

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	01/06/2022 14:31 (SGT)
Date of Accident	31/05/2022 13:20 (SGT)
Exact Location of Accident	5067 Ang Mo Kio Ind Park 2, Singapore 569570
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP3146S
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	NAHAR BIN ABDUL AZIZ
NRIC No	S8105386C
Email Address	nahar_aziz@yahoo.com.sg
Mobile Phone No	(Phone) +65-92388403
Alternative Phone No	+65-92388403

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Vezel
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	1500

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5125299706
Cover Note Number	Cover Type Information Sum Insured Annual Gross Premium Standard Gross Premium Standard Net Premium Adjusted Net Premium drive CLASSIC

DRIVER

Name of Driver	NAHAR BIN ABDUL AZIZ
NRIC No	S8105386C
Date Of Birth	17/02/1981
Occupation	Indoor
Date Of Driving Pass	04/01/2004
Driving experience	18 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92388403
Alt. Phone Number	+65-92388403
Email Address	nahar_aziz@yahoo.com.sg
Address	BLK 214 #02-254 PASIR RIS STREET 21
Address complement	-
Postcode	510214
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	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

REFER TO SKETCH PLAN / POLICE REPORT

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	VIDEO SIZE LARGE TO UPLOAD
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBH9672K
Vehicle Manufacturer	Toyota
Vehicle Model	Dyna

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	UNKNOWN
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INCOME MOTOR SERVICE CENTRE

Report No: M1

D.O.A: 31.05.2022

Time: 00:01 hrs

Report Date & Start Time: 01.06.2022 14:04

Vehicle No: SLP3146S

Reporting Type:


SKETCH PLANIMPORTANT NOTICE

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8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

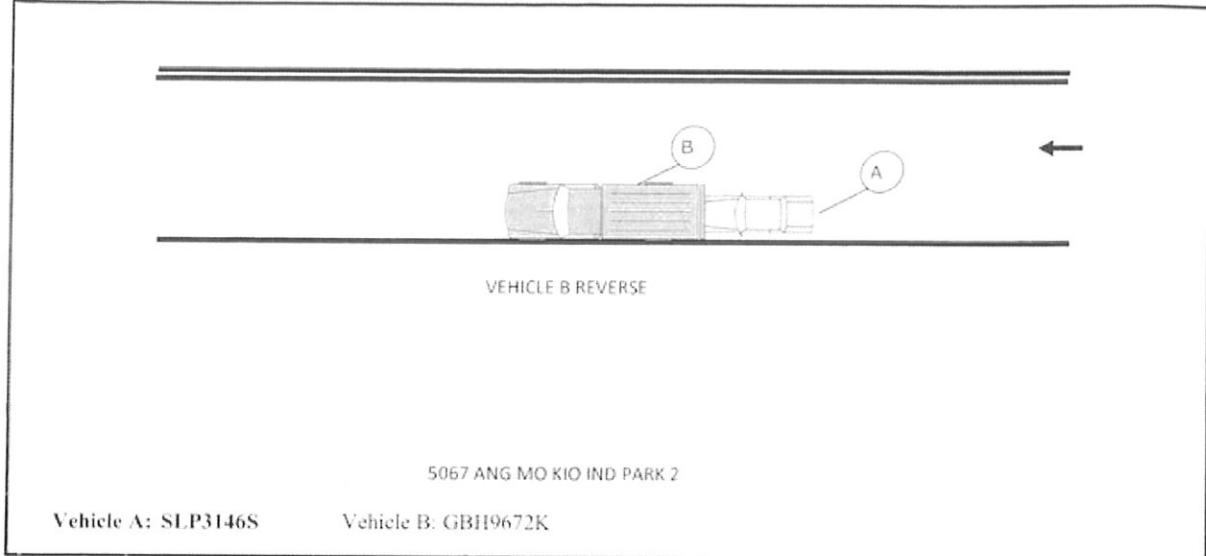
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.


 01/06/22 / 14:04
 Policyholder's Signature / Date & Time

 01/06/22 / 14:04
 Driver's Signature (If driver is not the policyholder) / Date & Time


 Ganesh (S993561)
 Customer Care Executive
 Motor Service Centre
 Witnessed by Reporting Centre Personnel

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report No. F/20220601/7004

Declaration

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

 01/06/22 / 14:04
Policyholder's Signature / Date & Time

01/06/22 / 14:04
Driver's Signature (If driver is not the policyholder) / Date & Time


Ganesh (S993561)
Customer Care Executive
Motor Service Centre
Witnessed by Reporting Centre Personnel



**SINGAPORE
POLICE FORCE**



E/2023/0501/7004

1 of 2

POLICE REPORT (NP299)

Report No. F/20220801/7004

Police Station Of Origin
Ang Mo Kio Division HQ
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No:1800-2180000

Date/Time Report Made 01/06/2022 01:19	Vide Report No.	Station Diary No.		
Name Of Informant NAHAR BIN ABDUL AZIZ	Address 214 PASIR RIS STREET 21 #02-254 SINGAPORE 510214			
ID Type / ID No. NRIC NO / S8105388C	Contact No. Home/Office:	Mobile: 92388403		
Nationality SINGAPORE CITIZEN	Email Address nahar_aziz@yahoo.com.sg			
Occupation	Sex	Age	Date of Birth	Race
Printer	Male	41	17/02/1981	Malay
Institution/School Name	Language English			
Date/Time Of Incident 31/05/2022 13:20 - 31/05/2022 13:25	Location Of Incident 5067 ANG MO KIO INDUSTRIAL PARK 2 ANG MO KIO INDUSTRIAL PARK 2 SINGAPORE 569570			

Brief details.

I wish to report a hit & run incident on my parked car (SLP3146S) by a lorry with a plate number of GBH9672K. The mentioned driver reversed straight onto my parked car while trying to exit out from the parking lot. After hitting my car, the driver simply drove off from the scene without leaving any note on my windshield.

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: 01/06/2022 01:19
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



F/20220601/7004

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20220601/7004

Suspect			
Person Name	Unknown		
Gender	Unknown	Habits & Oddities	GBH9672K
Victim			
Person Name	NAHAR BIN ABDUL AZIZ		
ID Type	NRIC NO	ID No	S8105386C
Gender	Male	Age	41
Race	Malay	Language	English
Occupation	Printer	Address	214 PASIR RIS STREET 21 #02-254 SINGAPORE 510214
Mobile No	92388403	Is Informant A Victim?	Yes
Person Name	NAHAR BIN ABDUL AZIZ (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: 01/06/2022 01:19
Officer In-Charge Of Case:	Classification Of Case: