# **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 witholding 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.

- 4. The issue and acceptance of this is form by instrained 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 27/04/2022 17:13 (SGT) Date of Accident 27/04/2022 00:00 (SGT) Exact Location of Accident 101 Bedok North Rd, Singapore 469678 Additional Location Information SPC EXIT Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Maserati

Vehicle Registration Number SLV60T

#### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner TOH XUANLI LINDEN NRIC No. SXXXX164H Email Address linden toh@hotmail.com Mobile Phone No (Phone) +65-90706688 Alternative Phone No +65-90706688

#### VEHICLE PARTICULARS

Manufacturer

Model **GRANTURISMO** 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? No - Claiming third party Vehicle Category Private car Transmission Auto CC 4244

#### **INSURANCE COMPANY**

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number DMPCSNW00209482100 Cover Note Number

## DRIVER

Name of Driver **TOH XUANLI LINDEN** NRIC No. SXXXX164H

Date Of Birth 06/08/1988 Occupation Outdoor Date Of Driving Pass 11/03/2009 Driving experience 13 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-90706688 Alt. Phone Number +65-90706688 Email Address linden toh@hotmail.com Address BLK 424 PASIR RIS DRIVE 6 #03-101 Address complement Postcode 510424 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 Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο PASSENGER 1 Name NEO HUIWEN, CLAIRENCE Gender Female DETAILS OF POLICE ACTION Was the accident reported to the police? 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 PLEASE REFER TO SKETCH AND POLICE REPORT G/20220427/7002 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** 

SHD5341S

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model Vehicle Variant	-
Vehicle Colour	_
Vehicle Category	Taxi
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 PLAW

#### IMPORTANT NOTICE

- 1. Fisses report correctly the details of the spoiders to speed up the claims process.
- 2. Tivis Formmust be computated by the Policyholder and/or the Authorised Driver.
- Information provided trust the as trustified and ecourate as executive. Any will dispresentation of withholding of material facts may albur insurance companies to requeste to confict liability.
- 4. This leave and acceptance of this Formity basis ance compensas is not an edistaston of policy teletity on the part of the insurance
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The report will be force anded by the begrees of the GBA Records Management Centre established by the General Association of Singapore (GIA) for excluding and that copies of this report will far a fee be made evaluable upon application by interested parties.
- 7. By the lodgement of this report to the impurers, you turnly consent to the archiving of this report at the cardin and in copies of the
- rapori being meda evalishis eroreesid.
- a. Consent under the Personal Esta Protession Act (PDPA)
- Lunderstand, acknowledge, egree and consent that :
- (a) My harmer , my to prishing and the General Insurance Association of Singapore ("GIA") maybre permitted to collect, use, elsotions (a) of neural, by a cosmitted we were a neural cosmic execution of angigner (1914) mylere permise in correct, we, distinct and/or process my personal debutycersonal information set out in the fixed and other personal information by an or passessed by my insurer (collectively the "Personal Information") and distinct particular such Sersonal Information to all insurer(s) who have insured vehicle(s) involved in this accident (af insurer(s) who have insured vehicle(s) involved to this accident shall be collectively referred to as the "insurers"; the insurers' tonyeration force, the information of Singapore and any relevant government agency/suthority (such as the police), for the paperse(s) of :
- (i) processing, handing and/or dealing with my claims including the settlement of the claims and any nonessary investigations relating to the claims:
- (ii) investigating the encident antiformy cients;
- (6) corrying out moder deating with my instructions or responding to any acquiries by mat
- (b) administrating my claims (healeding the making of correspondence, statements, involves, reports or notices to me, which could involve disclosure of carried parametrists should not be bring about delivery of the series as well as on the external cover of enveloperatural packages); and/or
- (v) complying with applicable law in administrating processing, harding and/or deeping with my claims.
- (collectively the "Purposes")
- (a) all except(s) who have haved validate) involved in this sockland and the havenur law yearsize from may one penalted to color. use, disclose and/or process my Personal information for one of mure of the above Purposes; and
- (c) my Parannal Information marylesh has disclassed by any of the incorers profer Gift to State White party service providers or agents (hughding their are yearshed films), which may be sited outside of Singapora, for one or more of the above Purposer.

Policyholder's Signature / Data 5

Orivar's Signature (If driver is not the policyholder) / Dale

IN

(OC/ Va)

Skeich Plan

101 BEDOK NORAL ROOM SPC

A) SW 607 B) SHD 5841S



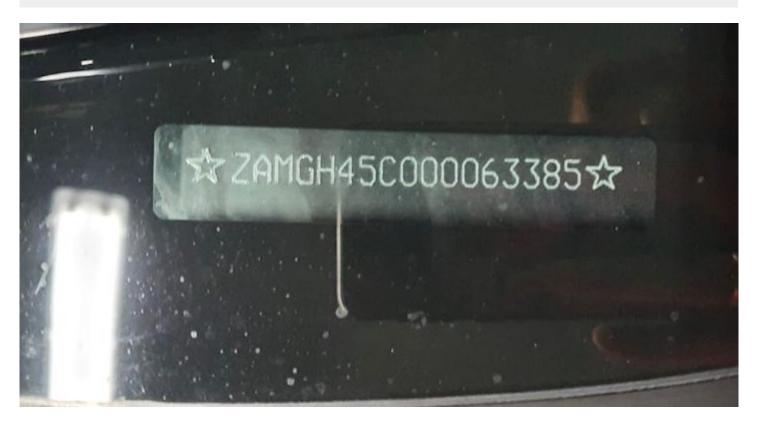
ten or my man	to exit the pital kings. Vilide B com
_ NE 0 3 13	
from our exit only	long out collected into my while of a
partin	
	7
POLICE REGION (	(1/20 2):0427/7002
on	
the foregoing particulars are true in every r	24444

Criver's Signature (if driver is not the policyholder) / Oste & Time

Policyholder's Signature / Date 2. Time







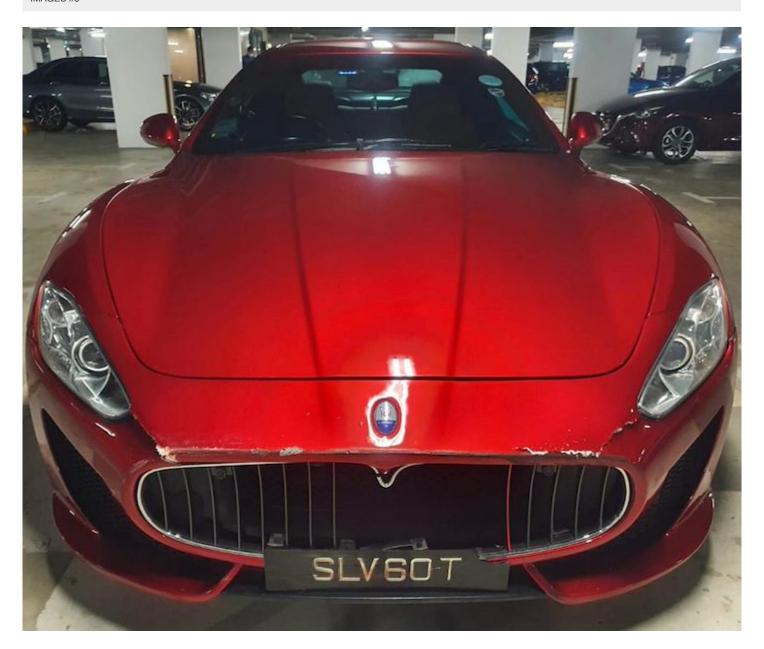
















1 of 3

Report No. G/20220427/7002

# POLICE REPORT (NP299)

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

Date/Time Report Made 27/04/2022 03:10	Vide Re	port No.			Station Diary No.
Name Of Informant TOH XUANLI, LINDEN	Address 424 PAS		IVF 6 #03-1	101 SIN	NGAPORE 510424
ID Type / ID No. NRIC NO / S8833164H	Contact Home/C	No.	Mobile: 90706		TON: ONE STORES
Nationality SINGAPORE CITIZEN	Email Address LINDEN TOH@HOTMAIL.COM				
Occupation	Sex	Age	Date of	Birth	Race
Real estate agent	Male	33	06/08/1	988	Chinese
Institution/School Name	Language English				
Date/Time Of Incident 27/04/2022 00:00 - 27/04/2022 00:30	Location Of Incident 101 BEDOK NORTH ROAD SPC BEDOK SINGAPORE 469678				

# Brief details.

At 12am+ I was at Bedok north SPC petrol station(101 Bedok North Rd, S469678) pumping petrol and washing my car. As I exited the car wash to allow the washers to dry my car, a red Transcab taxi with number plate SHD5341S was speeding into the exit only lane and hit the front of my car.

- -the taxi entered the petrol station from the main road via the exit only part of the petrol station
- -the taxi was speeding when he entered
- -when he hit my car he did not stop but continued to drive away fast

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: 27/04/2022 03:10		
Officer In-Charge Of Case:	Classification Of Case:		



G/20220427/7002

2 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20220427/7002

- -It was a hit and run
- -the taxi drove towards the other exit of the petrol station and was about to drive out
- -I drove after him and stopped my car such that the front of my car was blocking his car
- -proceeded to call 999 and 2 TP were sent down
- -I tried to ask to exchange contact number and the police also asked him to exchange contact number with me but he completely refused to do so
- -the police took down my particulars as well as the taxi driver's particulars

The police passed me the case card Report number G/20220427/0008 Classification PAR

INSP Vijay 62449999

I have the photos and videos but I cannot seem to upload to this system.

Subjects Involve	9		THE RESERVE ASSESSMENT OF THE PARTY OF THE P
Suspect			
Person Name	Driver of SHD5341S		
ID Type	OTHERS / Car plate number	ID No	SHD5341S
Gender	Male	Habits & Oddities	I have the taxi driver's photo

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: 27/04/2022 03:10		
Officer In-Charge Of Case:	Classification Of Case:		





20220427/7002

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20220427/7002

Person Name	TOH XUANLI, LINDEN		
ID Type	NRIC NO	ID No	S8833164H
Gender	Male	Age	33
Race	Chinese	Language	English
Occupation	Real estate agent	Address	424 PASIR RIS DRIVE 6 #03- 101 SINGAPORE 510424
Mobile No	90706688	Is Informant A Victim?	Yes

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: 27/04/2022 03:10		
Officer In-Charge Of Case:	Classification Of Case:		