

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 12/11/2021 13:22 (SGT)
Date of Accident 11/11/2021 18:00 (SGT)
Exact Location of Accident Baghdad St, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJM865J

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner SHAUN DOMINIC RISHI
NRIC No S8330878H
Email Address shaun.d.rishi@gmail.com
Mobile Phone No (Phone) +65-98504190
Alternative Phone No +65-98504190

VEHICLE PARTICULARS

Manufacturer Mitsubishi
Model Lancer
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 Manual
CC 2000

INSURANCE COMPANY

Name of Insurance Company FWD Singapore Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number PNPV2020-00012030
Cover Note Number -

DRIVER

Name of Driver SHAUN DOMINIC RISHI
NRIC No S8330878H

Date Of Birth	01/10/1983
Occupation	Outdoor
Date Of Driving Pass	13/06/2016
Driving experience	5 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98504190
Alt. Phone Number	+65-98504190
Email Address	shaun.d.rishi@gmail.com
Address	BLK 114 PASIR RIS ST 11 #03-585
Address complement	-
Postcode	510114
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)	1
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	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?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT: T/20211111/7040

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	SKC3457A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	-

SKETCH PLAN**IMPORTANT NOTICE**

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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 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.


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Describe Circumstances of the Accident

REFER TO POLICE REPORT

REFER TO POLICE REPORT

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre
Personnel

hello,

a red mercedes SKC3457A
hit the back of your car
and drove away.

We were just passerbys who saw
it happen. Sorry couldn't get a
picture/video.



