

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 03/07/2021 15:58 (SGT)
Date of Accident 03/07/2021 08:19 (SGT)
Exact Location of Accident Singapore
Additional Location Information OPEN SPACE CARPARK AT JALAN KAYU
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SGD1328U

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner YIN MUN HON (ZHEN WENHAN)
NRIC No S8330903B
Email Address Melvinismejb@gmail.com
Mobile Phone No (Phone) +65-96582370
Alternative Phone No +65-96582370

VEHICLE PARTICULARS

Manufacturer Toyota
Model Estima
Variant -
Exact purpose for which vehicle was being used at time of accident 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 2400

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 5115161151-01
Cover Note Number -

DRIVER

Name of Driver YIN MUN HON (ZHEN WENHAN)
NRIC No S8330903B

Date Of Birth	01/10/1983
Occupation	Indoor
Date Of Driving Pass	03/04/2014
Driving experience	7 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96582370
Alt. Phone Number	+65-96582370
Email Address	Melvinismejb@gmail.com
Address	BLK 526A PASIR RIS STREET 51 #03-509
Address complement	-
Postcode	511526
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	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 vehicle 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	Pasir Ris Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18005852999
Alt. Police Station Phone No	(Fax) +65-65855261
Police Station Address	1 Pasir Ris Drive 4 #01-01 Singapore 519457
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	MULTIPLE VIDEO FILES. WILL EMAIL TO MOTORVIDEO.
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGY8536D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Private car
Name of Driver	MALE CHINESE
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

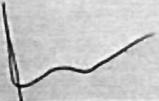
IMPORTANT NOTICE

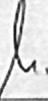
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8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

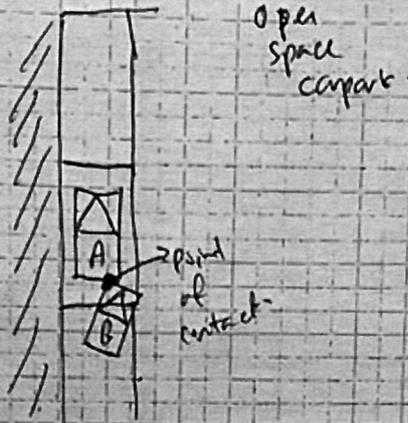
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.


 Policyholder's Signature
 Date & Time: 2/7/2021
 P 1545M


 Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 2/7/2021
 2:15PM


 Reporting Centre Personnel's Signature
 Name: 
 NRIC/FIN No.: 18205 5978385

SKETCH PLAN



A: SGD13284

B: SGY85360

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- Refer to police report.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Date & Time: 2/9/2011
01:51h

Driver's Signature
(if driver is not the policyholder)

Date & Time: 3/9/2011
2:15:45h

Reporting Centre Personnel's Signature

Name: M. M. M.

NRIC/FIN No.: 993585



**SINGAPORE
POLICE FORCE**



T/20210703/2032

3 of 3

Report No. T/20210703/2032

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

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 LOW JAMES GABRIEL

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

03/07/2021 11:09

Officer In Charge Of Case:

TP / HRT /

SI KALESWARI PALANI

Contact No.: 65476902



Classification Of Case:

Authentication Stamp

NP168



**SINGAPORE
POLICE FORCE**



T/20210703/2032

2 of 3

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Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGD1328U	NTUC Income Insurance Co-Operative Limited	5115161151-01	08/01/2021	07/01/2022

Brief Details.

On 03/07/2021, at 0805hrs, I parked my vehicle, a black colour Toyota Estima bearing registration plate number: SGD1328U at the parallel parking lot of Blk 258 Jalan Kayu, open space carpark. I did make a visual check of my vehicle exterior and there was no damage.

At about 0900hrs, I went back my vehicle, I noticed that right side of the rear bumper was slightly dented including the sensor socket protruding out and some minor scratches. As such, I reviewed both my front and rear in car cameras, I discovered a black colour Toyota Camry bearing registration plate number: SGY8536D parked behind my vehicle and left subsequently, at 0853hrs. The rear in car camera footage was shaking when the driver parked inside the parallel parking lot. I believe the driver hit on to my rear bumper.

I wish to state that both front and rear in car cameras captured clearly of the incident.