

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 08/02/2022 17:26 (SGT)
Date of Accident 03/02/2022 22:50 (SGT)
Exact Location of Accident 7A Jln Punai, Singapore 418777
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBF6597A

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner SIANG HOCK HOLDING PTE LTD
Company Reg No 1XXXXX681M
Email Address sianghockholding@yahoo.com.sg
Mobile Phone No (Phone) +65-98792002
Alternative Phone No +65-98792002

VEHICLE PARTICULARS

Manufacturer Nissan
Model Nv200
Variant -
Exact purpose for which vehicle was being used at time of accident Employment
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Commercial vehicle
Transmission Manual
CC 1461

INSURANCE COMPANY

Name of Insurance Company MS First Capital Insurance Ltd
Type of Coverage Comprehensive
Fleet Policy Yes
Policy Number D-21097505MFCV/28
Cover Note Number -

DRIVER

Name of Driver SNG WEE MENG
NRIC No SXXXX407A

Date Of Birth	28/01/1983
Occupation	Outdoor
Date Of Driving Pass	24/03/2003
Driving experience	18 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90038088
Alt. Phone Number	-
Email Address	sianghockholding@yahoo.com.sg
Address	BLK 652 JALAN TENAGA
Address complement	#08-50
Postcode	410652
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?	No
Was any injured conveyed to hospital by ambulance?	-
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	Bedok Division Headquarters
Police Station Phone No	(Phone) +65-18002440000
Alt. Police Station Phone No	(Fax) +65-64443009
Police Station Address	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLIE REPORT:G/20220204/7014

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	UNKNOWN
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)	-


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' 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

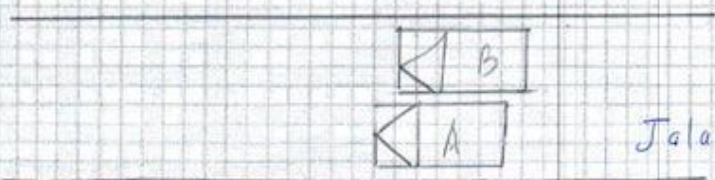



Driver's Signature (If driver is not the policyholder) / Date & Time

 08/02/22
Witnessed by Reporting Centre Personnel

Sketch Plan

A - GBF 6597A
B - UNKNOWN



Jalan Punga

TA

Describe Circumstances of the Accident

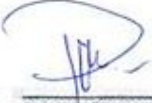
AS PER POLICE REPORT

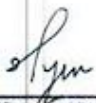
G/20220204/7014

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

 08/02/22
 Witnessed by Reporting Centre Personnel



**SINGAPORE
POLICE FORCE**



G/20220204/7014

1 of 2

POLICE REPORT (NP299)

Police Station Of Origin
Bedok Division HQ
30 Bedok North Road SINGAPORE 469676
Tel No:1800-2440000

Report No. G/20220204/7014

Date/Time Report Made 04/02/2022 10:36	Vide Report No.	Station Diary No.
Name Of Informant SNG WEE MENG	Address 652 JALAN TENAGA #08-50 SINGAPORE 410652	
ID Type / ID No. NRIC NO / S8304407A	Contact No. Home/Office:	Mobile: 90038088
Nationality SINGAPORE CITIZEN	Email Address RAVE_SNG@HOTMAIL.COM	
Occupation	Sex Male	Age 39
Other associate professionals nec	Date of Birth 28/01/1983	Race Chinese
Institution/School Name	Language English	
Date/Time Of Incident 03/02/2022 22:50 - 03/02/2022 22:55	Location Of Incident 7A JALAN PUNAI TATIANA TERRACE SINGAPORE 418777	

Brief details.

The above date and time, my vehicle GBF 6597 A was parking out Unit 7A along Jalan Punai when a vehicle drove pass my vehicle at an extremely high and smash my right car mirror. Instead of stopping to check on my vehicle damage, the car speed off. I immediately start my car hopping to catch a glimpse of the car's number plate however the car was too fast and i lost it. I immediately lodge a police report after that.

Subjects Involved

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: 04/02/2022 10:36
Officer In-Charge Of Case:	Classification Of Case:

This report is lodged at Geylang Serai NPP Kiosk 1

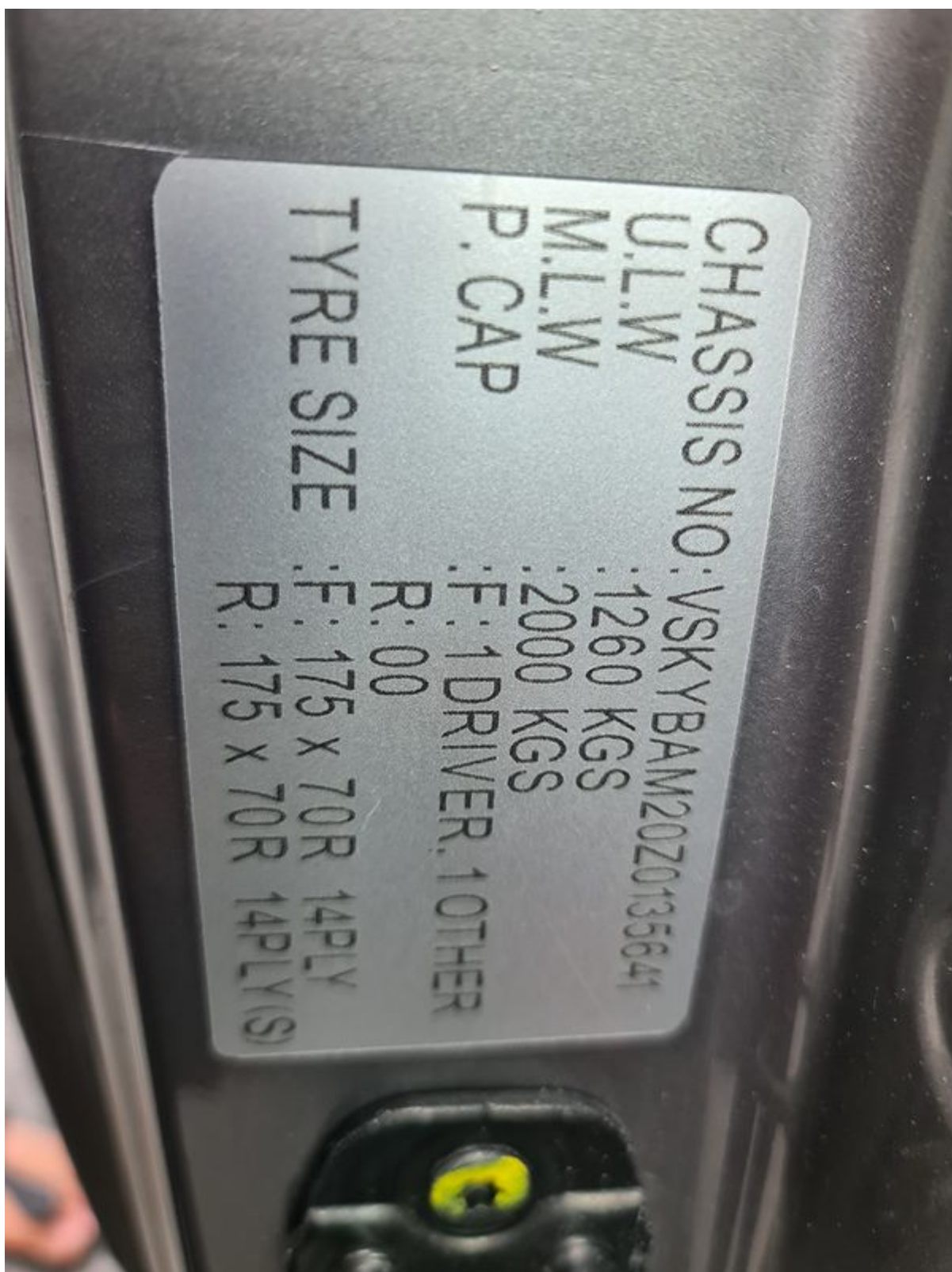
















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This report is lodged at Geylang Serai NPP Kiosk 1



**SINGAPORE
POLICE FORCE**



G/20220204/7014

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20220204/7014

Victim			
Person Name	SNG WEE MENG		
ID Type	NRIC NO	ID No	S8304407A
Gender	Male	Age	39
Race	Chinese	Language	English
Occupation	Other associate professionals nec	Address	652 JALAN TENAGA #08-50 SINGAPORE 410652
Mobile No	90038088	Is Informant A Victim?	Yes
Person Name	SNG WEE MENG (Informant)		

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: 04/02/2022 10:36
Officer In-Charge Of Case:	Classification Of Case:

This report is lodged at Geylang Serai NPP Kiosk 1