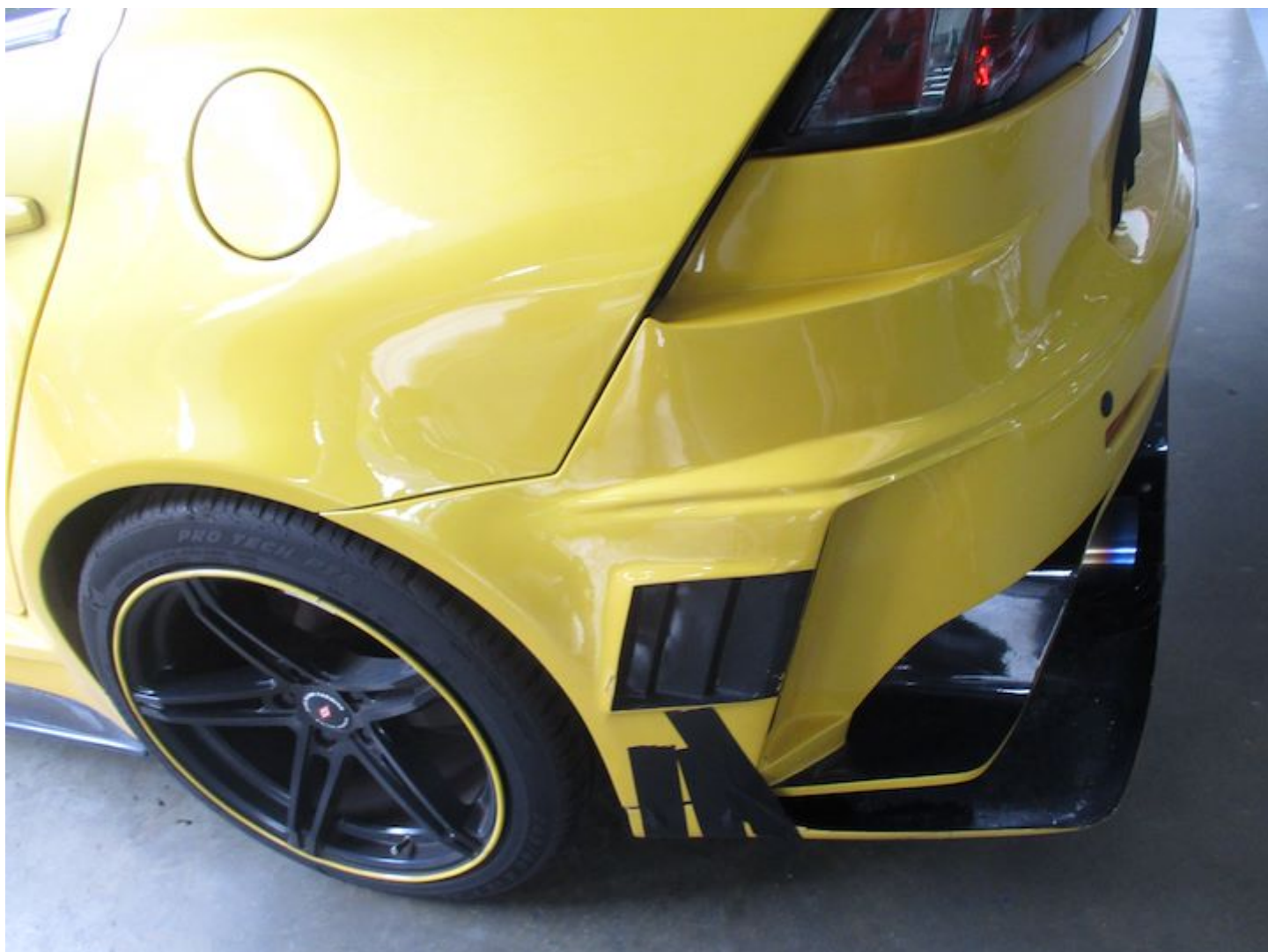
























**SINGAPORE
POLICE FORCE**



T/20211111/7040

1 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20211111/7040

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/11/2021 22:58		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: SHAUN DOMINIC RISHI			Address: 114 PASIR RIS STREET 11 #03-585 SINGAPORE 510114		
ID Type / ID No.: NRIC NO / S8330878H			Contact No.: Home/Office: Mobile: 98504190		
Nationality: SINGAPORE CITIZEN			Email: shaun.d.rishi@gmail.com		
Sex: Male	Age: 38	Date of Birth: 01/10/1983	Type of Informant: Vehicle Owner		
Race: Indian			Language: English		Institution / School Name:
Occupation: Cabin attendant/steward			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Drink & Drive	Drink Drive: Yes	Date/Time of Accident: 11/11/2021 18:00	Type of Location: Car Park
Location: BAGHDAD STREET				
Weather: Cloudy		Road Surface: Dry	Road Speed Limit: 10 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SJM865J	Car	MITSUBISHI	Lancer ex	Yellow	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJM865J	FWD Singapore Pte. Ltd	PNPV2020-00012030	20/12/2020	21/12/2021



**SINGAPORE
POLICE FORCE**



T/20211111/7040

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20211111/7040

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Vehicle Owner			
Name	SHAUN DOMINIC RISHI	ID No.	S8330878H
Related Vehicle	NIL	Contact No.	98504190
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

Dear Sir/Madam,

My name is Shaun Rishi..I am a season holder of Carpark B0087 (Kampong Glam).

Today 11Nov2021, I experienced a hit and run which cause damaged to my car. i am not sure about the time frame but I believe it happened in the late afternoon as I went to the carpark at 1830pm and saw the damage. I have an eye witness that saw it happen and gave me the licence plate number of the car that caused this accident. It's a Red Mercedes licence number SKC3457A. The witness couldn't catch it on video as he drive sped off quickly.

I believe the carpark camera that is facing the exit gantry has caught the footage of the accident. I sincerely urge your assistance to bring justice to such inconsiderate drivers.

Please I urge you to help me in catching the culprit as it is unfair for such drivers to be let off.

Stay safe always.

Best regards,
Shaun



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20211111/7040

3 of 3

Report No. T/20211111/7040

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: 11/11/2021 22:58
Officer In Charge Of Case: TP / TPIB / YEO KIA HUAT Contact No.: 65476162	Classification Of Case:

NP168



YOUR EXECUTIVE CAR INSURANCE SUMMARY

Please call +65-6322-2072 for FWD Emergency Assistance
if Your Car breaks down or is involved in an accident.
All accidents must be reported within 24 hours or the next working day of the incident
regardless of whether it will lead to a claim.

POLICY NUMBER : PNPV2020-00012030

About this policy

Premium paid	: S\$1,065.89	Coverage start date	: 22/12/2020
(Inclusive of GST)		Coverage end date	: 21/12/2021
Who is insured to drive:	: You and any Authorised Driver		
Policy Type	: EXECUTIVE		

About you (As the policyholder)

Your name	: Shaun Dominic Rishi		
Address	: 114 Pasir Ris Street 11 03-585 Singapore 510114		
Email	: shaun.d.rishi@gmail.com		
NRIC/FIN	: S8330878H	Date of birth	: 01/10/1983
Marital status	: Single	Gender	: Male
Current no claims discount	: 50%	Mobile Number	: 98504190
Years of driving experience	: Three or more	Certificate of merit	: Yes

About your car

Car make and model	: MITSUBISHI LANCER 2.0
Year of first registration	: 2008
Car plate number	: SJM865J
Issued on:	: 15/12/2020

Khor Kee Eng
Chief Executive Officer
FWD Singapore Pte Ltd

Please refer to contract for specific terms, conditions
and exclusions of this policy.

Please immediately inform us at +65-6820-8888
or email us to contact.sg@fwd.com if any details in
this Car Insurance Summary need to be changed.