

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	18/04/2022 19:11 (SGT)
Date of Accident	14/04/2022 10:00 (SGT)
Exact Location of Accident	297 Compassvale St, Singapore 540297
Additional Location Information	MULTI STOREY CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNF1300E
-----------------------------------	----------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LEE TUCK WAI ALEX
NRIC No	SXXXX977E
Email Address	lexy13lee@gmail.com
Mobile Phone No	(Phone) +65-98303230
Alternative Phone No	+65-98303230

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	E220d
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	1950

INSURANCE COMPANY

Name of Insurance Company	MSIG Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	A 300561967 QMX
Cover Note Number	-

DRIVER

Name of Driver	LEE TUCK WAI ALEX
NRIC No	SXXXX977E

Date Of Birth	20/11/1974
Occupation	Indoor
Date Of Driving Pass	22/07/1993
Driving experience	28 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98303230
Alt. Phone Number	+65-98303230
Email Address	lexy13lee@gmail.com
Address	BLK 298C COMPASSVALE STREET
Address complement	#10-88
Postcode	543298
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	Fire, explosion or lightning
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	1
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	No
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	Ang Mo Kio Division Headquarters
Police Station Phone No	(Phone) +65-18002180000
Alt. Police Station Phone No	(Fax) +65-64814246
Police Station Address	51 Ang Mo Kio Avenue 9 Singapore 569784
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT : F/20220414/0053 , AND F/20220418/7062.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

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 &
Time

Sketch Plan

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



 Witnessed by Reporting Centre
Personnel

No SKETCH AVAILABLE

Describe Circumstances of the Accident

— Please refer to the police report: F/20220414/0053. —

On 14 Apr 2022, I was driving the car from 0740-0845 hrs sending my kids to school and wife to work. After I parked my car at 0845 hrs, I went home. At around 0950 hrs, I received a call from the police informing me that my car caught fire and that it was already put out.

Declaration

I/We declare the foregoing particulars are true in every respect.

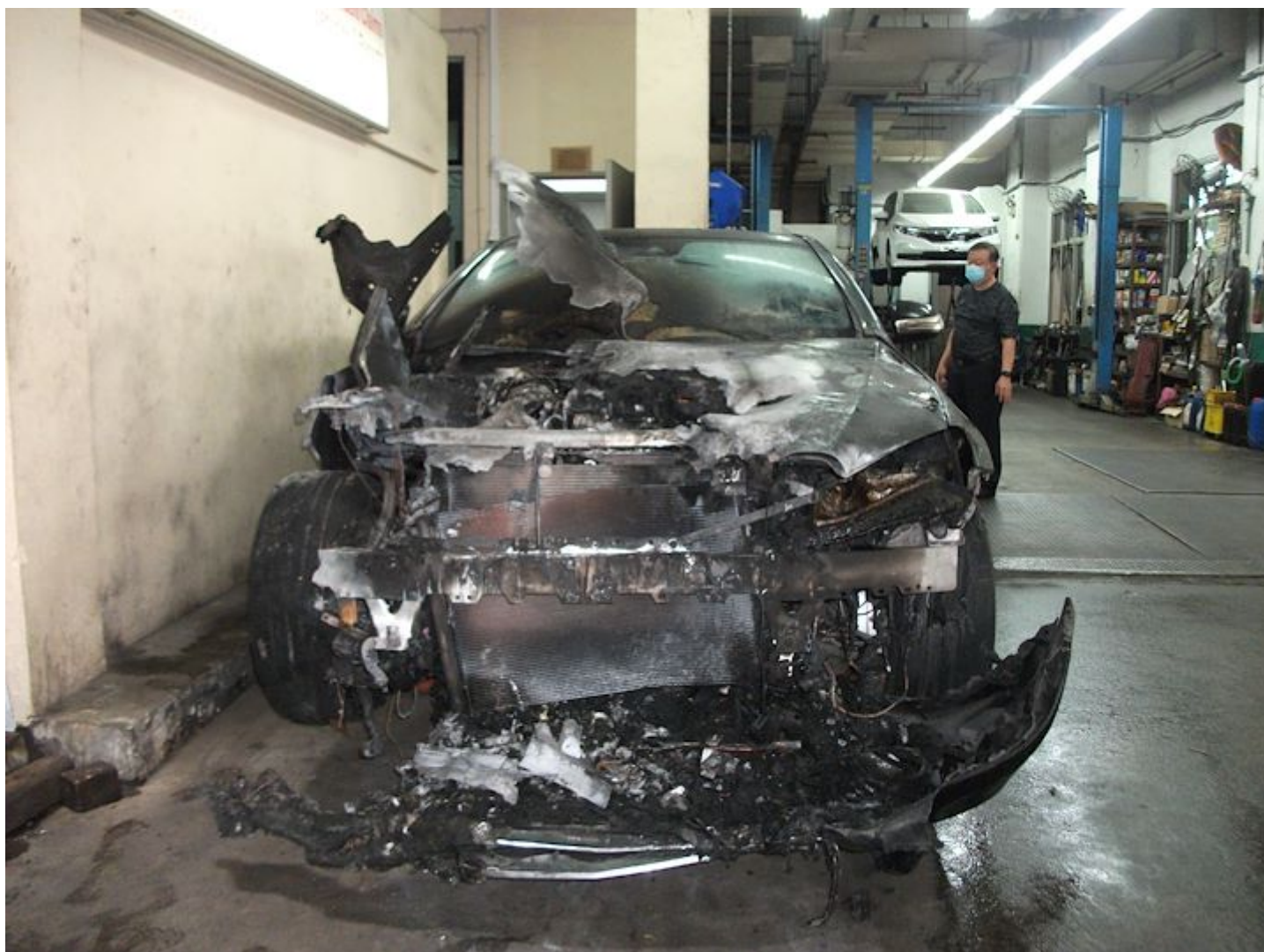


Policyholder's Signature / Date & Time

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



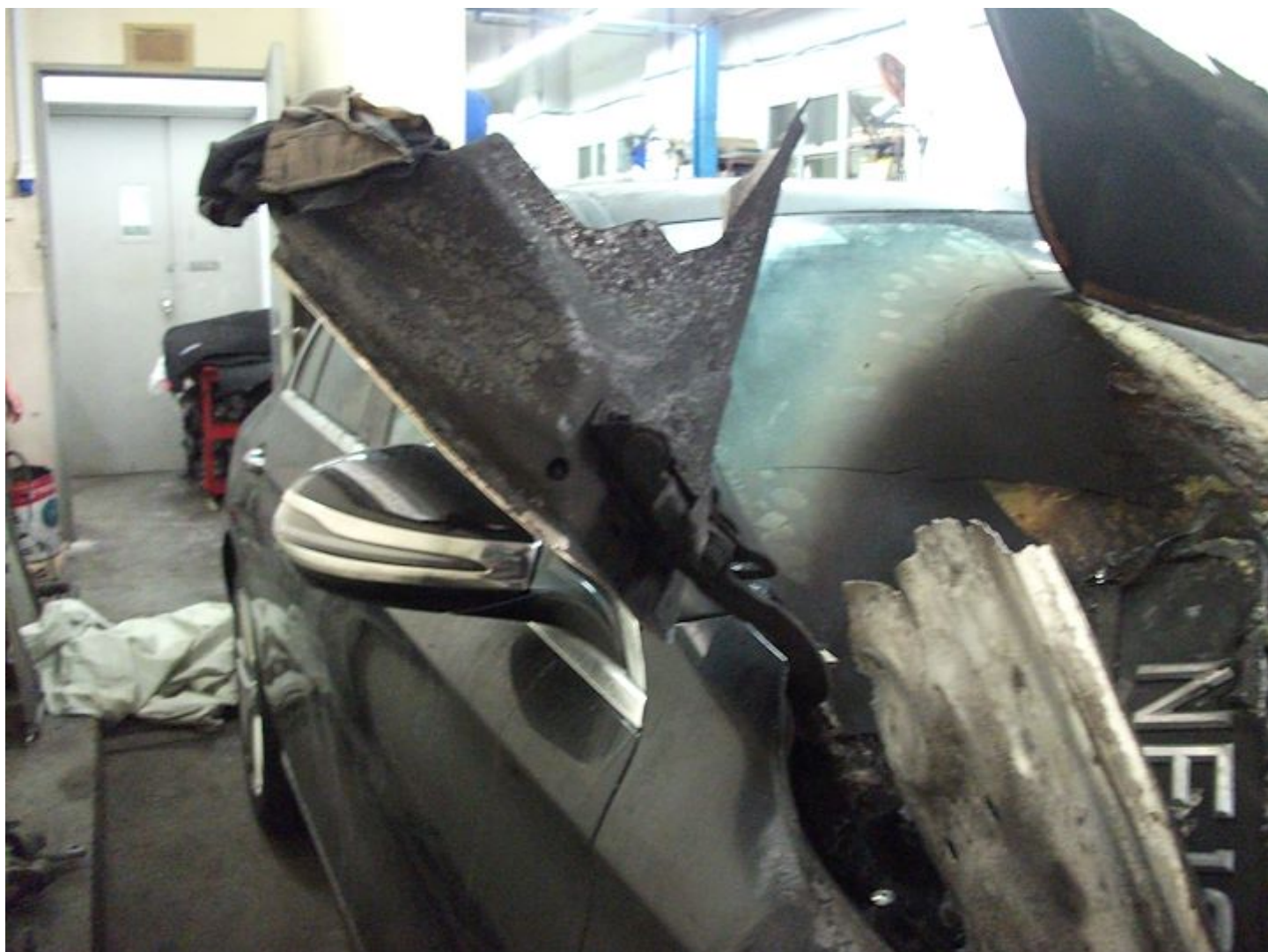
Witnessed by Reporting Centre Personnel































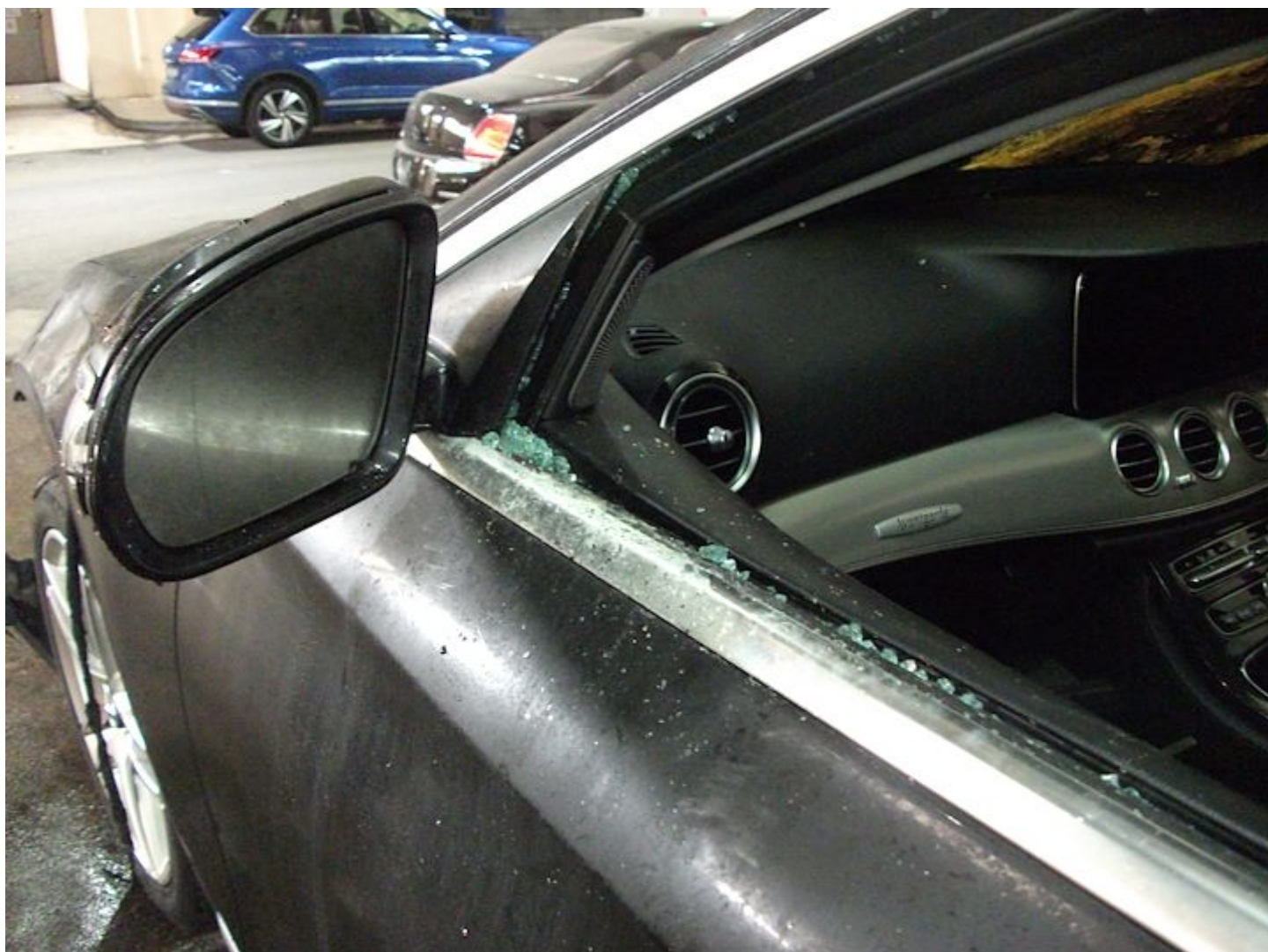


























SINGAPORE POLICE FORCE
SAFEGUARDING EVERY DAY

CASE CARD

Report Number : F/20220419/0033

Classification : Police Assistance Required

For queries, please contact:
IC: 10 200 111 TEL: 6218 1343

IBCC: 63167506 Email: SPPE_J_Div_Invest_Branch@spf.gov.sg NP319E (2019)

Actions Taken

☐ Advised to seek assistance from State Courts

☐ Advised to seek community mediation

☐ For further investigation (please turn overleaf)

☐ Others: _____

NP319E (2019)

QR Code

You may contact the Investigation Officer in charge if you need further clarification or have information to provide.

Police will inform you of the case outcome upon completion of investigation.

Police are investigating into your case. The Police may contact you or other witnesses to seek further information.

If further investigation is conducted:

1 of 2

Report No. F/20220418/7062

Date/Time Report Made 18/04/2022 19:46	Vide Report No.		Station Diary No.	
Name Of Informant LEE TUCK WAI, ALEX	Address 298C COMPASSVALE STREET #10-88 SINGAPORE 543298			
ID Type / ID No. NRIC NO / S7438977E	Contact No. Home/Office: Mobile: 98303230			
Nationality SINGAPORE CITIZEN	Email Address LEXY13LEE@GMAIL.COM			
Occupation Management executive	Sex Male	Age 47	Date of Birth 20/11/1974	Race Chinese
Institution/School Name	Language English			
Date/Time Of Incident 14/04/2022 08:45 - 14/04/2022 10:00	Location Of Incident 297 COMPASSVALE STREET #01-A MULTI STOREY CAR PARK SINGAPORE 540297			

Prior to the discovery of the fire, I sent my children to school at around 0730hrs and my wife to work thereafter. I got home at around 0840hrs and parked my car before heading home. I was informed by the police at about 1000hrs of the fire which had been put out by SCDF.

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

Date/Time:
18/04/2022 19:46

Classification Of Case:



**SINGAPORE
POLICE FORCE**



F/20220418/7062

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20220418/7062

A police case card was issued to me.
Report Number : F/20220414/0053
Classification : Police Assistance Required
OIC : IO Sanjit

I was advised by the accident reporting centre to make this police report.

Subjects Involved			
Victim			
Person Name	LEE TUCK WAI, ALEX		
ID Type	NRIC NO	ID No	S7438977E
Gender	Male	Age	47
Race	Chinese	Language	English
Occupation	Management executive	Address	298C COMPASSVALE STREET #10-88 SINGAPORE 543298
Mobile No	98303230	Is Informant A Victim?	Yes
Person Name	LEE TUCK WAI, ALEX (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: 18/04/2022 19:46
Officer In-Charge Of Case:	Classification Of Case:



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: SLOX224I0001 Vehicle Registration No: SNF 1300E
 Name (as shown in NRIC): LEE TUCK WAI ALEX NRIC/FIN/Passport No: S7438977E
 (*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate
 Address: Blk 298C Compassvale Street #10-88 Singapore (543298)
 Contact (Tel): _____ Mobile No.: 9830 3230
 Email Address: lexy13lee@gmail.com
 Date of Accident: 14/04/2022 Time of Accident: 10:00
 Place of Accident: 297 Compassvale Street (Multi Storey Carpark)
 Insurance Company: _____

(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:

Attach police report: F/2022 0418/7062.

 Policyholder / Driver's Signature
 Date:

 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:
 Date: 19/4/22

CRATAC Addendum Form