SINGAPORE
ID Type / ID No. NRIC NO / \$8035940C	Contact No. Home/Office: Mobile: 97500602			
Nationality SINGAPORE CITIZEN	Email Address wayne chan80@yahool.com.sg			
Occupation	Sex Male	Age 40	Date of Birth 17/11/1980	Race Chinese
Interior designer Institution/School Name	Language English			
Date/Time Of Incident 27/05/2021 12:00 - 27/05/2021 15:00	Location Of Incident 146 POTONG PASIR AVENUE 1 #04-109 SINGAPO 350146			4-109 SINGAPORE

Brief details.

On the above said date, I drove my car SME6238L and parked along Macpherson Road carpark lot 33. I left and came back to my car about 2 hrs later. Before moving off, I saw a name card slot in between my wind screen and wiper. I got out to remove it as i do not want it to block my view while driving.

Namecard shows;

Company name: Rico Laboratory International

Address: 71 Ubi Road 1 #08-39 Oxley Bizhub Singapore 408732

Signature Of Officer Recording The Report:	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass.
Not applicable	No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 03/06/2021 15:41
Officer In-Charge Of Case:	Classification Of Case:





POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20210603/7019

Tel: (65) 6742 7880 Fax: (65) 6747 3140 Name: Sean Ng

Designation : Sales Supervisor

Handphone: 94891766

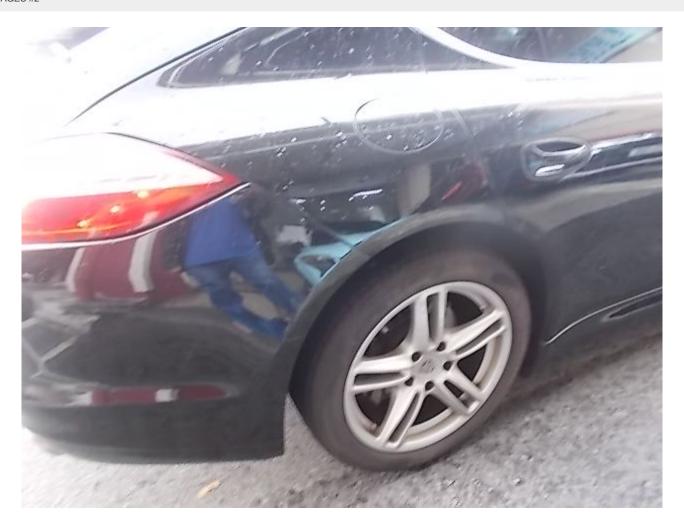
Overleaf of the name card saying "Sorry, just now I parking accidentally scratches your vehicle. Anything you can call me." I then proceed to check on the damage that is done on my car and notice that my right rear car bumper was badly scratched.

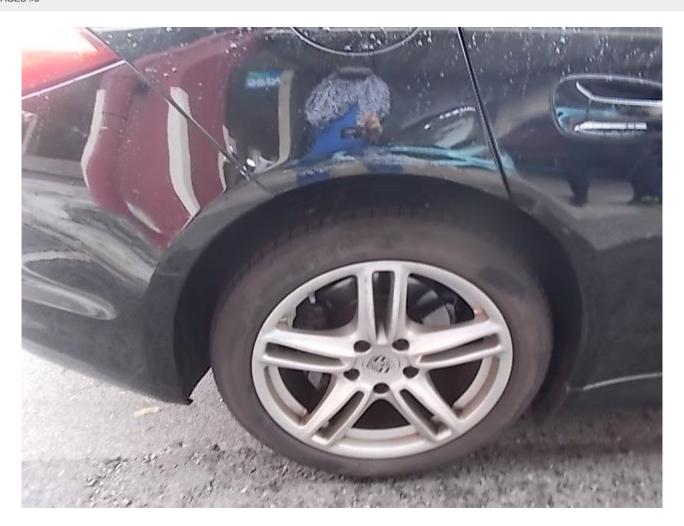
I texted the person later at about 3.55pm. He replied later at about 30 mins later. Sean mention he will look for his workshop to repair the damages and will get back to me tomorrow 28/05/2021. On 28/05/2021 at 3.31pm. He mention "My company say claim insurance". I asked for the car plate number. Sean replied GY1534E.

Subjects Involved	d		A THE RESERVE THE PARTY OF THE
Victim			
Person Name	CHAN KIT WAYNE		000050400
ID Type	NRIC NO	ID No	S8035940C
Gender	Male	Age	40
	Chinese	Language	English
Race	Interior designer	Address	146 POTONG PASIR AVENUE
Occupation	Interior designer	MATERIAL SECTION AND ADDRESS OF THE PARTY OF	1 #04-109 SINGAPORE 350146

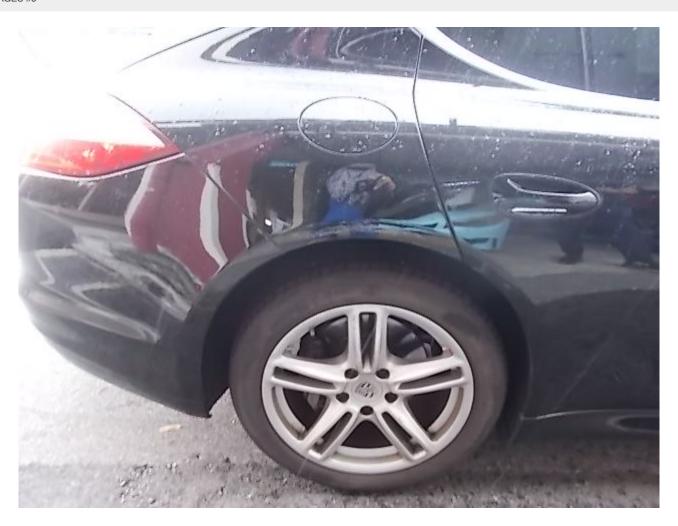
Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 03/06/2021 15:41
Officer In-Charge Of Case:	Classification Of Case:

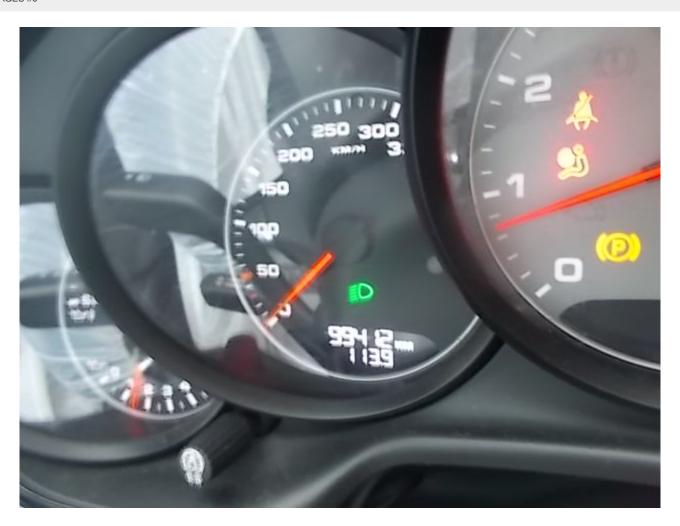


















POLICE REPORT (NP299)

Police Station Of Origin Tanglin Division HQ 21 Kampong Java Road SINGAPORE 228892

Tel No:1800-3910000

Report No	E/2021	0603/	7019
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Date/Time Report Made	Vide Rep	ort No.		Station Diary No.
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ID Type / ID No. NRIC NO / \$8035940C	Contact No. Home/Office: Mobile: 97500602			
Nationality SINGAPORE CITIZEN	Email Address wayne chan80@yahool.com.sg			
Occupation	Sex Male	Age 40	Date of Birth 17/11/1980	Race Chinese
Interior designer Institution/School Name	Language English			
Date/Time Of Incident 27/05/2021 12:00 - 27/05/2021 15:00	Location Of Incident 146 POTONG PASIR AVENUE 1 #04-109 SINGAPO 350146			4-109 SINGAPORE

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Officer In-Charge Of Case:	Classification Of Case:





POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20210603/7019

Tel: (65) 6742 7880 Fax: (65) 6747 3140 Name: Sean Ng

Designation: Sales Supervisor

Handphone: 94891766

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CHAN KIT WAYNE		00000100
NRIC NO	ID No	S8035940C
Male	Age	40
	Language	English
Interior designer	Address	146 POTONG PASIR AVENUE 1 #04-109 SINGAPORE 350146
	CHAN KIT WAYNE NRIC NO Male Chinese	CHAN KIT WAYNE NRIC NO Male Chinese Language

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: 03/06/2021 15:41
Officer In-Charge Of Case:	Classification Of Case:





POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20210603/7019

Mobile No	97500602	Is Informant A Victim?	Yes	
Person Name	CHAN KIT WAYNE (I	nformant)		

Signature Of Officer Recording The Report:	Signature Of Informant: The identity of the person making this
Not applicable	report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 03/06/2021 15:41
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	