SK0M21CE0002 / KANG CAR REPAIRERS PTE LTD ENTRY DATE & TIME: 14/12/2021 16:51 (SGT) SUBMITTED BY: ALICE TNG VERSION: 1 (14/12/2021 16:51 (SGT))

# **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 witholding 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.

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   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 14/12/2021 16:51 (SGT) Date of Accident 08/12/2021 12:45 (SGT) Exact Location of Accident Singapore Additional Location Information 1 Kaki Bukit Avenue 6, #01-99 Autobay @ Kaki Bukit (417883) Country/State of Loss Singapore

## **DETAILS OF OWN VEHICLE**

Fiat

Vehicle Registration Number SN67447

#### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner Goh Aik Heng NRIC No. SXXXX396H Email Address oxoxtwhxo@gmail.com Mobile Phone No (Phone) +65-67475435 Alternative Phone No (Office) +65-67475435

### VEHICLE PARTICULARS

Manufacturer

Model 600D 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 800

### **INSURANCE COMPANY**

Name of Insurance Company NTUC Income Insurance Co-operative Ltd Type of Coverage ThirdParty Fleet Policy Policy Number 5014487396-15 Cover Note Number

## DRIVER

Name of Driver Goh Aik Heng NRIC No. SXXXX396H

Date Of Birth Occupation Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	18/09/1955 Indoor 20/08/1979 42 YEARS AND 4 MONTHS Male (Phone) +65-67475435 (Office) +65-67475435 oxoxtwhxo@gmail.com Blk 53 New Upper Changi Road #05-1478 - 461053 Yes - No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Hit and run / Vandalism / Damaged whilst parked Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?  Number of vehicles involved in the accident  Was anybody injured in the Accident?  Was any injured conveyed to hospital by ambulance?  Was any other vehicle or property damaged?  Number of Passengers (Including Driver)  Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No 2 No - Yes 0 No
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Police Station Name Police Station Phone No Alt. Police Station Phone No Police Station Address Was notice of intended Prosecution given? If yes, against whom?	Yes Tanah Merah Neighbourhood Police Post (Phone) +65-18004499999 (Fax) +65-62447251 Blk 51 New Upper Changi Road #01-1514 Singapore 461051 No -
CIRCUMSTANCES OF ACCIDENT	
Third party reverse and hit onto insured vehicle. See attached sket (Accident captured by another workshop's CCTV)	ch plan and police report no: T/20211211/2071
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera? Reasons for not uploading a video of the accident Was there any audio recorded?	Yes Yes To get from owner No
DETAILS OF OTHER	VEHICLE PROPERTY 1

YP1981G

Vehicle Model

Vehicle Registration Number
Vehicle Manufacturer

Vehicle Variant

Vehicle Colour	-
Vehicle Category	Goods vehicle
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

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 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.
- 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' 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 & Driver's Signature (If driver is not the policyholder) / Date
Time

Sketch Plan

4.15P

#01-99

#01-99

Personnel

Attach	police report no: T/20211211	12071
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aration		
eclare the forego	ng particulars are true in every respect.	
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14/12/2021 4.15p







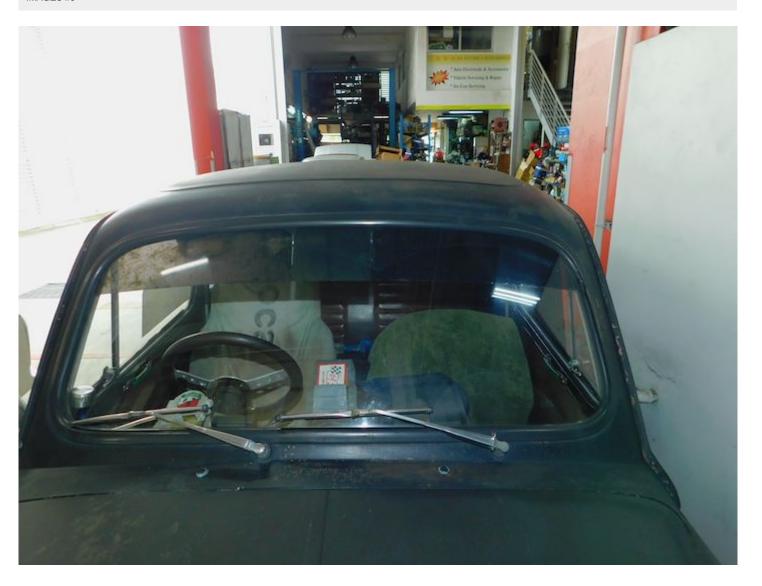




















Police Station Of Origin: Tanah Merah NPP 51 New Upper Changi Road #01-1514 SINGAPORE 461051 Tel No: 1800-4499999 1 of 3 Report No. T/20211211/2071

# REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/12/2021 17:25		Made:	Vide Report No.:	Station Diary No.: 24		
Informa	nt's Partic	ulars				
Name of Informant: GOH AIK HENG			Address: APT BLK 53 NEW UPPER CHANGI ROAD #05-1478 SINGAPORE 461053			
ID Type / ID No.: NRIC NO / S1192396H			Contact No.: Home/Office: 67475435 Mobile:			
Nationality: SINGAPORE CITIZEN		ΈΝ	Email:			
Sex: Age: Date of Birth: Male 66 18/09/1955			Type of Informant: Vehicle Owner			
Race: Chinese			Language: English	Institution / School Name:		
Occupation: MECHANIC		0.00	Driving Licence Information: Class: 2B,2A,2,3  Date of Expiry:			

General Infor	mation of the Accide	nt			
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 08/12/2021 12:45	Type of Location: Car Park	
Location: KAKI BUKIT	AVENUF 6	Road Surface:		Road Speed Limit:	
Traffic Flow: Tr		Dry Traffic Control: Not Controlled		Traffic Volume: Moderate	
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance:	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenge
SN6744Z	Car	FIAT	600D	Black	Seriously Damaged	

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SN6744Z	NTUC Income Insurance Co-Operative Limited			



T/20211211/2071

Police Station Of Origin: Tanah Merah NPP 51 New Upper Changi Road #01-1514 SINGAPORE 461051 Tel No: 1800-4499999 2 of 3 Report No. T/20211211/2071

#### CONTINUATION OF REPORT

<b>Details of Perso</b>	n Involved	Interested				
Any Pedestrian I	nvolved: No					
No. of Pedestriar	ns Injured: NIL		Use of F	Use of Pedestrian Crossing: NA		
Vehicle Owner				- interest		
Name	GOH AIK HENG			ID No		S1192396H
Related Vehicle	SN6744Z (Car)			Conta	ict No.	67475435
Hospital/Clinic	NIL			Class Drivin Licen Expire	g	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL Date I			scharge	NIL	
No. of Days granted Medical Leave NIL				of Injury		

## Brief Details.

On 8/12/2021 at around, 12:45pm, I discovered that my car which I parked within my Workshop's carpark (G.B. AUTO WORKSHOP) located at 1 Kaki Bukit Ave 6, #01-99, S(417883) have a dent at the rear portion. I managed to retrieved CCTV footage from my friend's workshop located a few units down of mine and the CCTV footage managed to capture a lorry colliding into my vehicle as it was reversing. The lorry driver then subsequently drive off without leaving a note of providing any particulars. I the CCTV managed to capture the vehicle's plate number, however I am unable to recall the number.

I wish to state that I believe the lorry belongs to a Customer of my neighboring workshop. I do not have much details of the incident however it can be obtained through the CCTV footage.





Police Station Of Origin: Tanah Merah NPP 51 New Upper Changi Road #01-1514 SINGAPORE 461051 Tel No: 1800-4499999 3 of 3 Report No. T/20211211/2071

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 G / Sgt 2 CHOW SHI JIE, SAMUEL	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 11/12/2021 17:25
Officer In Charge Of Case: TP / HRT / SSI KASMAWATI BTE SAMIAN	Classification Of Case:
Contact No.: 65476368	
Authentication Stamp	
SIGNATURE	