

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 12/07/2021 17:22 (SGT) Date of Accident 10/07/2021 11:50 (SGT) Exact Location of Accident Singapore Additional Location Information BLK 713 ANG MO KIO OPEN CAR PARK LOT 3 Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Honda

Vehicle Registration Number SJR1078G

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner **GOLDEN SHAW PTE LTD** Company Reg No 2XXXXX976E Email Address den.goldencharter@gmail.com Mobile Phone No (Phone) +65-97736360 Alternative Phone No +65-97736360

VEHICLE PARTICULARS

Manufacturer

Model FIT 1.3G SKYROOF 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? No - Claiming third party Vehicle Category Private hire Transmission Auto CC 1339

INSURANCE COMPANY

Name of Insurance Company Tokio Marine Insurance Singapore Ltd Type of Coverage ThirdParty Fleet Policy No Policy Number 20-MK001053 Cover Note Number

DRIVER

Name of Driver TEO YI HAO, JEFFREY NRIC No. SXXXX963G

Date Of Birth 09/04/1986 Occupation Outdoor Date Of Driving Pass 11/03/2008 Driving experience 13 YEARS AND 4 MONTHS Gender Mobile Number (Phone) +65-82285896 Alt. Phone Number Email Address mak.auburnauto@gmail.com Address BLK 339 UBI AVE 1 #03-887 Address complement Postcode 400339 Is the driver the policyholder? No If No. Relationship of the Driver with the Insured Hirer 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? Nο Was any injured conveyed to hospital by ambulance? Was any other vehicle 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 Traffic Police Police Station Phone No (Phone) +65-65470000 Alt. Police Station Phone No (Fax) +65-65474900 Police Station Address 10 Ubi Avenue 3 Singapore 408865 Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT. NOTE: VEHICLE REPAIR AT OWNER W/SHOP. 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 **UNKNOWN** Vehicle Manufacturer Vehicle Model

Vehicle Variant

Vehicle Colour	-
Vehicle Category	Commercial vehicle
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)	-

WITNESS DETAILS

WITNESS 1

Name	 UNKNOWN
Phone	 -
Email	 _

SKETCH PLAN

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- 7. By the lodgment 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:

- 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)
 - (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:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No :

EstARMIC ShellchPlanFords, V3

SKETCH PLAN	vehicle A-	- SJR1078G.
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Refer to police	Propert	
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DECLARATION SHA		WIO SEPRE
DECLARATION SHA	S	(₹(SIN)®)
1/We declare the foregoing (EG)	oval are true in every respect.	(3)
W 6	30/ NF	* 4
M	<u> </u>	
Policyholder's Signature Date & Time	Driver's Signature	Reporting Centre Personnel's Signature
Date & Time /		
	(If driver is not the policyholder)	Name:
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GOLDEN SHAW PTE LTD

85 COUNTRYSIDE ROAD S(789828) UEN: 201727976E

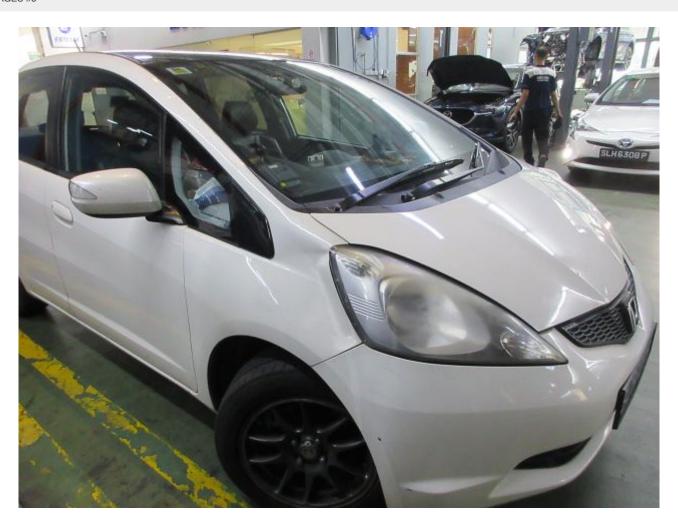
ANNEX A

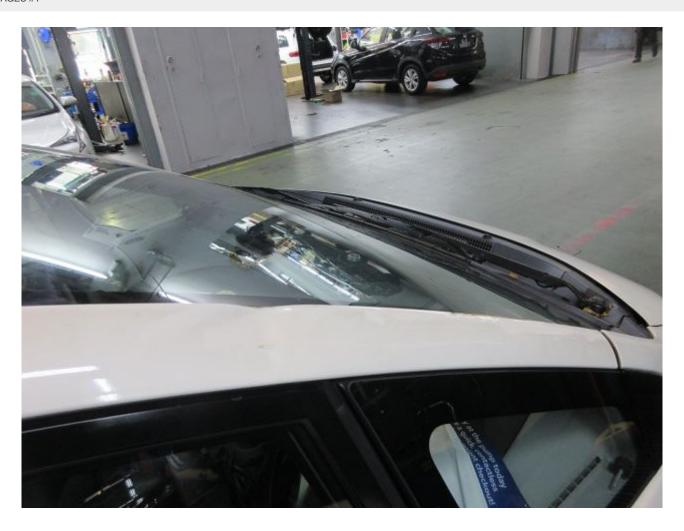
CAR RENTAL TERMS AGREEMENT

		action of problems
Car Registration Number	. SJR 1078 G	
Car Registration Number Make & Model	Honda Fit skyroof.	
Rental Rate	. \$300 .	
	·	Apphage 3 than go
Deposit iPlus+	Casily Iralisier	
	: Silver / Gold	back \$310 per week.
Excess	·	-1
Date of Collection	. 30 / 10 / 20 20	James
ate to Return	: 30/11/2021	
Duration Term	:	Marine and Applications and the
ouration reini	· year(s) month(s)	
Hirer Details	: (MAIN / RELIEF)	
Name (as per NRIC)	: Teo Y: Hao, Jeffrey (2ho	ang Ychao)
NRIC/License No.	: 5 8 6 0 8 9 6 3 9)
Address	: BLE 359, UBT AVEI, 40	23-887 8 100339
Date of Birth	9/04/1986	2 001, 5 100-1
Contact Number	: 82285896	
E-Mail	: dr 32m3rz Camsil.com	78000 AV - 10100 AV -
Bank A/C	: 188-22710-4	
1 12 12 12 12 12 11		10-01-20-00-20-00-20-00-20-00-20-0 -
Next of Kin Details	. TEO GIVE BONG	
ame (as per NRIC)	" was an arranged to the same and the same a	
Relationship	: There	
NRIC/License No.	: 81537141B	
Address	-	
Date of Birth	. 9637 5887	11574 15 11 11 1 2 2 3 5 7 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Contact Number	:	
Refer to ANNEX B – Hirer's Ob	ligations & Use of Vehicle	
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(V)	(\$\(\frac{2}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)	Janua
Signature of Hirer	(Sala ()	Company Representative
1 10000	VOEV	Southard trebiesetterize
Date: 31/10/3000		
Updated as at 07 August 2020.		

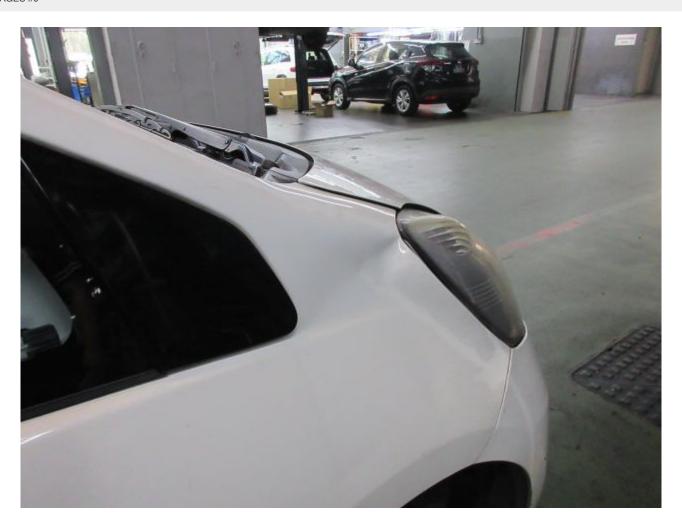


















Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

T/20210712/7011

Report No. T/20210712/7011

REPORT OF A TRAFFIC ACCIDENT

	ne Report N 121 13:54	/lade:	Vide Report No.:	Station Diary No.:	
Informa	nt's Partic	ulars			
	Informant: HAO, JEFF		Address: 339 UBI AVENUE 1 #03-887 SINGAPORE 400339		
	D Type / ID No.: NRIC NO / S8608963G		Contact No.: Home/Office: Mobile: 82285896		
	1		Email: mak.auburnauto@gmail.com		
Sex: Male	Age: 35	Date of Birth: 09/04/1986	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation:			Driving Licence Information: Class:	Date of Expiry:	

General Inform	nation of the Accident			
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 10/07/2021 11:50	Type of Location: Car Park
Location: ANG MO KIO	AVENUE 6		70	
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collis Moving Vehic	ion: le Against - Parked Vehic	le		Anyone conveyed by ambulance: No

Vehicle No.	Туре	Make	Model	Color	Conditio	No of
SJR1078G	Car		and the same of th			0

Details of Person Involved	
Any Pedestrian Involved: No	
No, of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



T/20210712/7011

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20210712/7011

CONTINUATION OF REPORT

Driver			AND SWILL ASSURE		
Name	TEO YI HAO, JEFF	REY		ID No.	S8608963G
Related Vehicle	SJR1078G (Car)			Contact No.	82285896
Hospital/Clinic	NIL			Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL Date		Date	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	NIL	

Brief Details.

On 10 July around 1115Hrs, I parked my rental car bearing SJR1078G at the open area carpark below block 713 Ang Mo Kio and went to do some errands. I then came back to my car around 1150Hrs on the same day, I realized that my front right side of my vehicle has been damaged but there was no other vehicle around. There was a foreign worker from POWA General Services Pte Ltd who told me that there was a container truck from DA Engineering Pte Ltd which was moving and a wooden plank fell out and dropped on my car. I then called the police to report a hit and run accident. After that the police told me that they had open a case for me under case number F/20210710/0218.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20210712/7011

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

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: 12/07/2021 13:54
Officer In Charge Of Case: TP / TPHQ / MUHAMMAD NOOR BIN ABDUL RAHMAN Contact No.: 65476201	Classification Of Case:

NP168

Authentication Stamp

