SC1G211K000B / CHENG HOE MOTOR PTE LTD[768761] ENTRY DATE & TIME: 20/01/2021 17:57 (SGT) SUBMITTED BY: CHIONG BENG CHOON VERSION: 1 (20/01/2021 17:57 (SGT))



SINGAPORE ACCIDENT STATEMENT

1. Please report correctly the details of the accident to speed up the claims process.

This Form must be completed by the Policyholder and/or the Authorised Driver
 Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate

3. Information provided must be as truthful and accurate as possible. Any willul misrepresentation of materials of materials and provided must be as truthful and accurate as possible. Any 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	20/01/2021 17:57 (SGT)
Date of Accident	18/01/2021 15:10 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JURONG HILL OPEN CARPARK
Country/State of Loss	Singapore

DETAILS O	F OWN VEHICLE
Vehicle Registration Number	SLV6640E
INSURED/POLICYHOLDER	
Is company? Name Of Registered Owner Company Reg No Email Address Mobile Phone No Alternative Phone No	Yes ROYZEL 74 5XXXX760E leroy.mclaren@gmail.com (Phone) +65-97909339 +65-97909339
VEHICLE PARTICULARS	

Honda

VEHICLE PARTICULARS

Manufacturer

Model	SHUTTLE 1.5G CVT
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

INSURANCE COMPANY

Name of Insurance Company	NTUC
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5097141757-03
Cover Note Number	9/1/21-8/1/22

DRIVER

Name of Driver	LEE KOK KIONG (LI GUOQIANG)
NRIC No	SXXXX601E
Date Of Birth	06/05/1974
Occupation	Indoor

Date Of Driving Pass 24/11/1994 Driving experience 26 YEARS AND 2 MONTHS Gender Mobile Number (Phone) +65-97909339 Alt. Phone Number **Email Address** leroy.mclaren@gmail.com Address BLK 784C WOODLANDS RISE #07-42 Address complement Postcode 733784 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Other 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 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) 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? Police Station Name Woodlands East Neighbourhood Police Centre Police Station Phone No (Phone) +65-18007679999 Police Station Address 3 Woodlands Drive 63 Singapore 737890 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT 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 SMF8666R Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver

Contact Number Address

mT/118119-001

SKETCH PLAN

1. VEHICLE NO : SLV 6640 E

2.INSURER CO: HTUL

3.ACCIDENT

DATE & TIME: 18/60

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
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The 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.
- 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 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' 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

ROYZEL 74

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Time

PLEASE TURN OVER

OPEH CARPARK SLV 6640E
SMF8666R
SMFOODIX
THE ACCIDENT
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Rose Contraction of the Contract
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(2)
Mer.
K,
/
nsurer may have 14days Time Frame for you to submit an Own Damage Clair
hensive policy. Please check with your policy for more information.
s are true in every respect.
1) 20/1/21
20/1/2021
Driver's Signature Reporting Centre Personnel's Signature
Driver's Signature (If driver is not the policyholder) Date & Time: / Reporting Centre Personnel's Signature Name: Flee da (NRIC/FIN No.:





Police Station Of Origin: Woodlands East N.P.C. 3 Woodlands Drive 63 SINGAPORE 737890 Tel No: 1800-7679999

1 of 3 Report No. T/20210120/2021

REPORT OF A TRAFFIC ACCIDENT

Date/Tin 20/01/20	ne Report N 021 10:45	Made:	Vide Report No.:	Station Diary No.:	
COKON T				The State of the S	
LEE KO	Informant: K KIONG		Address: APT BLK 784C WOODLANDS RISE #07-42 SINGAPORE 733784		
ID Type NRIC NO	/ ID No.: D / S74146	01E	Contact No.: Home/Office: Mobile: 97909339		
National SINGAP	ity: ORE CITIZ	EN	Email:		
Sex: Male	Age:	Date of Birth; 06/05/1974	Type of Informant:		
Race: Chinese	2		Language:	-Institution / School Name:	
Occupat Self-Emp			Driving Licence Information: Class: 3,4	Date of Expiry:	

	Contract Con			The production of the second
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 18/01/2021 15:10	Type of Location: Car Park
Location: JURONG HILL		- × 7 - ×	1979 17202 1 10.10	
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision Moving Vehicle	n: Against - Parked Ve	ehicle	•	Anyone conveyed by ambulance: No

		Maka			4	
SLV6640E	Car	HONDA	SHUTTLE 1.5G CVT	Red	Slightly Damaged	0
SMF8666R	Car	MERCEDES BENZ	E200 AVG (R18 LED)	Blue	Damaged	0

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





T/20210120/2021

2 of 3

Report No. T/20210120/2021

Police Station Of Origin: Woodlands East N.P.C. 3 Woodlands Drive 63 SINGAPORE 737890

Tel No: 1800-7679999

073 5 Prime. CONTINUATION OF REPORT

Name al abab	1			ID No.	\$7414601E
Related Vehicle	SLV6640E (Car)			Contact No	97909339
Hospital/Clinic	NIL -			Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment No. of Days gran	NIL ted Medical Leave	NIL	Date Disc Degree of	harge NIL	

Brief Details.

On 18/01/2021 at about 1230hrs, I parked my car (SLV6640E) at an open carpark at Jurong Bird Park area. Everything was intact and nothing was amiss.

On the same day at about 1530hrs, I retrieved my car and discovered that there was a damage on the rear of my car. There was no vehicle behind my car. I checked my in-car camera and discovered that on 18/01/2021 at about 1510hrs, there was a car (SMF8666R) that reversed and hit onto the rear of my car. After hitting my car, the car drove slightly forward. The driver, who is a Chinese female subject, exited the car and took her items from her car boot.





3 of 3

Report No. T/20210120/2021

Police Station Of Origin: Woodlands East N.P.C. 3 Woodlands Drive 63 SINGAPORE 737890 Tel No: 1800-7679999 **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.

			17 × 1	
Signature Of Officer Recording L / Sgt 3 MUHAMMAD SYAZRUL MOHD MASHARUDIN		Signature Of Informa	ant:	
Signature Of Interpreter: Not applicable		Date/Time: 20/01/2021 10:45		a
Officer In Charge Of Case: TP / HRT / SI KALESWARI PALANI Contact No.: 65476902		Classification Of Cas	se:	
Authentication Stamp NP168	1 Sharpeparen	ala Maria	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	