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.
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	10/08/2021 14:31 (SGT)
Date of Accident	07/08/2021 12:20 (SGT)
Exact Location of Accident	301 Ubi Ave 1, Block 301, Singapore 400301
Additional Location Information	OPEN CAR PARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMT4444S

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ONG YOKE SOON
NRIC No	SXXXX872E
Email Address	ONGYOKESOON0516@GMAIL.COM
Mobile Phone No	(Phone) +65-94741324
Alternative Phone No	(Home) +65-94741324

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Wish
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	1794

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5110865298
Cover Note Number	-

DRIVER

Name of Driver	ONG YOKE SOON
NRIC No	SXXXX872E

Date Of Birth	16/05/1984
Occupation	Indoor
Date Of Driving Pass	18/03/2003
Driving experience	18 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94741324
Alt. Phone Number	(Home) +65-94741324
Email Address	ONGYOKESOON0516@GMAIL.COM
Address	BLK 605 HOUGANG AVE 4 #04-183
Address complement	-
Postcode	530605
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	Bedok Division Headquarters
Police Station Phone No	(Phone) +65-18002440000
Alt. Police Station Phone No	(Fax) +65-64443009
Police Station Address	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

AS PER POLICE REPORT NO. G/20210807/7036.

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	FILE TOO LARGE
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YM9315T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Goods 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)	-

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:

   (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.

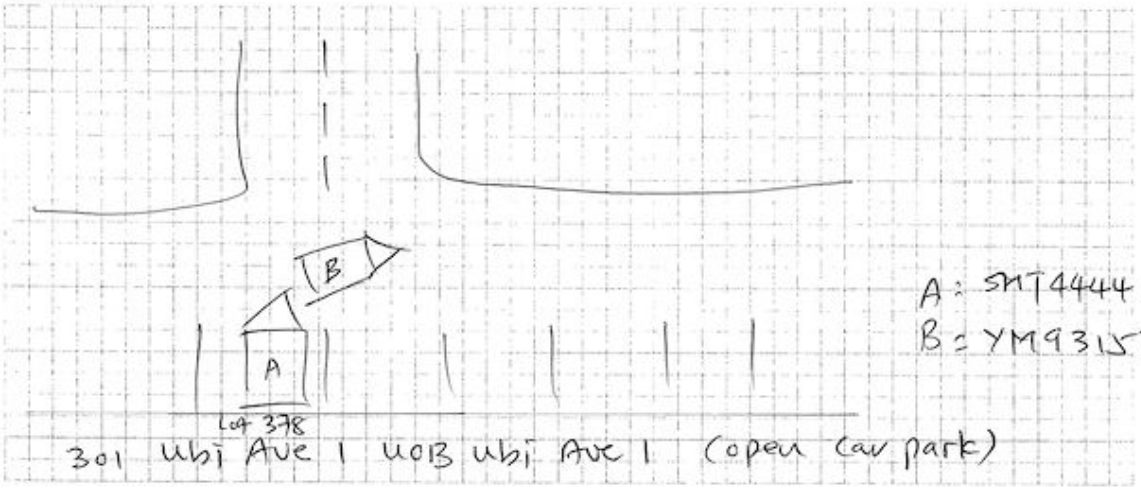
   (e) the information so collected under (d) above may be shared / disclosed:

   (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: 10/8/21	Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per police report No. 6/20210807/7036.

DECLARATION

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

Policyholder's Signature
Date & Time: 10/8/21

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

MODERN AUTOMOTIVE PTE LTD
GST Reg. No. 200501102H

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

IMAGES

IMAGES #2

IMAGES #3

IMAGES #4

IMAGES #5

IMAGES #6

IMAGES #7


TOYOTA MOTOR CORPORATION JAPAN
MODEL ZNE10R-HPPNK
ENGINE 1ZZ-FE 1794 mL
FRAME No. JTDER12W903000449
COLOR 1E7 TRIM FK16 PLANT A41 OPTION 865
TRANS /AXLE U341E -02A

SINGAPORE POLICE FORCE

G/20210807/7036

POLICE REPORT (NP299)

Report No. G/20210807/7036

Police Station Of Origin
Bedok Division HQ
30 Bedok North Road SINGAPORE 469676
Tel No:1800-2440000

Date/Time Report Made	Vide Report No.	Station Diary No.
07/08/2021 19:30		

Name Of Informant ONG YOKE SOON	Address 605 HOUGANG AVENUE 4 #04-183 SINGAPORE 530605			
ID Type / ID No. NRIC NO / S8414872E	Contact No. Home/Office:	Mobile: 94741324		
Nationality SINGAPORE CITIZEN	Email Address ONGYOKESOON0516@GMAIL.COM			
Occupation Sales and marketing manager	Sex Male	Age 37	Date of Birth 16/05/1984	Race Chinese
Institution/School Name	Language English			
Date/Time Of Incident 07/08/2021 12:20 - 07/08/2021 12:20	Location Of Incident 301 UBI AVENUE 1 UOB UBI AVE 1 SINGAPORE 400301			

Brief details.

MY CAR WAS PARKED AT THE MENTIONED ADDRESS. LOT NUMBER 378. AS I AM WORKING AT THIS AREA THUS MY CAR IS ALWAYS PARKED THERE TILL I ENDED WORK. AFTER MY SHIFT AT AROUND 6:20PM WHEN I WENT TO MY CAR AND REALISED MY FRONT RIGHT SIDE BUMPER WAS HIT BY A LORRY. I RETRIEVED THE INCIDENT VIDEO FROM MY CAR DASH CAM AND FOUND OUT A LORRY BEARING CAR PLATE NUMBER YM9315T WAS REVERSING HIS VEHICLE AND HIT MY VEHICLE. UPON VIEWING THE WHOLE VIDEO, THE DRIVER DID NOT LEAVE A NOTE

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: 07/08/2021 19:30
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp

SINGAPORE POLICE FORCE

G/20210807/7036

POLICE REPORT (NP299) **CONTINUATION OF REPORT**

Report No. G/20210807/7036

OR CALL ME(I HAVE A NAME CARD PLACED IN MY CAR) TO INFORM ABOUT THE ACCIDENT. I HAVE ALL THE VIDEO & PHOTOS EVIDENT SAVED ON PHONE.

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: 07/08/2021 19:30
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp