

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 25/01/2022 19:56 (SGT)
Date of Accident 24/01/2022 14:30 (SGT)
Exact Location of Accident Singapore
Additional Location Information DEPOT LANE
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMY5776B

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner REHOBOTH E&C PTE LTD
Company Reg No 201822209H
Email Address ADMIN@RHB.SG
Mobile Phone No (Phone) +65-91799280
Alternative Phone No +65-91799280

VEHICLE PARTICULARS

Manufacturer Lexus
Model Es300h
Variant -
Exact purpose for which vehicle was being used at time of accident -
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Commercial vehicle
Transmission Auto
CC 2494

INSURANCE COMPANY

Name of Insurance Company QBE Insurance (Singapore) Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 2021-V0027433-MVA
Cover Note Number -

DRIVER

Name of Driver NEE KAI SHEN
NRIC No S8284526G

Date Of Birth	02/10/1982
Occupation	Indoor
Date Of Driving Pass	22/06/2012
Driving experience	9 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91799280
Alt. Phone Number	-
Email Address	LINKAISHEN@HOTMAIL.COM
Address	BLK 29 GHIM MOH LINK
Address complement	#28-322
Postcode	270029
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	DIRECTOR
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	Clementi Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008729999
Alt. Police Station Phone No	(Fax) +65-68728039
Police Station Address	No. Singapore 129858
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN

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	GBK9007R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial 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

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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 & Time

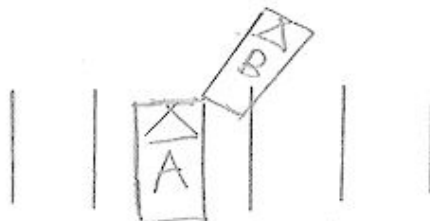
Driver's Signature (If driver is not the policyholder) / Date & Time



Witnessed by Reporting Centre Personnel

Sketch Plan

A = SMY 5776B
B = GBK 9007R



Describe Circumstances of the Accident


✓ REFER TO POLICE REPORT

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

















TOYOTA MOTOR CORPORATION JAPAN
 MODEL AV60R-BEXGB
 ENGINE 2AR-FXE
 FRAME No. JTBW1G502121982 mL
 COLOR 1J7 LC53 Q12
 TRIM PLANT
 TRANS./M/E P314 -02A
 8089





**SINGAPORE
POLICE FORCE**



T/20220124/2121

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

1 of 3

Report No. T/20220124/2121

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/01/2022 23:23	Vide Report No.:	Station Diary No.: 178
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Informant's Particulars

Name of Informant: NEE KAI SHEN			Address: APT BLK 29 GHIM MOH LINK #28-322 SINGAPORE 270029	
ID Type / ID No.: NRIC NO / S8284526G			Contact No.:	Mobile: 91799280
Nationality: SINGAPORE CITIZEN			Home/Office:	
			Email:	
Sex: Male	Age: 39	Date of Birth: 02/10/1982	Type of Informant: Vehicle Owner	
Race: Chinese			Language: English	Institution / School Name:
Occupation: Other civil engineering and related technicians			Driving Licence Information: Class: 2B,3	Date of Expiry:

General Information of the Accident

Type of Accident: Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 24/01/2022 14:30	Type of Location: Car Park
Location: DEPOT LANE			
Weather: Clear	Road Surface: Dry	Road Speed Limit:	
Traffic Flow:	Traffic Control:	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	Condition	No of Passenger
GBK9007R	Lorry					0
SMY5776B	Car	LEXUS	ES300H	Silver	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMY5776B	QBE Insurance (Singapore) Pte Ltd			



**SINGAPORE
POLICE FORCE**



T/20220124/2121

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Report No. T/20220124/2121

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Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Vehicle Owner			
Name	NEE KAI SHEN	ID No.	S8284526G
Related Vehicle	NIL	Contact No.	91799280
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 24 January 2022 at 1433hrs, I parked my vehicle, Lexus ES-300H vehicle (SMY5776B) at 118 Depot Lane carpark. My vehicle belongs to Rehoboth E&C PTE. LTD. I was not at the scene when this incident happened. My in-car camera captured the whole incident process. The in-car camera shows a vehicle (lorry) with the license plate no. GBK9007R reversed with body into the parking lot and hit my car on the right. The lorry has a name "Lotus FINE ARTS LOGISTICS member of the hasenkamp group". My right front light and front side of the vehicle was damaged and dented.

After the first hit, the other party did not notice the contact and continue parking. After he was done parking, he then stepped out of his vehicle and walked to my car and see the damages. After that, he went back to his car and drove off. I only noticed the damages when I reached my home carpark at around 1830hrs. After that, I contacted my insurance company (QBE Insurance Singapore Pte Ltd) and they advised that I made a Police report so that the insurance company can process take further action. The insurance policy number is 08-V0027433-MVA-E001.

There were no written notes left behind. And I was not notified by any person at scene.



**SINGAPORE
POLICE FORCE**



T/20220124/2121

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

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Report No. T/20220124/2121

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 D/ Other NG WEI JIN 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 24/01/2022 23:23
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt IRMAN BIN MOHAMAD SAID Contact No.: 65476145	Classification Of Case: SN 37
Authentication Stamp NP168	 SIGNATURE