

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	07/02/2022 15:13 (SGT)
Date of Accident	06/02/2022 19:40 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	BLK 64 LENGKOK BAHRU CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMF2981U
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	FOK CHEE KHUEN
NRIC No	SXXXX602Z
Email Address	ERNSTFOK@YAHOO.COM
Mobile Phone No	(Phone) +65-97482775
Alternative Phone No	(Office) +65-97482775

VEHICLE PARTICULARS

Manufacturer	BMW
Model	216i
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1499

INSURANCE COMPANY

Name of Insurance Company	Sompo Insurance Singapore Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	D21MTPV01014201
Cover Note Number	-

DRIVER

Name of Driver	FOK CHEE KHUEN
NRIC No	SXXXX602Z

Date Of Birth	07/10/1978
Occupation	Indoor
Date Of Driving Pass	25/06/2003
Driving experience	18 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97482775
Alt. Phone Number	(Office) +65-97482775
Email Address	ERNSTFOK@YAHOO.COM
Address	BLK 63B LENGKOK BAHRU
Address complement	#03-350
Postcode	S152063
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/20220207/7012

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	SLB9631S
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private hire

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) -

WITNESS DETAILS


WITNESS 1


Name TELEGRAM USER NAME @MAPLEPANCAKES
Phone -
Email -

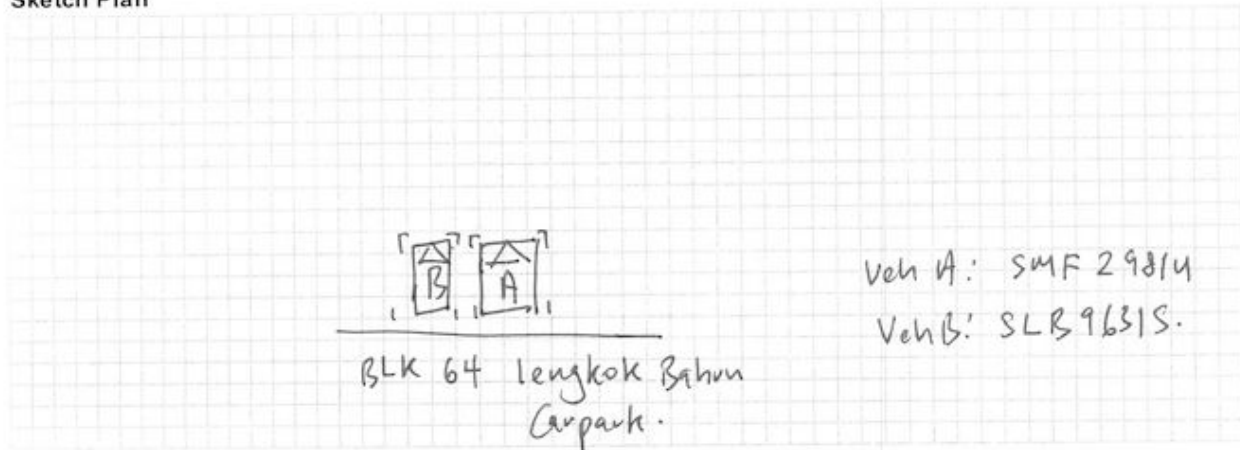
SKETCH PLAN**IMPORTANT NOTICE**

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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


Veh A: SMF 29814
Veh B: SLB 96315

BLK 64 Lengkok Bahru Carpark.

Please refer to Police Report No: T/2022007/7012.

We declare the foregoing particulars are true in every respect.

Witnessed by Reporting Centre
Personnel











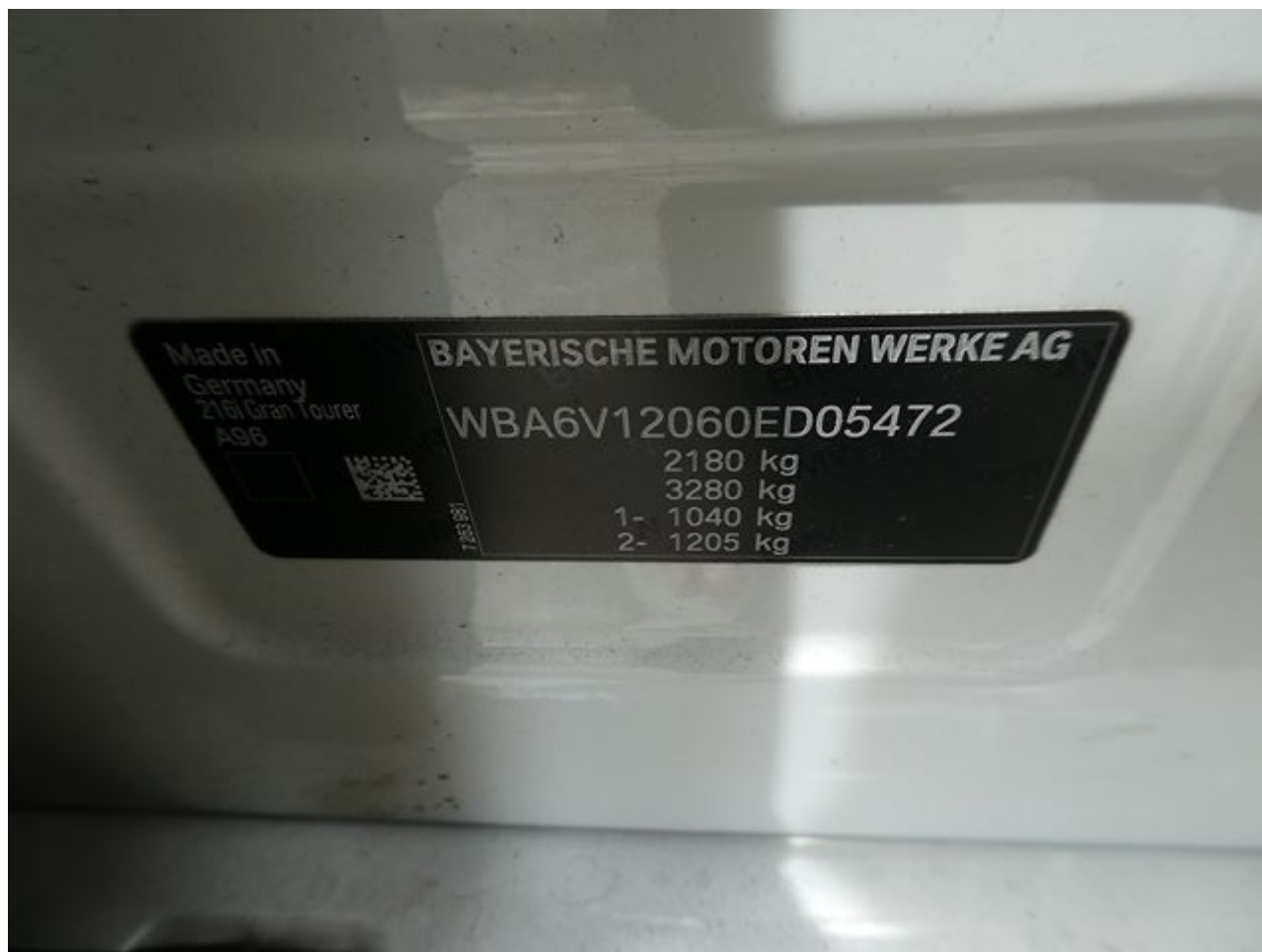













**SINGAPORE
POLICE FORCE**


T/20220207/7012

1 of 3

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

Report No. T/20220207/7012

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/02/2022 10:53		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: FOK CHEE KHUEN			Address: 63B LENGKOK BAHRU #03-350 SINGAPORE 152063		
ID Type / ID No.: NRIC NO / S7829602Z			Contact No.: Home/Office: Mobile: 97482775		
Nationality: SINGAPORE CITIZEN			Email: ERNSTFOK@YAHOO.COM		
Sex: Male	Age: 43	Date of Birth: 07/10/1978	Type of Informant: Vehicle Owner		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Chief operating officer/General Manager			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: 06/02/2022 19:40	Type of Location: Car Park
Location: LENGKOK BAHRU				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One 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
SLB9631S	Car					0
SMF2981U	Car	BMW	BMW 216I 1.5	White	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



**SINGAPORE
POLICE FORCE**



T/20220207/7012

2 of 3

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

Report No. T/20220207/7012

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMF2981U	TENET SOMPO INSURANCE PTE. LTD.	D21MTPV0101420 1	31/10/2021	30/10/2022

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Vehicle Owner				
Name	FOK CHEE KHUEN		ID No.	S7829602Z
Related Vehicle	NIL		Contact No.	97482775
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.

Hi,

The driver of a GetGo car, SLB9631S apparently did a hit and run yesterday, 6 February 2022 at around 740pm to 750pm at the carpark of Block 64 Lengkok Bahru (2nd floor carpark, highest level). My car plate number is SMF 2981U and I parked my car at around 655pm. We parked our car overnight and did not retrieve it until this morning around 7am.

An eyewitness saw it last night and left a note for us to contact him/her today morning. The GetGo car apparently reversed into the parking lot next to mine and hit the left side of my car (please see photos). There were several dents and scratches.

We did not see any note left by the GetGo driver.

**SINGAPORE
POLICE FORCE**

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



T/20220207/7012

3 of 3

Report No. T/20220207/7012

CONTINUATION OF REPORTSketch 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 /
KALESWARI PALANI
Contact No.: 65476902

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

Date/Time:
07/02/2022 10:53

Classification Of Case:

NP168



IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SN0922270007 Vehicle Registration No: SMF 2981 U
 Name (as shown in NRIC): FOR CHAN KHEUM NRIC/FIN/Passport No: SXXXX602Z
 (*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate
 Address: _____ Singapore ()
 Contact (Tel): _____ Mobile No.: _____
 Email Address: _____
 Date of Accident: 06/02/2022 Time of Accident: 19:40
 Place of Accident: BK by Lushok Borden Complex
 Insurance Company: Sampo

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

To change to own damage claim

 Policyholder / Driver's Signature
 Date:

 Reporting Centre Personnel's Signature
 Name: ROSE WONG
 NRIC/FIN No.: _____
 Date: 18/02/2022