

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 29/11/2021 15:28 (SGT)
Date of Accident 26/11/2021 17:05 (SGT)
Exact Location of Accident Singapore
Additional Location Information LIM LIAK ST LOT 4A
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLX3324C

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner LOW NAH NAH
NRIC No SXXXX260C
Email Address bumblebbb8888@gmail.com
Mobile Phone No (Phone) +65-92710192
Alternative Phone No +65-92710192

VEHICLE PARTICULARS

Manufacturer Nissan
Model X-trail
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 1997

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMPCSNW00118572101
Cover Note Number -

DRIVER

Name of Driver LOW NAH NAH
NRIC No SXXXX260C

Date Of Birth	15/04/1968
Occupation	Indoor
Date Of Driving Pass	12/10/1987
Driving experience	34 YEARS AND 1 MONTH
Gender	Female
Mobile Number	(Phone) +65-92710192
Alt. Phone Number	+65-92710192
Email Address	bumblebbb8888@gmail.com
Address	BLK 22 HAVELOCK ROAD
Address complement	#05-709
Postcode	160022
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	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	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	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 THE POLICE REPORT : T/20211127/7010

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	WITNESS VIDEO
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKV9288G
Vehicle Manufacturer	Mercedes
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)	-

SKETCH PLAN**IMPORTANT NOTICE**

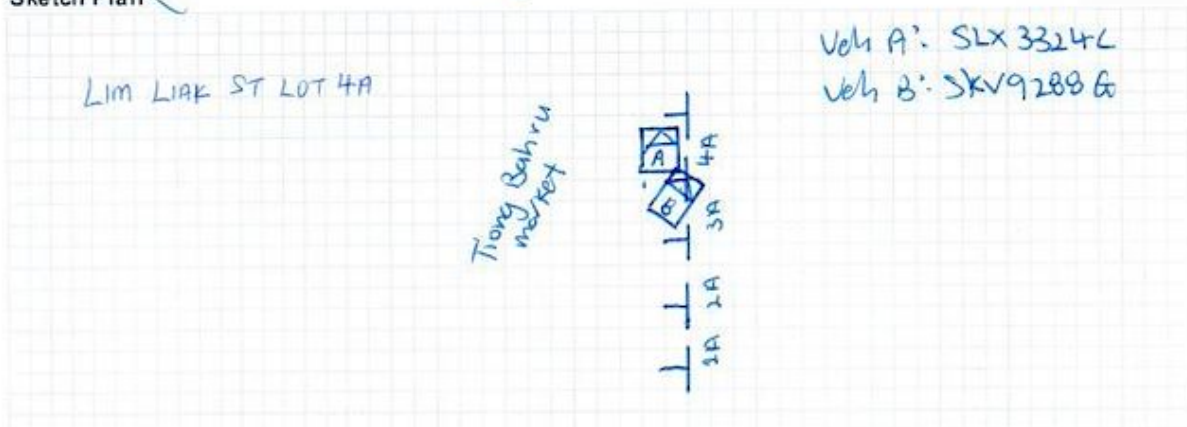
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8. **Consent under the Personal Data Protection Act (PDPA)**
I understand, acknowledge, agree and consent that :
(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or 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.

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

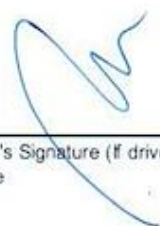
Handwritten notes in the 'Describe Circumstances of the Accident' section include:

- 10
- Police
- T/2021/11/27
- 24/11/2021
- 7010
- 17036
- 17036

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

29/11/21

Ru 29/11/2021

Witnessed by Reporting Centre Personnel

















**SINGAPORE
POLICE FORCE**



T/20211127/7010

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

1 of 3
Report No: T/20211127/7010

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/11/2021 15:00		Vide Report No.: T/20211126/7036		Station Diary No.:	
Informant's Particulars					
Name of Informant: LOW NAH NAH			Address: 22 HAVELOCK ROAD #05-709 SINGAPORE 160022		
ID Type / ID No.: NRIC NO / S6818260C			Contact No.: Home/Office: Mobile: 92710192		
Nationality: SINGAPORE CITIZEN			Email: lownahnah2217@gmail.com		
Sex: Female	Age: 53	Date of Birth: 15/04/1968	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Self-Employed			Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 26/11/2021 17:05	Type of Location: Car Park
Location: LIM LIAK STREET				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
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
SKV9288G	Car	MERCEDES BENZ				0
SLX3324C	Car	NISSAN	X-TRAIL 2.0 CVT ABS 4WD S/R 7-STR	Blue		1



**SINGAPORE
POLICE FORCE**



T/20211127/7010

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

2 of 3

Report No. T/20211127/7010

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLX3324C	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW001185 72101	21/06/2021	20/06/2022

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LOW NAH NAH		ID No. S6818260C
Related Vehicle	SLX3324C (Car)		Contact No. 92710192
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.

On 26 Nov 2021 (Fri) at about 4.40pm, I arrived with my husband at Tiong Bahru Market and parked my vehicle bearing registration number plate: SLX 3324C located at Lim Liak St Lot 4A and then left with him for a meal.

When we returned at about 5.15pm, we saw one guy walking towards us and then he informed us that our car had been hit by another car bearing registration number plate: SKV 9288G and ran off. He saw the whole accident and informed us that he had video footages as well.

Upon hearing this, we quickly checked our car and found that indeed the rear portion got damaged. There was no note or anything on the windscreen to inform us from the other car that had hit our car. Therefore, this should be a hit and run accident.

I lodged this report for police investigation into such irresponsible driver and also for insurance claims.



SINGAPORE POLICE FORCE



T/20211127/7010

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

3 of 3

Report No. T/20211127/7010

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPB /
NEO ZHI YUAN
Contact No.: 65476079

NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
27/11/2021 15:00

Classification Of Case: