

# 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 ..... 05/02/2022 09:49 (SGT)  
Date of Accident ..... 03/02/2022 19:45 (SGT)  
Exact Location of Accident ..... Holland Dr, Singapore  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... PC4480R

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... BRICKSTON COACH PTE LTD  
Company Reg No ..... 2XXXXX911E  
Email Address ..... oswagan@brickston.com.sg  
Mobile Phone No ..... (Phone) +65-86884949  
Alternative Phone No ..... +65-92992347

### VEHICLE PARTICULARS

Manufacturer ..... Yutong  
Model ..... Zk6930h  
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 ..... Bus  
Transmission ..... Auto  
CC ..... 6690

### INSURANCE COMPANY

Name of Insurance Company ..... NTUC Income Insurance Co-operative Ltd  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... 5108172395-02-000011  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... TAN KEI HUAT  
NRIC No ..... SXXXX600I

Date Of Birth .....	05/05/1961
Occupation .....	Outdoor
Date Of Driving Pass .....	13/07/1981
Driving experience .....	40 YEARS AND 7 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-92992347
Alt. Phone Number .....	-
Email Address .....	oswagan@brickston.com.sg
Address .....	BLK 3 DOVER ROAD
Address complement .....	#12-350
Postcode .....	130003
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Employee
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 .....	Dover Neighbourhood Police Post
Police Station Phone No .....	(Phone) +65-18007788999
Alt. Police Station Phone No .....	(Fax) +65-67762859
Police Station Address .....	Blk 3 Dover Road #01-368 Singapore 130003
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT ( T/20220204/2082 )

#### 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 .....	YN8532J
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****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. 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 &amp; Time

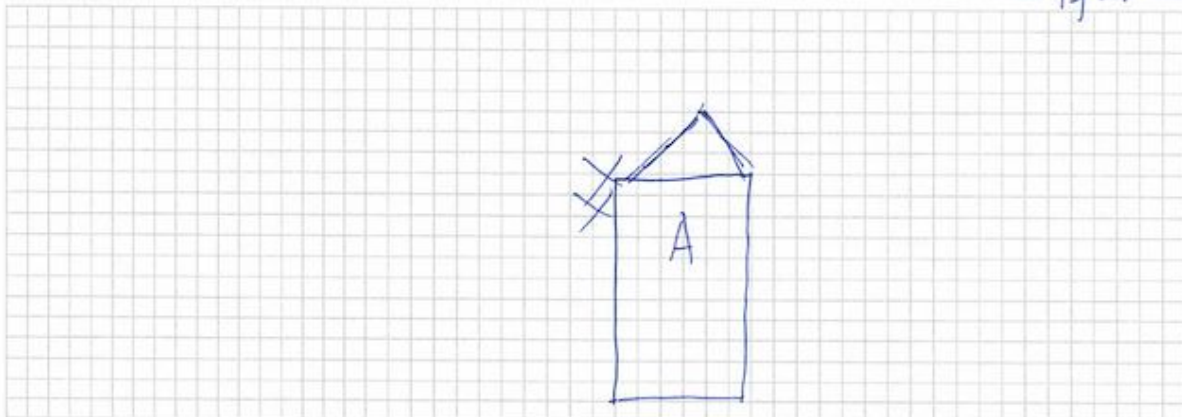


Driver's Signature (If driver is not the policyholder) / Date &amp; Time




Witnessed by Reporting Centre Personnel

Chang Aze Sing  
170w

**Sketch Plan**

Please refer to Police Report ( T/20220204/2082 )

We declare the foregoing particulars are true in every respect.



陈



Witnessed by Reporting Centre  
Personnel *Ang Chee Sing*  
*17 Jan*





























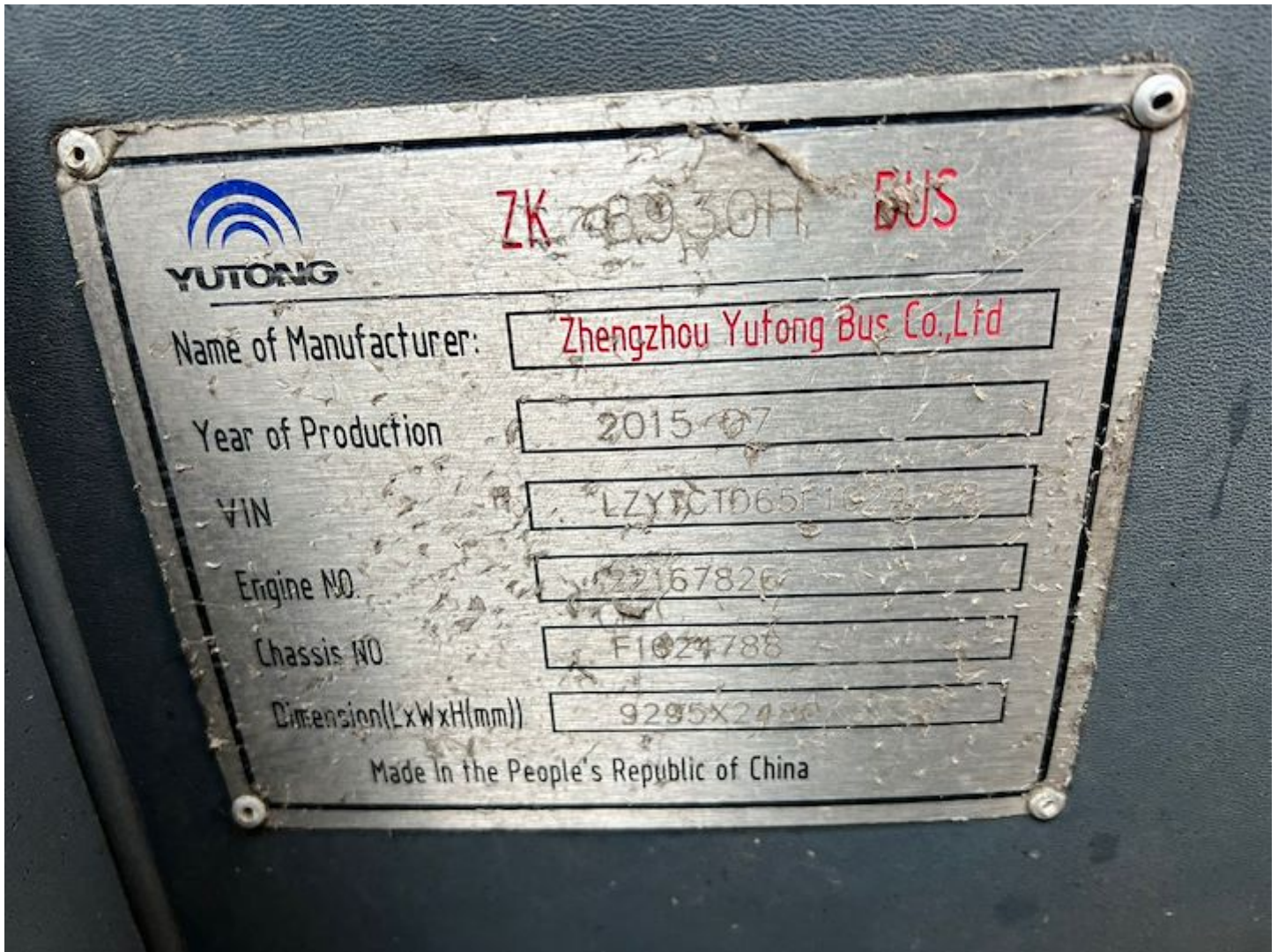










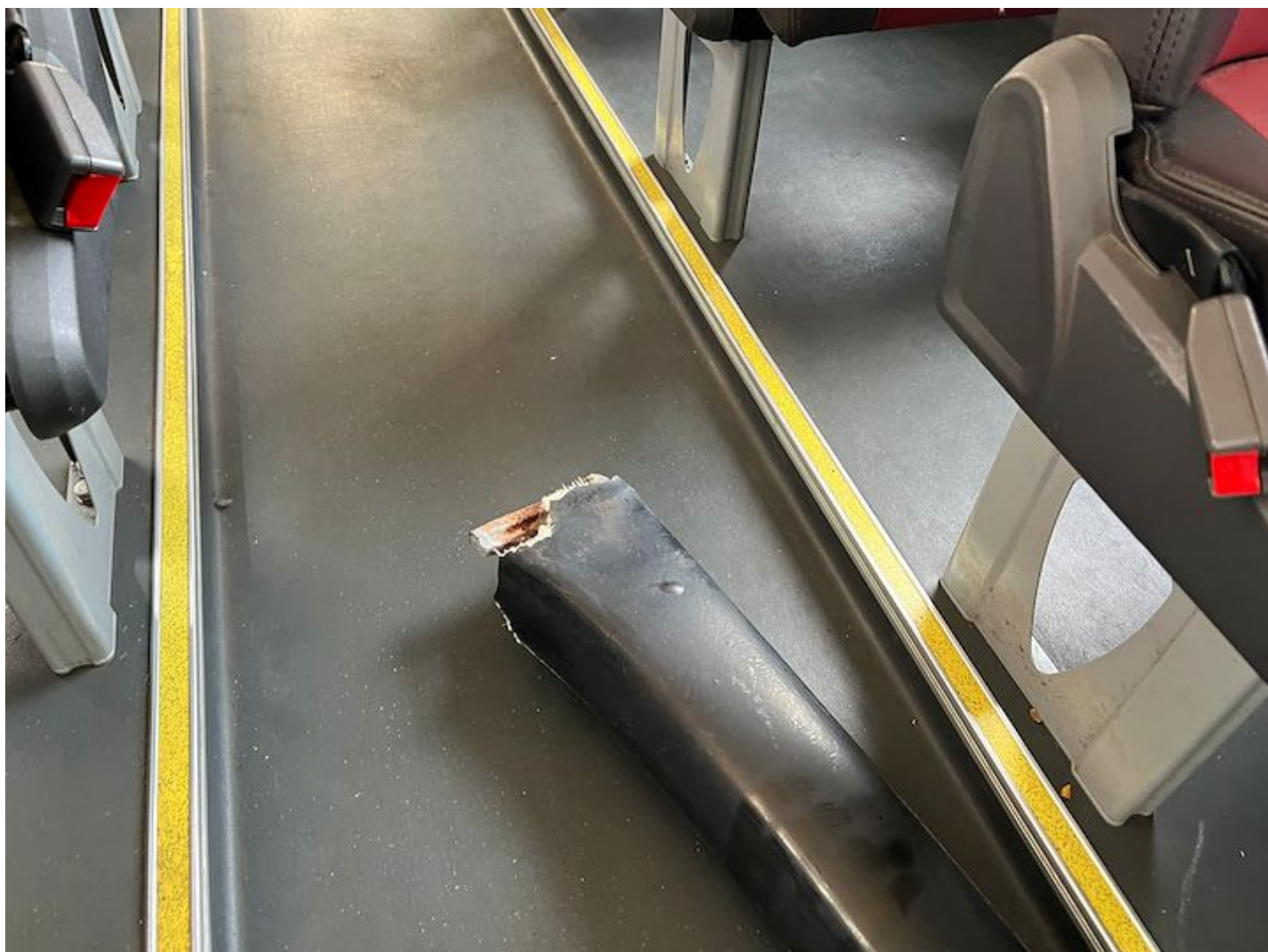






























**SINGAPORE  
POLICE FORCE**



T/20220204/2082

1 of 3

Police Station Of Origin:  
Dover NPP  
3 Dover Road #01-368 SINGAPORE 130003  
Tel No: 1800-7788999

Report No. T/20220204/2082

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 04/02/2022 20:22	Vide Report No.:	Station Diary No.: 24
--	------------------	--------------------------

**Informant's Particulars**

Name of Informant: TAN KEI HUAT			Address: APT BLK 3 DOVER ROAD #12-350 SINGAPORE 130003		
ID Type / ID No.: NRIC NO / S15086001			Contact No.: Home/Office: Mobile: 92992347		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 60	Date of Birth: 05/05/1961	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Bus driver			Driving Licence Information: Class: 3,4A,4,5 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 03/02/2022 19:45	Type of Location: Car Park
Location:  HOLLAND DRIVE				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 15 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: HIT AND RUN				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
PC4480R	Bus/Coach/Mi nibus	YUTONG	ZK6930H AUTO	Black	Slightly Damaged	0
YN8532J	Lorry	MITSUBISHI		White	No Damage	0





**SINGAPORE  
POLICE FORCE**



T/20220204/2082

Police Station Of Origin:  
Dover NPP  
3 Dover Road #01-368 SINGAPORE 130003  
Tel No: 1800-7788999

2 of 3

Report No. T/20220204/2082

CONTINUATION OF REPORT

**Brief Details.**

On 03/2/2022 @1945 hrs, I parked my M/Bus PC 4480R at one of the lot near Holland Drive market heavy vehicle carpark and left for home. On 04/02/2022 @ 0515 hrs, I went back to retrieve it but realized that my left wing mirror was broken and shifted from its original position. I then called up my boss. Subsequently my boss retrieved from the in vehicle camera and saw a white lorry YN8532J collided onto my bus and left the place. I was told by my boss to lodge a police report to claim the insurance of the other party. My left wing mirror was damaged due to the driver hit and run accident. No one was injured in this incident.



**SINGAPORE  
POLICE FORCE**



T/20220204/2082

Police Station Of Origin:  
Dover NPP  
3 Dover Road #01-368 SINGAPORE 130003  
Tel No: 1800-7788999

3 of 3

Report No. T/20220204/2082

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/

SR STAFF SGT LIM KIM HUAT

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

04/02/2022 20:22

Officer In Charge Of Case:

TP / HRT /

SR STAFF SGT IRMAN BIN MOHAMAD SAID  
Contact No.: 65476145



SINGAPORE  
POLICE FORCE

SN 61

Authentication Stamp

NP168

SIGNATURE

Classification Of Case: