# **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 15/06/2021 12:05 (SGT) Date of Accident 01/05/2021 20:45 (SGT) Exact Location of Accident Pasir Ris Street 71, Singapore Additional Location Information **CARPARK** Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Nissan

Vehicle Registration Number GV7847D

## INSURED/POLICYHOLDER

Is company? Name Of Registered Owner JIAN LI VEHICLES & LORRY SPARE PARTS Company Reg No 5XXXX391C Email Address POCHZHIHUA@GMAIL.COM Mobile Phone No (Phone) +65-96907703 Alternative Phone No +65-96907703

# VEHICLE PARTICULARS

Manufacturer

Model Cabstar Variant Exact purpose for which vehicle was being used at time of Employment accident Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only Vehicle Category Commercial vehicle Transmission Manual CC 3153

# **INSURANCE COMPANY**

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

# DRIVER

Name of Driver **POCH WHATT** NRIC No. SXXXX402H

Date Of Birth 10/12/1958 Occupation Outdoor Date Of Driving Pass 18/06/1979 Driving experience 41 YEARS AND 11 MONTHS Gender Mobile Number (Phone) +65-96907703 Alt. Phone Number Email Address POCHZHIHUA@GMAIL.COM Address **BLK 27 MARSILING DRIVE** Address complement #08-237 Postcode 730027 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured Other 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 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 Kaki Bukit Neighbourhood Police Post Police Station Phone No (Phone) +65-18004429999 Alt. Police Station Phone No (Fax) +65-62444377 Police Station Address Blk 526 Bedok North Street 3 #01-448 Singapore 460526 Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLS REFER TO THE POLICE REPORT:T/20210608/2024 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 SKZ4880H Vehicle Manufacturer Vehicle Model

Private car

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

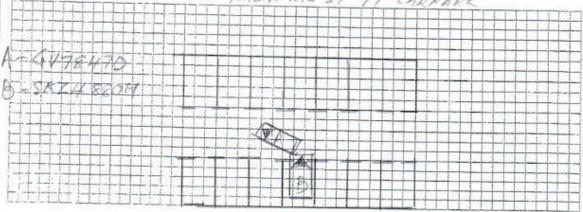
- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material 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
- Any false reporting may be referred to the Police for investigation.
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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' 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
- (ii) investigating the accident and/or my claims;
- (II) 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 & Driver's Signature (if driver is not the policyholder) / Date Witnessed by Reporting Centre Sketch Plan OASIR



Pls refer to	the police report: 1/20210608/2024
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Declaration	
occiaration.	
We declare the foregoing particula	rs are true in every respect.
WHITE A	
	B 116/12/ slym 15/01
110	h D /





2 of 3 Report No. T/20210608/2024

Police Station Of Origin: Kaki Bukit NPP 526 Bedok North Street 3 #01-448 SINGAPORE 460526 Tel No: 1800-4429999

#### CONTINUATION OF REPORT

Driver	AND LONG THE RESERVE	A CONTRACTOR				THE RESERVE AND ADDRESS OF THE PERSON NAMED IN
Name	POCH WHATT		ID No.		S1336402H	
Related Vehicle	GV7847D (Lorry)			/7847D (Lorry) Contact N		96907703
Hospital/Clinic	NIL			Class Drivin Licend Expin	g	Class: 3,4,5 Date of Expiry: NIL
Date Treatment	NIL	Date		harge	NIL	
No. of Days grant	ted Medical Leave	NIL		Degree of Injury NIL		

## Brief Details.

On 01/05/2021, at about 8.45pm I was driving my company's vehicle which is a silver in color Nissan lorry bearing plate number GV7847D. I was at Blk 762A Pasir Ris Street 71 where I had went to the multi storey carpark to park my lorry. I had found a parking lot at the level 4 of the said MSCP as such decided to park the vehicle there. As I was reversing my vehicle, I heard a sound and immediately alighted from the vehicle and made a check. That is when I discovered that the rear left of my vehicle had hit onto the front right side of a Black Toyota car bearing plate number SKZ4880H.

I made a check to the damages and noticed that there are no damages to my vehicle. I saw that the black Toyota car front headlight had shattered. I placed the broken pieces from the headlight aside. I then went back home as I had intended to leave a note however I am unable to write in English. I went back home and sought assistance from my son to write the details on my company's name card. The following morning on 02/05/2021 at abut 11am, I went back to the MSCP at Blk 762A Pasir Ris Street 71 to place the name card on the car that I had hit. I saw that the car had not move yet and placed the name card with my details and to contact me on the windshield of the car near to the driver's side.

I waited for a few days however no one contacted me with regards to the car. On one of the days that I was at the same MSCP, I happened to see the driver of the car that I had hit. I approached the Malay men and told him that I had hit his vehicle the other day and willing to pay for the repair cost. However the men told me that he does not know anything.

That is all.

















Date of Expiry:

1 of 3

Report No. T/20210608/2024

Police Station Of Origin: Kaki Bukit NPP 526 Bedok North Street 3 #01-448 SINGAPORE 460526 Tel No: 1800-4429999

SELF EMPLOYED

REPORT OF A TRAFFIC ACCIDENT Station Diary No.: Vide Report No .: Date/Time Report Made: 12 08/06/2021 12:49 Informant's Particulars Name of Informant: APT BLK 27 MARSILING DRIVE #08-237 SINGAPORE POCH WHATT 730027 Contact No.: ID Type / ID No .: Mobile: 96907703 Home/Office: NRIC NO / S1336402H Email: Nationality: SINGAPORE CITIZEN Type of Informant: Date of Birth: Age: Sex: Driver 10/12/1958 62 Male Institution / School Name: Language: Race: Chinese Driving Licence Information: Occupation:

Class: 3,4,5

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 01/05/2021 20:45	Type of Location Car Park		
Location: PASIR RIS S	TREET 71					
Weather: Clear		Road Surface: Dry		Road Speed Limit:		
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: No Traffic		
One Way		* C. F. S. C. T. C.		Anyone conveyed by		

Details of V	enicle invo		Model	Color	Condition	No of Passenge
Vehicle No.	Туре	Make	Model	COIOI	No	0
GV7847D	Lorry				Damage	
					Slightly	0
SKZ4880H	Car				Damaged	.58

Details of Person Involved	是大型分类。1100mp.2017年2月20日本人公司第2年2月2日本
Any Pedestrian Involved: No	Consider Consider NA
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





Police Station Of Origin: Kaki Bukit NPP 526 Bedok North Street 3 #01-448 SINGAPORE 460526 Tel No: 1800-4429999

2 of 3 Report No. T/20210608/2024

#### CONTINUATION OF REPORT

Driver	APPLICATION OF THE PARTY.	Section 1	II III SANTER		1111111	
Name	POCH WHATT		ID No	).	S1336402H	
Related Vehicle	GV7847D (Lorry)			47D (Lorry) Contac		96907703
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g	Class: 3,4,5 Date of Expiry: NIL
Date Treatment	NIL		Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of Injury NIL			

## Brief Details.

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3 of 3

Report No. T/20210608/2024

Police Station Of Origin: Kaki Bukit NPP 526 Bedok North Street 3 #01-448 SINGAPORE 460526 Tel No: 1800-4429999

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: G / Sgt 2 KHAIRUL ILYAS BIN ISHAK	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 08/06/2021 12:49
Officer In Charge Of Case: TP / GIA / SI TAN JEOK LENG Contact No.: 65476151	Classification Of Case:
Authentication Stamp NP168	