

# 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 .....	24/01/2022 14:56 (SGT)
Date of Accident .....	21/01/2022 19:45 (SGT)
Exact Location of Accident .....	109D Edgedale Plains, Singapore 824109
Additional Location Information .....	RUBBISH CHUTE
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SJT5512H
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### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	SEEKTOP PTE LTD
Company Reg No .....	2XXXXX868E
Email Address .....	daniellloke5@gmail.com
Mobile Phone No .....	(Phone) +65-92270221
Alternative Phone No .....	+65-87718772

### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	Vios
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 hire
Transmission .....	Auto
CC .....	1497

### INSURANCE COMPANY

Name of Insurance Company .....	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage .....	ThirdParty
Fleet Policy .....	No
Policy Number .....	DMHCSNA00001502100
Cover Note Number .....	-

### DRIVER

Name of Driver .....	LOKE MUN JUN
NRIC No .....	SXXXX044Z

Date Of Birth .....	26/03/1982
Occupation .....	Outdoor
Date Of Driving Pass .....	04/12/2013
Driving experience .....	8 YEARS AND 1 MONTH
Gender .....	Male
Mobile Number .....	(Phone) +65-87718772
Alt. Phone Number .....	-
Email Address .....	daniellloke5@gmail.com
Address .....	BLK 468C FERNVALE LINK #09-559
Address complement .....	-
Postcode .....	793468
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Hirer
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? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	No
Was any other vehicle or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	1
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 SKETCH AND POLICE REPORT T/20220123/7015

#### 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 .....	SLS1040K
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) .....	-

## INJURED PERSONS DETAILS

### INJURED 1

Name of injured person .....	LOKE MUN JUN
Gender .....	Male
Phone No .....	(Phone) +65-87718772
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	SLIGHT INJURY
Injured person in which vehicle? .....	SJT5512H
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

# SKETCH PLAN

## IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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.

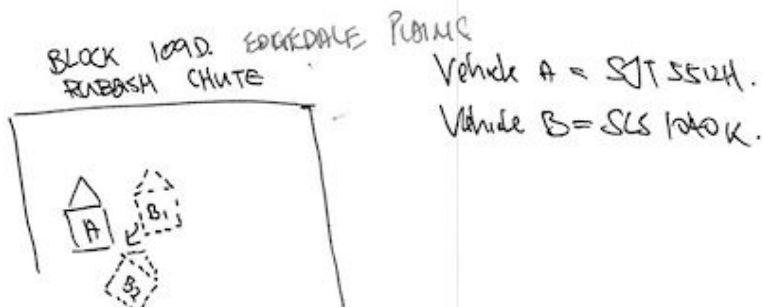


Policyholder's Signature / Date & Time

Sketch Plan

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

Witnessed by Reporting Centre Personnel



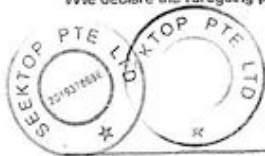
Describe Circumstances of the Accident

On the stated date and time, I vehicle A was stationary on the stated lane, vehicle B reversed out of a stationary position on my right, steered to his left and collided into my vehicle near right position.

POLICE REPORT 7/20220123/7015

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

*[Signature]*

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

*[Signature]* 24/01/2022

Witnessed by Reporting Centre Personnel






























**SINGAPORE  
POLICE FORCE**


T/20220123/7015

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

1 of 3

Report No. T/20220123/7015

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 23/01/2022 14:38			Vide Report No.:		Station Diary No.:
<b>Informant's Particulars</b>					
Name of Informant: LOKE MUN JUN			Address: 468C FERNVALE LINK #09-559 SINGAPORE 793468		
ID Type / ID No.: NRIC NO / S8210044Z			Contact No.: Home/Office:		Mobile: 87718772
Nationality: SINGAPORE CITIZEN			Email: DANIELLLOKE5@GMAIL.COM		
Sex: Male	Age: 39	Date of Birth: 26/03/1982	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Private hirer			Driving Licence Information: Class:		Date of Expiry:

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 21/01/2022 19:45	Type of Location: Car Park
Location:  EDGEDALE PLAINS				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 20 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
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
SJT5512H	Car	TOYOTA	VIOS		Seriously Damaged	0
SLS1040K	Car				Slightly Damaged	0



**SINGAPORE  
POLICE FORCE**



T/20220123/7015

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

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Report No. T/20220123/7015

**CONTINUATION OF REPORT**

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LOKE MUN JUN	ID No.	S8210044Z
Related Vehicle	SJT5512H (Car)	Contact No.	87718772
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	22/01/2022	Date	22/01/2022
No. of Days granted Medical Leave	05	Degree of	Slight

**Brief Details.**

On 21/01/2022 at around 0745pm I need to drop off my passenger at 109D edgedale plains. I come to the rubbish chute area stopped stationary, passenger alighted and suddenly I felt an impact from the rear. I quickly alighted and realised that vehicle SLS1040K had reverse and collided onto my vehicle rear right portion. The said driver then alight and check the damages done and apologise for not being able to see my car. We took photos and exchange particulars. After the accident, the next day I felt pain and discomfort and consulted a doctor nearby and was given 5 days mc.



**SINGAPORE  
POLICE FORCE**



T/20220123/7015

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

3 of 3

Report No. T/20220123/7015

**CONTINUATION OF REPORT**Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:  
Not applicable

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

Signature Of Interpreter:  
Not applicable

Date/Time:  
23/01/2022 14:38

Officer In Charge Of Case:  
TP / TPIB /  
MOHAMAD ZULFAZDLI BIN ABDULLAH  
Contact No.: 65476204

Classification Of Case:

NP168





## SEEKTOP PTE LTD

NO: 10 KAKI BUKIT ROAD 2 #01-32, SINGAPORE (417868) Tel: 86856789

This vehicle leasing agreement is made on the 19 JAN 2021

Agreement No.202119 01001

VEHICLE LEASING AGREEMENT

BETWEEN

SEEKTOP PTE LTD (ROC NO: 201937868E)

of known Address: NO: 10 KAKI BUKIT ROAD 2 #01-32

SINGAPORE (417868) Tel: 86856789 ( Hereinafter referred to as " the Lessor" )  
AND

LOKE MUN JUN

S8210044Z HP: 93374164

BLK 468C FERNVALE LINK #09-559 S(793468)

## VEHICLE

Make & Model	TOYOTA VIOS	Color	WHITE
ORD Date	19 OCT 2009	PlateNo:	SJT5512H
Chasis	Vocational:		

## Terms and conditions:

## 1. Scope of Agreement

This Vehicle Leasing Agreement ("Agreement") shall be binding upon the lessees wholly and/or all of the Lessees' agents, drivers, employees, representatives etc. even if replacement vehicle is taken by the Lessee. The Lessee shall be responsible for any replacement vehicle taken by any authorized person.

All driver are to have a minimum 1 year driving experience. Upon acceptance and execution of this Agreement, the Lessee shall guarantee that their designated driver has a valid driving license ( of the appropriate Class depending on the Leased Vehicle ).

## 2. Leasing Period

The Lessor agrees to lease the vehicle to the Lessee for the following period: WEEKLY ( Daily / weekly / Monthly )

Start Date: 19 JAN 2021 End Date: 18 FEB 2021

Returning Date: \_\_\_\_\_ But Return on \_\_\_\_\_

The Security Deposit payable by the Lessees to the Lessors upon the execution of this Agreement is \$3500.

The WEEKLY (weekly / Monthly ) leasing fees payable is \$200 ("Leasing Fees") to be made payable in Advance transfer to (DBS

CURRENT ACCOUNT: 072-015643-9) ON every Monday , and late payment charge will be \$20 per day.

