

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 22/11/2021 15:52 (SGT)
Date of Accident 21/11/2021 21:00 (SGT)
Exact Location of Accident Lor Ah Soo, Singapore
Additional Location Information CARPARK
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLK7333T

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner NG BEE LAY
NRIC No SXXXX693F
Email Address ric_2332@hotmail.com
Mobile Phone No (Phone) +65-96657464
Alternative Phone No +65-96657464

VEHICLE PARTICULARS

Manufacturer Honda
Model Hr-v
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 1500

INSURANCE COMPANY

Name of Insurance Company MSIG Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number A 300409778 QMX
Cover Note Number -

DRIVER

Name of Driver LIM CHER KHIANG
NRIC No SXXXX577F

Date Of Birth	22/10/1964
Occupation	Indoor
Date Of Driving Pass	18/10/1984
Driving experience	37 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-94515535
Alt. Phone Number	-
Email Address	ric_2332@hotmail.com
Address	BLK 134 LORONG AH SOO
Address complement	#04-460
Postcode	530134
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	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	3
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	Hougang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004890999
Alt. Police Station Phone No	(Fax) +65-63128989
Police Station Address	60 Hougang Ave 9 Singapore 538775
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO THE POLICE REPORT : T/20211121/2071

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	SKZ989E
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	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	UNKNOWN
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	-
No. Of Passenger (Including Driver)	-

WITNESS DETAILS

WITNESS 1

Name	LOUIS HUANG
Phone	(Phone) +65-98209184
Email	-

SKETCH PLAN

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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.

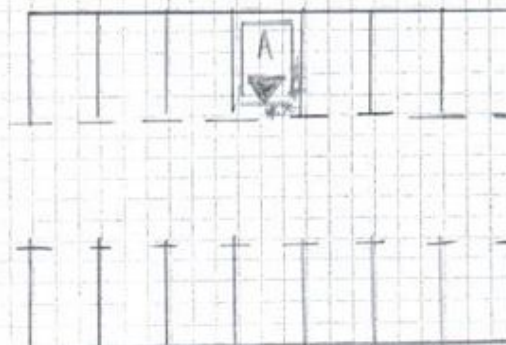
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

A - SLK7333T
B - SKZ989E
C - UNKNOWN



COFFEE SHOP BLK 134

Describe Circumstances of the Accident

Plc refer to the police report: T/2021/121/2071

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &
Time

[Signature] 22 Nov 2021

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

[Signature] 22/11/21

Witnessed by Reporting Centre
Personnel



**SINGAPORE
POLICE FORCE**



T/20211121/2071

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

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Report No. T/20211121/2071

CONTINUATION OF REPORT

Vehicle Owner			
Name	LIM CHER KHIANG	ID No.	S1634577F
Related Vehicle	NIL	Contact No.	94515535
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

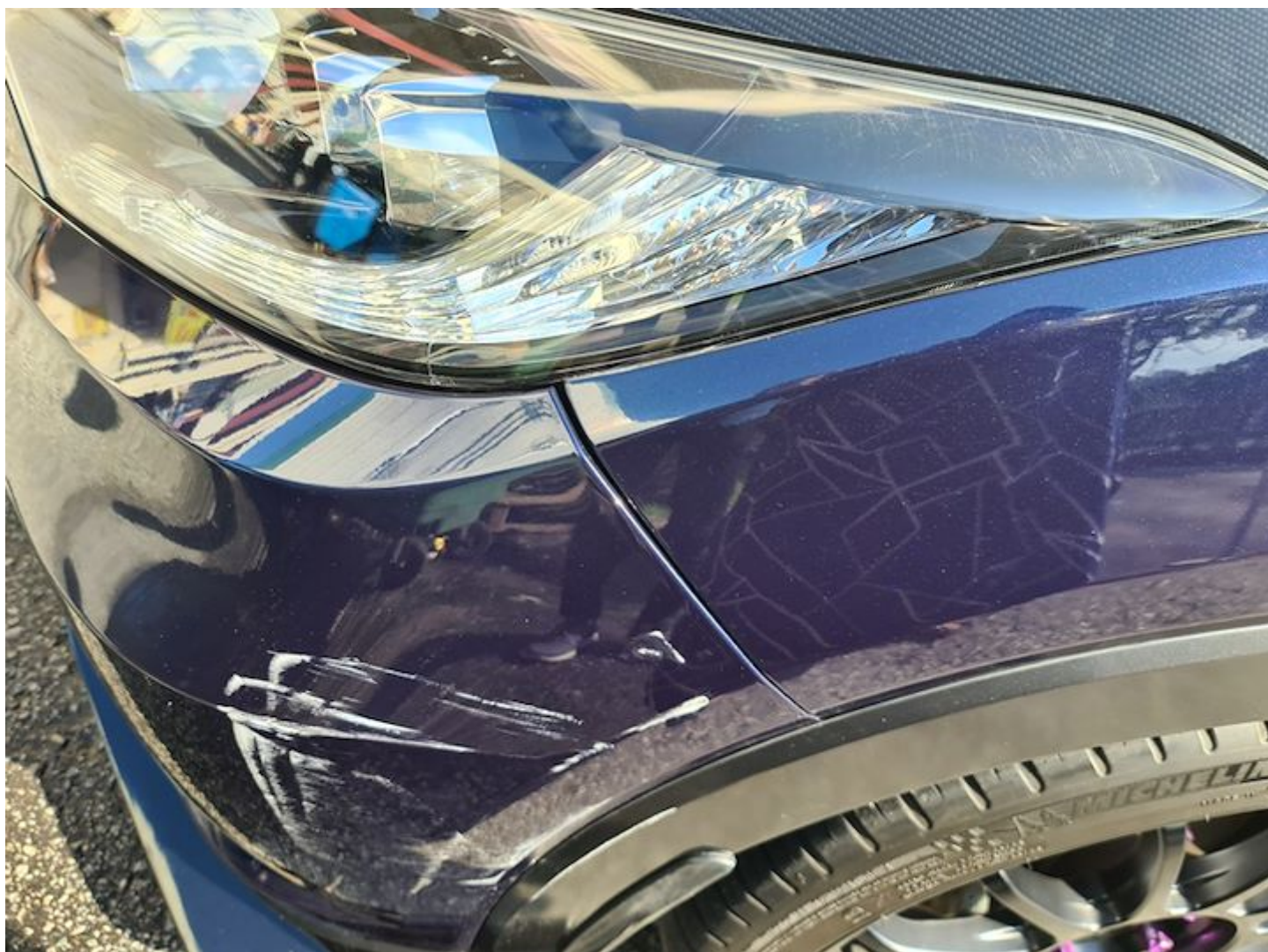
On 21/11/2021 at about 2100hrs, I was at home when my neighbor came to my unit and informed me somebody had knock onto my parked vehicle at carpark lot 261. I immediately went down to check, the damages are on my left side bumper and left side passenger door which had multiple scratches. I then immediately check with my neighbor whom inform that her friend Louis Huang +65 9820 9184 saw the incident happening and can be a witness if required to. He then informed me that the vehicle SKZ989E was trying to park beside another vehicle and they noticed it was trying to park for several times before hearing a knock onto the vehicle. The car then immediately drove off without stopping but during this, it knocked onto my vehicle. Afterwards, the vehicle left the carpark without leaving any contact. I do not have a dashboard camera that have captured the incident.



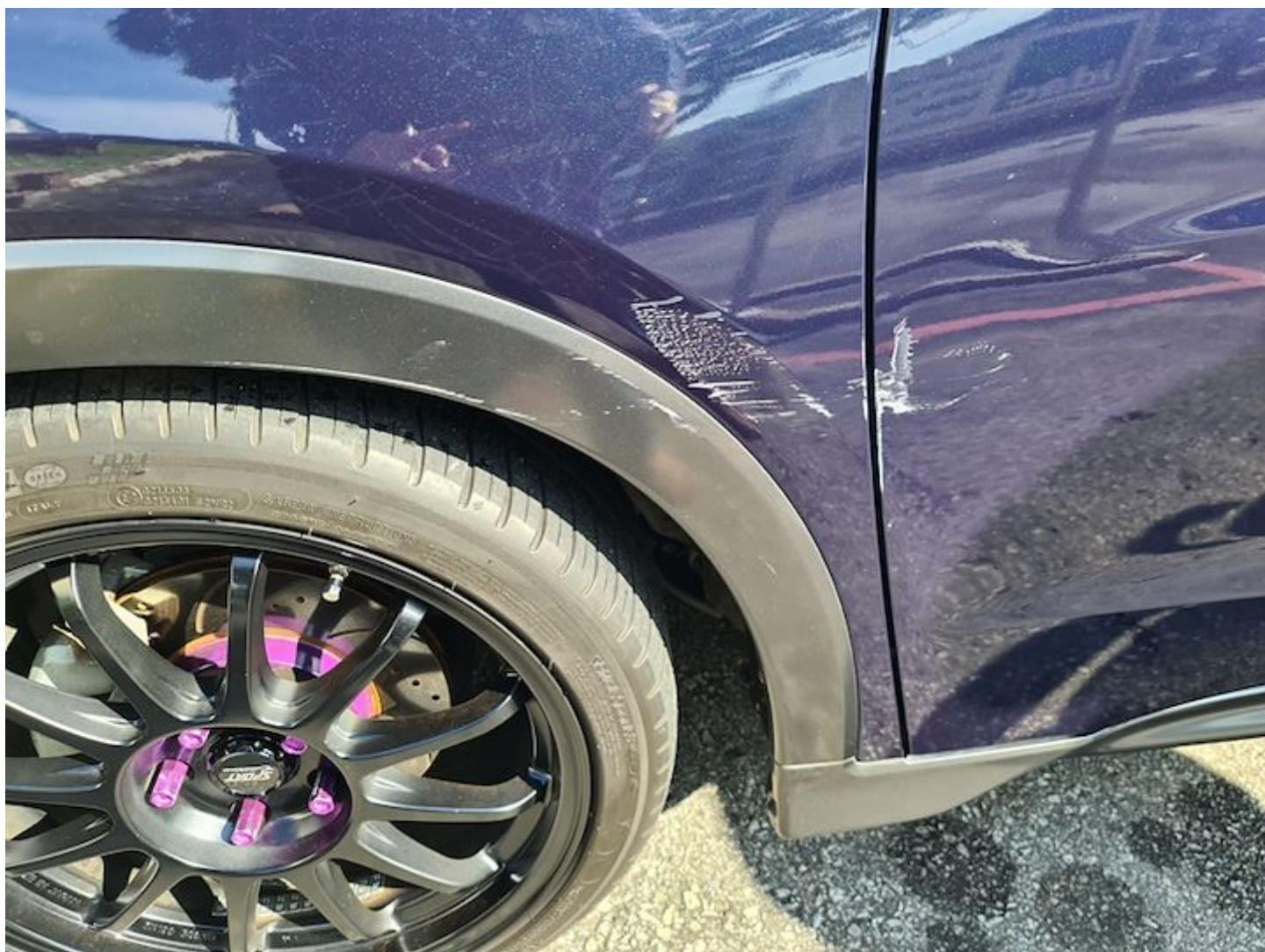




















**SINGAPORE
POLICE FORCE**



T/20211121/2071

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Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No. T/20211121/2071

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/11/2021 23:22	Vide Report No.:	Station Diary No.: 86
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Informant's Particulars

Name of Informant: LIM CHER KHIANG			Address: APT BLK 134 LORONG AH SOO #04-460 SINGAPORE 530134		
ID Type / ID No.: NRIC NO / S1634577F			Contact No.: Home/Office: Mobile: 94515535		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 57	Date of Birth: 22/10/1964	Type of Informant: Vehicle Owner		
Race: Chinese			Language:		Institution / School Name:
Occupation: PURCHASER Procurement			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 21/11/2021 21:00	Type of Location: Car Park
Location: LORONG AH SOO				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKZ989E	Car	MERCEDES BENZ		White		0
SLK7333T	Car					0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20211121/2071

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

2 of 3

Report No. T/20211121/2071

CONTINUATION OF REPORT

Vehicle Owner			
Name	LIM CHER KHIANG	ID No.	S1634577F
Related Vehicle	NIL	Contact No.	94515535
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 21/11/2021 at about 2100hrs, I was at home when my neighbor came to my unit and informed me somebody had knock onto my parked vehicle at carpark lot 261. I immediately went down to check, the damages are on my left side bumper and left side passenger door which had multiple scratches. I then immediately check with my neighbor whom inform that her friend Louis Huang +65 9820 9184 saw the incident happening and can be a witness if required to. He then informed me that the vehicle SKZ989E was trying to park beside another vehicle and they noticed it was trying to park for several times before hearing a knock onto the vehicle. The car then immediately drove off without stopping but during this, it knocked onto my vehicle. Afterwards, the vehicle left the carpark without leaving any contact. I do not have a dashboard camera that have captured the incident.



**SINGAPORE
POLICE FORCE**



T/20211121/2071

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Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No. T/20211121/2071

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

F /

Sgt 2 J SHAFEER DEEN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

21/11/2021 23:22

Officer In Charge Of Case:

TP / HRT /

SSI KASMAWATI BTE SAMIAN

Contact No.: 65476368

Classification Of Case:

Authentication Stamp

NP168