

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 08/06/2021 14:47 (SGT)
Date of Accident 28/05/2021 16:45 (SGT)
Exact Location of Accident Koek Rd, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GZ3997J

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner HONG ENGINEERING WORK
Company Reg No 5XXXX808W
Email Address akbbnb@gmail.com
Mobile Phone No (Phone) +65-81128326
Alternative Phone No +65-81128326

VEHICLE PARTICULARS

Manufacturer Nissan
Model Cabstar
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 2953

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMCVSNW00094002004
Cover Note Number -

DRIVER

Name of Driver LEONG WENG HONG
NRIC No SXXXX198C

Date Of Birth	17/04/1979
Occupation	Outdoor
Date Of Driving Pass	26/11/2007
Driving experience	13 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81128326
Alt. Phone Number	-
Email Address	akbbnb@gmail.com
Address	BLK 112 LENGKONG TIGA #04-215
Address complement	-
Postcode	410112
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)	1
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	Orchard Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18007359999
Alt. Police Station Phone No	(Fax) +65-67331934
Police Station Address	51 Killiney Road Singapore 239572
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20210528/2080

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	SML4976R
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

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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' 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.



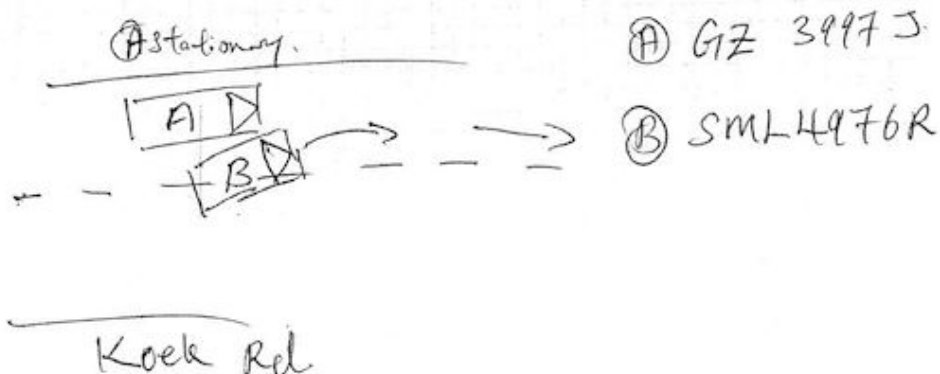
Policyholder's Signature / Date & Time

Kay

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

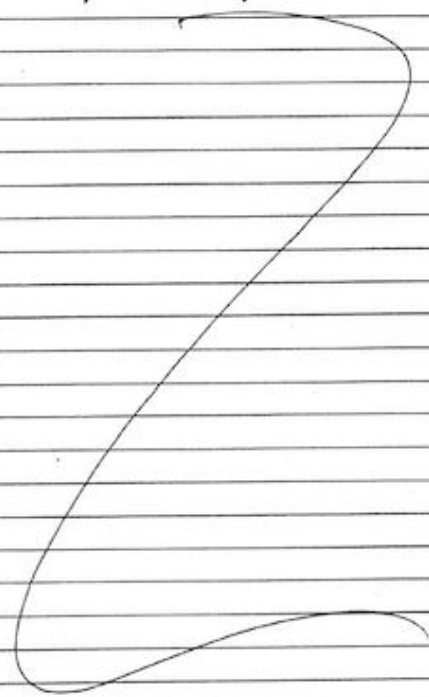
mm 08/06/2021
Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

Refer to police report no T/20210528/2080



Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

Hong

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

08/06/2021

Witnessed by Reporting Centre Personnel

























**SINGAPORE
POLICE FORCE**



T/20210528/2080

Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE 239572
Tel No: 1800-7359999

1 of 3
Report No. T/20210528/2080

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/05/2021 18:31	Vide Report No.: E/20210528/0091	Station Diary No.: 60
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Informant's Particulars

Name of Informant: LEONG WENG HONG			Address: APT BLK 112 LENGKONG TIGA #04-215 SINGAPORE 410112	
ID Type / ID No.: NRIC NO / S7989198C			Contact No.: Home/Office: Mobile: 81128326	
Nationality: MALAYSIAN			Email:	
Sex: Male	Age: 42	Date of Birth: 17/04/1979	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: AIRCON SERVICEMAN			Driving Licence Information: Class: 2B,3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 28/05/2021 16:45	Type of Location: Straight Road
Location: KOEK ROAD				
Lamp Post Number: 2				
Weather: Cloudy	Road Surface: Dry		Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Not Controlled		Traffic Volume: Light	
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
GZ3997J	Lorry				Slightly Damaged	1
SML4976R	Car					0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20210528/2080

2 of 3

Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE 239572
Tel No: 1800-7359999

Report No. T/20210528/2080

CONTINUATION OF REPORT

Driver			
Name	LEONG WENG HONG	ID No.	S7989198C
Related Vehicle	GZ3997J (Lorry)	Contact No.	81128326
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 28/05/2021 at about 4.45pm, I was in my lorry vehicle bearing plate number GZ3997J and parked at lane 2 of the two-way road at Koek Road, near Orchard Plaza lamp post serial number 2. My vehicle was stationary with the handbrake pulled up and the hazard light engaged. I had stopped my vehicle as I wanted to check the map to ensure that I was going to the correct place.

All of a sudden, one black colour car sped through and hit the front right side mirror of my lorry. The black colour vehicle did not stop and instead proceeded towards Killiney Road. I had a shock and alighted from my vehicle shortly after. A passerby then approached me and told me that the vehicle that hit me had the plate number SML4976R. I made a check on my vehicle and discovered the front right signal lights were also damaged. I was not injured and did not require any medical attention, but I had called police for assistance. Traffic police then attended to me and gave me a case card with the report number E/20210528/0091. I wish to add that I have an in-car camera but it was not recording during the incident.

I am lodging this report as advised by the Traffic Police.



**SINGAPORE
POLICE FORCE**



T/20210528/2080

Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE 239572
Tel No: 1800-7359999

3 of 3
Report No. T/20210528/2080

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:
E /
Sgt 3 CHUA HANRONG WILSON

✓

Signature Of Informant:

Handwritten signature

Signature Of Interpreter:
Not applicable

Date/Time:
28/05/2021 18:31

Officer In Charge Of Case:
TP / GIT /
Staff Sgt YAN MINGSHENG DANIEL
Contact No.: 65476252

Classification Of Case:

Authentication Stamp
NP168



SN 172

✓

SIGNATURE