

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 12/01/2022 14:04 (SGT)
Date of Accident 11/01/2022 12:32 (SGT)
Exact Location of Accident Beo Cres, Singapore
Additional Location Information BEO CRESCENT BLK 28A MULTI-STOREY CARPARK
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMU6353C

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner YEO ZHEN HONG
NRIC No SXXXX526J
Email Address justiboi@hotmail.com
Mobile Phone No (Phone) +65-98466353
Alternative Phone No (Home) +65-98466353

VEHICLE PARTICULARS

Manufacturer Mercedes
Model Gla180
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 1595

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMPCSNW00093482000
Cover Note Number -

DRIVER

Name of Driver YEO ZHEN HONG
NRIC No SXXXX526J

Date Of Birth	25/10/1985
Occupation	Indoor
Date Of Driving Pass	16/03/2005
Driving experience	16 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98466353
Alt. Phone Number	(Home) +65-98466353
Email Address	justiboi@hotmail.com
Address	BLK 10C BENDEMEER ROAD #12-123
Address complement	-
Postcode	333010
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

I WAS PARKING AT BLK 28A BEO CRESCENT MULTI-STOREY CARPARK FOR LUNCH. WHEN I WENT BACK TO COLLECT MY CAR, I SAW MY FRONT PLATE AND SOME PAINTING PEELED OFF. A GOODWILL PASSERBY LEFT A NOTE AND SHARE VIDEO FOOTAGE OF THE HIT AND RUN INCIDENT.

AND ALSO REFER TO THE POLICE REPORT ATTACHED.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLM1331C
Vehicle Manufacturer	Toyota
Vehicle Model	Estima

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)	2

PASSENGER 1

Name	PASSENGER
Gender	Male

SKETCH PLAN

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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' 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

Sketch Plan 12-01-2022

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

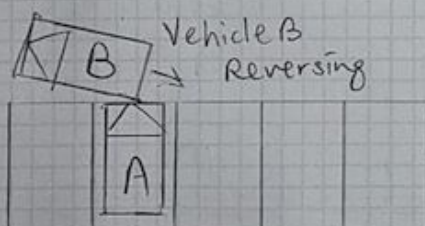
Witnessed by Reporting Centre Personnel

Please refer to the attached Video Footage

DOA: 11-01-2022

A: SMU6353C

B: SLM1331C



Parking Lots

Beo Crescent

Blk 28A Multi-Storey Carpark

Describe Circumstances of the Accident

I was parking at blk 28A Res crescent Multi storey carpark for lunch. when I went back to collect my car, I saw my front plate and some painting peeled off. A goodrill passerby left a note and show video footage of the hit and run incident.
AND ALSO REFER TO POLICE REPORT ATTACHED

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &
Time

12:30pm
12.01.2022

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

Witnessed by Reporting Centre
Personnel



















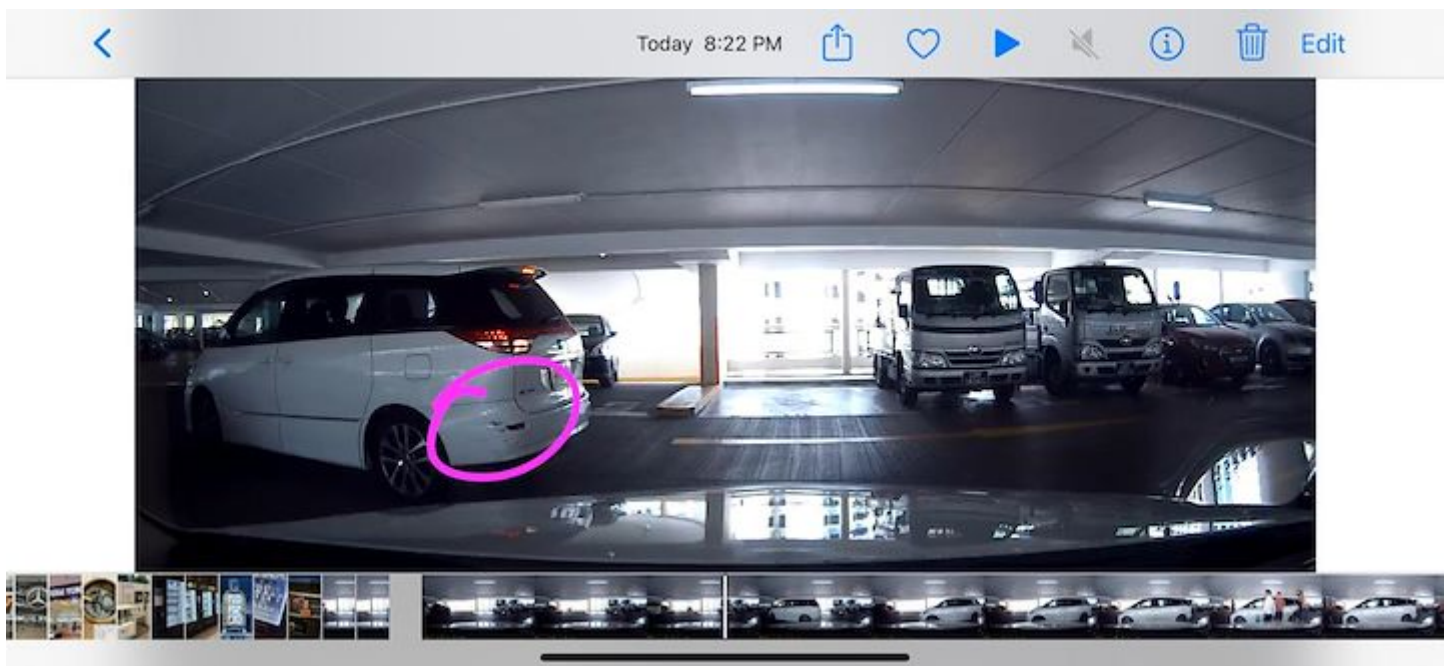














**SINGAPORE
POLICE FORCE**



T/20220111/7044

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

1 of 3
Report No. T/20220111/7044

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/01/2022 21:03		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: YEO ZHEN HONG			Address: 12B HOUGANG STREET 11 #06-61 SINGAPORE 534073		
ID Type / ID No.: NRIC NO / S8535526J			Contact No.: Home/Office: Mobile: 98466353		
Nationality: SINGAPORE CITIZEN			Email: justiboi@hotmail.com		
Sex: Male	Age: 36	Date of Birth: 25/10/1985	Type of Informant: Vehicle Owner		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Information technology security specialist			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: 11/01/2022 12:30	Type of Location: Car Park
Location: BEO CRESCENT				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two 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
SLM1331C	Car	TOYOTA	Estima	White	Slightly Damaged	2
SMU6353C	Car	MERCEDES BENZ	GLA180	Black	Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20220111/7044

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

2 of 3
Report No. T/20220111/7044

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMU6353C	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW000934 82000	24/07/2021	23/07/2022

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Vehicle Owner			
Name	YEO ZHEN HONG		ID No. S8535526J
Related Vehicle	NIL		Contact No. 98466353
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.

The incident happen at Blk 28A Beo Crescent Multi Storey Carpark. My car was parked while the driver reverse and hit my car. I have passerby sharing footage of what happened. They even came down to inspect the degree of the "accident" and drive away shortly.



**SINGAPORE
POLICE FORCE**



T/20220111/7044

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

3 of 3

Report No. T/20220111/7044

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

NP168

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

Date/Time:
11/01/2022 21:03

Classification Of Case: