

5X1082/CA000!

(1) IP / Reporting Only

$\frac{1}{2} \left( \frac{1}{\sqrt{2}} + \frac{1}{\sqrt{2}} \right) = \frac{1}{2}$

5MK 384/4

Policy No 1

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### Cover Types (

Confirmed by 1 <

Insured Driver W/Ot/Illy

%) (Note the slow WO) (11.50%) (11.50%) (11.50%)

Year of Registration 1911 S

Loadings: \$1,000 ( ) / \$2,000

Information is being provided to you for your personal use only. It is not to be distributed, copied, or used for any other purpose without the express written consent of the copyright owner.

[illegible]

DrVerIn( ) / Power( ) / Involut( )

... Highway on

1) Apply for Transient Admissions

3) Upload Recovery Photo (Repair Cost: \$3,000)

11111111

12/1/2001/Owner  
 Common No 1  
 12/1/2001/Portion  
 RQ Checked by (Bing-Yin-Chiung)  
 12/1/2001/Portion

NO	DESCRIPTION	AMOUNT	CHECKED	DATE
1	12/1/2001/Owner	1000		
2	12/1/2001/Portion	1000		
3	12/1/2001/Portion	1000		
4	12/1/2001/Portion	1000		
5	12/1/2001/Portion	1000		
6	12/1/2001/Portion	1000		
7	12/1/2001/Portion	1000		
8	12/1/2001/Portion	1000		
9	12/1/2001/Portion	1000		
10	12/1/2001/Portion	1000		
11	12/1/2001/Portion	1000		
12	12/1/2001/Portion	1000		
13	12/1/2001/Portion	1000		
14	12/1/2001/Portion	1000		
15	12/1/2001/Portion	1000		
16	12/1/2001/Portion	1000		
17	12/1/2001/Portion	1000		
18	12/1/2001/Portion	1000		
19	12/1/2001/Portion	1000		
20	12/1/2001/Portion	1000		



# 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	10/12/2021 15:00 (SGT)
Date of Accident	09/12/2021 10:38 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	259A HDB BUKIT PANJANG MSCP DECK 3A
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMU658M
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	NG CHAMPION
NRIC No	SXXXX749J
Email Address	CS8558CS@GMAIL.COM
Mobile Phone No	(Phone) +65-98285205
Alternative Phone No	(Home) +65-98285205

## VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Camry
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	2487

## INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPCSNW00094632000
Cover Note Number	-

## DRIVER

Name of Driver	NG CHAMPION
NRIC No	SXXXX749J

Date Of Birth	07/09/1978
Occupation	Indoor
Date Of Driving Pass	11/10/2002
Driving experience	19 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98285205
Alt. Phone Number	(Home) +65-98285205
Email Address	CS8558CS@GMAIL.COM
Address	BLK 274 BANGKIT ROAD
Address complement	#06-56
Postcode	670274
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	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

PLEASE REFER TO POLICE REPORT NO: T/20211210/7008

#### 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	WITH OWNER
Was there any audio recorded?	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMK3841H
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)	-



**IMPORTANT NOTICE**


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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. 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' 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

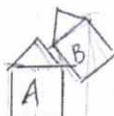
  
Driver's Signature (If driver is not the policyholder) / Date & Time

  
Witnessed by Reporting Centre Personnel

**Sketch Plan**

259A HDB BUKIT  
PANJANG MSCP  
PECK 3A

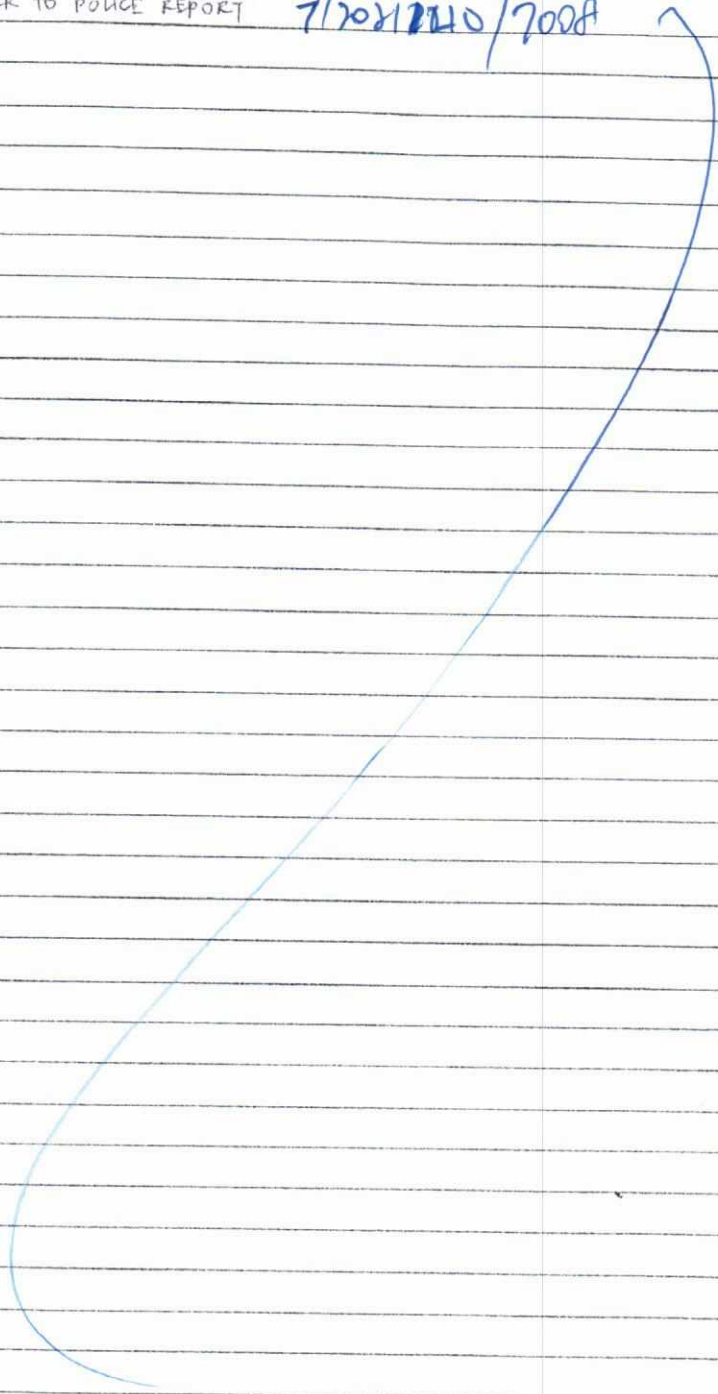
A = SNU658<sup>M</sup>  
b = SMK3841H



Describe Circumstances of the Accident

REFER TO POLICE REPORT

7/20/2010/7008



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

Email: sm@idac.com.sg Tel no: 6555 6888

\*If no proper documents are produced, IDAC shall not file the report. Information will be discarded after one week.

Date of Accident: 09 / 12 / 2021 (dd/mm/yy)

Time of Accident: 10 : 38 (24-HR-FORMAT)

Vehicle No.: SMU658M Vehicle Make & Model / Engine (cc): TOYOTA CAMRY Private Hire: (Y / N)

Exact location of Accident: 259A HDB BUKIT PANJANG MSCP PECK 3A

Policyholder's Name / IC No.: NG CHAMPION S7825749J ROC/UEN (Company):

Driver's Name / IC No.: NG CHAMPION S7825749J (As Above) ☐

Driver's Contact No.: 9828 5205 Company Contact No / Owner Contact No:

Driver's Address: BLK 274 BANGKIT ROAD #06-56 SINGAPORE 670274

Owner Email address: 09855845@EMAIL.COM Insurance Company: CHINA TAIPING

Driver Email address:

**Relationship between Owner & Driver:** (Please CIRCLE one only)

Owner / Spouse / Children / Friend / Parents / Sibling / Relative / Employee / Hirer or Others specify:

**What do you wish to claim?** (Please TICK one only)

☐ Own Insurance / ☒ Other Vehicle (The one you want to claim against) / ☐ Reporting (For Record Purpose)

**Exact purpose for which the vehicle  
Was being used at time of accident?**

**Occupation (nature of job)** ☐ Indoor / ☐ Outdoor

☒ Private use / ☐ Work purpose

\*No. of Passengers (Including Driver): 0

\*Passenger Name: Gender: Male / Female x( )

\*Passenger Name: Gender: Male / Female x( )

**Weather condition & Road conditions?** (On the day of accident)

☒ Clear & Dry / ☐ Raining & Wet / ☐ After-Rain & Wet / ☐ Drizzling & Wet / Others:

**Was there any video captured by your Car Camera?** ☒ Yes / ☐ No Remarks:

**Any Injuries:** ☐ Yes / ☒ No (If YES) Injured Person's Name:

Injuries Sustain: Injured Person in Which Vehicle:

**Police Report filed:** ☒ Yes / ☐ No (If YES) Which Police Station: ONLINE

### The Other Party(s) Details:

1. Driver's Name / IC No: Vehicle No: SMK3841H

Driver's Contact No: Insurance Company:

2. Driver's Name / IC No (If Any): Vehicle No:

Driver's Contact No: Insurance Company:

\*Independent Witness (If Any): Contact No:

Preferred Workshop Name: Contact No:





# SINGAPORE POLICE FORCE



T/20211210/7008

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

1 of 3

Report No. T/20211210/7008

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 10/12/2021 12:18		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: NG CHAMPION		Address: 274 BANGKIT ROAD #06-56 SINGAPORE 670274			
ID Type / ID No.: NRIC NO / S7825749J		Contact No.: Home/Office: Mobile: 98285205			
Nationality: SINGAPORE CITIZEN		Email: KUGATSU_NANOKA@HOTMAIL.COM			
Sex: Male	Age: 43	Date of Birth: 07/09/1978	Type of Informant: Vehicle Owner		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: UNEMPLOYED		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: 09/12/2021 10:30	Type of Location: Car Park
Location:  BANGKIT ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: REAR TO HEAD				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SMK3841H	Car			White		0
SMU658M	Car					0

**Details of Person Involved**

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





**SINGAPORE  
POLICE FORCE**



T/20211210/7008

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

2 of 3

Report No. T/20211210/7008

**CONTINUATION OF REPORT**

<b>Vehicle Owner</b>				
Name	NG CHAMPION		ID No.	S7825749J
Related Vehicle	NIL		Contact No.	98285205
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.

My vehicle was parked at 259A HDB Bukit Panjang MSCP Deck 3A.

When I approached my vehicle at around 14:00 hours, I found that my vehicle was damaged hence I checked my in car camera.

In the video, a Estima (SMK3841H) was attempting to park his vehicle next to mine.

During the process, the rear of his vehicle hit the front right portion of my vehicle.

The vehicle left the scene after the incident.



**SINGAPORE  
POLICE FORCE**



T/20211210/7008

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

3 of 3

Report No. T/20211210/7008

**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 / TPIB /  
IRMAN BIN MOHAMAD SAID  
Contact No.: 65476145

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

Date/Time:  
10/12/2021 12:18

Classification Of Case:



Motor Private Car

MX1F

N SN

AN0420A

Cov. Type:C

**CERTIFICATE OF INSURANCE**Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)  
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960  
Road Transport Act, 1987 (Malaysia)  
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.

DMPCSNW00094632000

Engine No.: A25A5353022

Cha. No.:JTNB23HK303062819

1 Index Mark and Registration  
Number of Vehicle

SMU658M

AUTOSAFE  
=====

2 Name of Policy Holder

NG CHAMPION

3 Effective date of the Commencement of  
Insurance for the purposes of the Regulations,  
Ordinance or Enactment

28/07/2020

Named Drivers Ex Sect. I

S\$2,000.00

Ex Sect. I - Age &lt;= 25

S\$3,000.00

Ex Sect. I - Age &gt;= 26

S\$500.00

4 Date of Expiry of Insurance

27/07/2021

Additional Ex Other than Named Drivers:

EX ON WINDSCREEN

S\$100.00

\* Age as at date of accident

5 Persons or Classes of Persons entitled to drive\*

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6 Limitations as to use:

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled.

One time Waiver of Excess for the first S\$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

HIRE PURCHASE CO. : SWEE SENG CREDIT PTE LTD AS HP OWNER

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia), are not to be included under these headings.

**I/We hereby Certify** that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse



Issued By: INXPRESS INSURANCE AGENCY PTE LTD

Authorised Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.



Authorised Signatory