

# 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 ..... 14/06/2022 19:35 (SGT)  
Date of Accident ..... 14/06/2022 13:00 (SGT)  
Exact Location of Accident ..... Toh Yi Dr, Singapore  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SNE8640H

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... WONG WEI YONG  
NRIC No ..... S6943065A  
Email Address ..... fran.wong@yahoo.com.sg  
Mobile Phone No ..... (Phone) +65-90529288  
Alternative Phone No ..... +65-90529288

### VEHICLE PARTICULARS

Manufacturer ..... Audi  
Model ..... A3 SEDAN 1.0 TFSI S TRONIC (LED)  
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 ..... 999

### INSURANCE COMPANY

Name of Insurance Company ..... NTUC Income Insurance Co-operative Ltd  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... 5127510511  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... CHEN SHIH HSIANG CHRISTOPHER  
NRIC No ..... S9471835Z

Date Of Birth .....	21/09/1994
Occupation .....	Indoor
Date Of Driving Pass .....	21/05/2015
Driving experience .....	7 YEARS AND 1 MONTH
Gender .....	Male
Mobile Number .....	(Phone) +65-96187507
Alt. Phone Number .....	-
Email Address .....	CHRISTOPHERCHEN1994@GMAIL.COM
Address .....	BLK 9 TOH YI DRIVE
Address complement .....	09-321
Postcode .....	590009
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Child
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

-

#### 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 .....	SUBMIT TO INSURANCE
Was there any audio recorded? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SHC8037G
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 PLAN****IMPORTANT NOTICE**

1. Please report correctly the details of the accident to speed up the claims process.
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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")

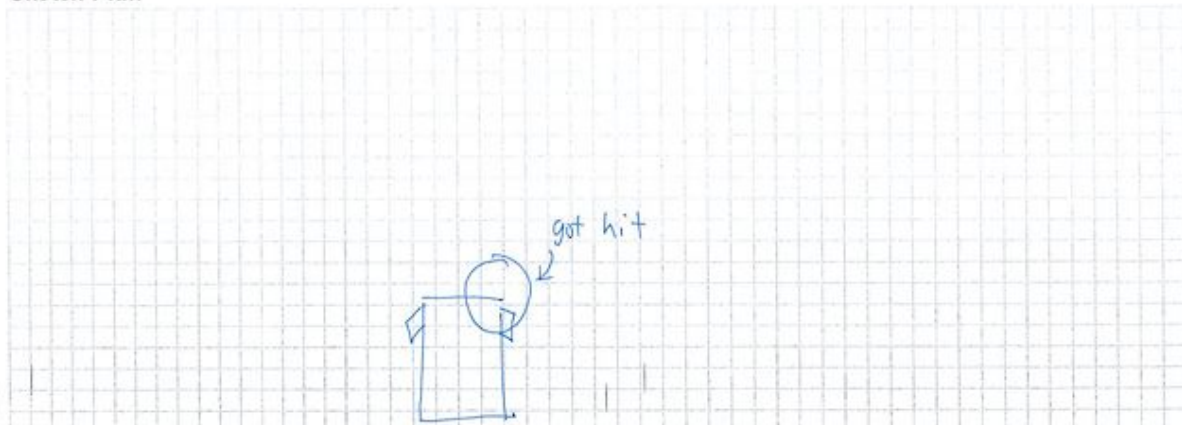
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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

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

Witnessed by Reporting Centre Personnel

**Sketch Plan**

## Describe Circumstances of the Accident

[illegible]

## Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &  
Time

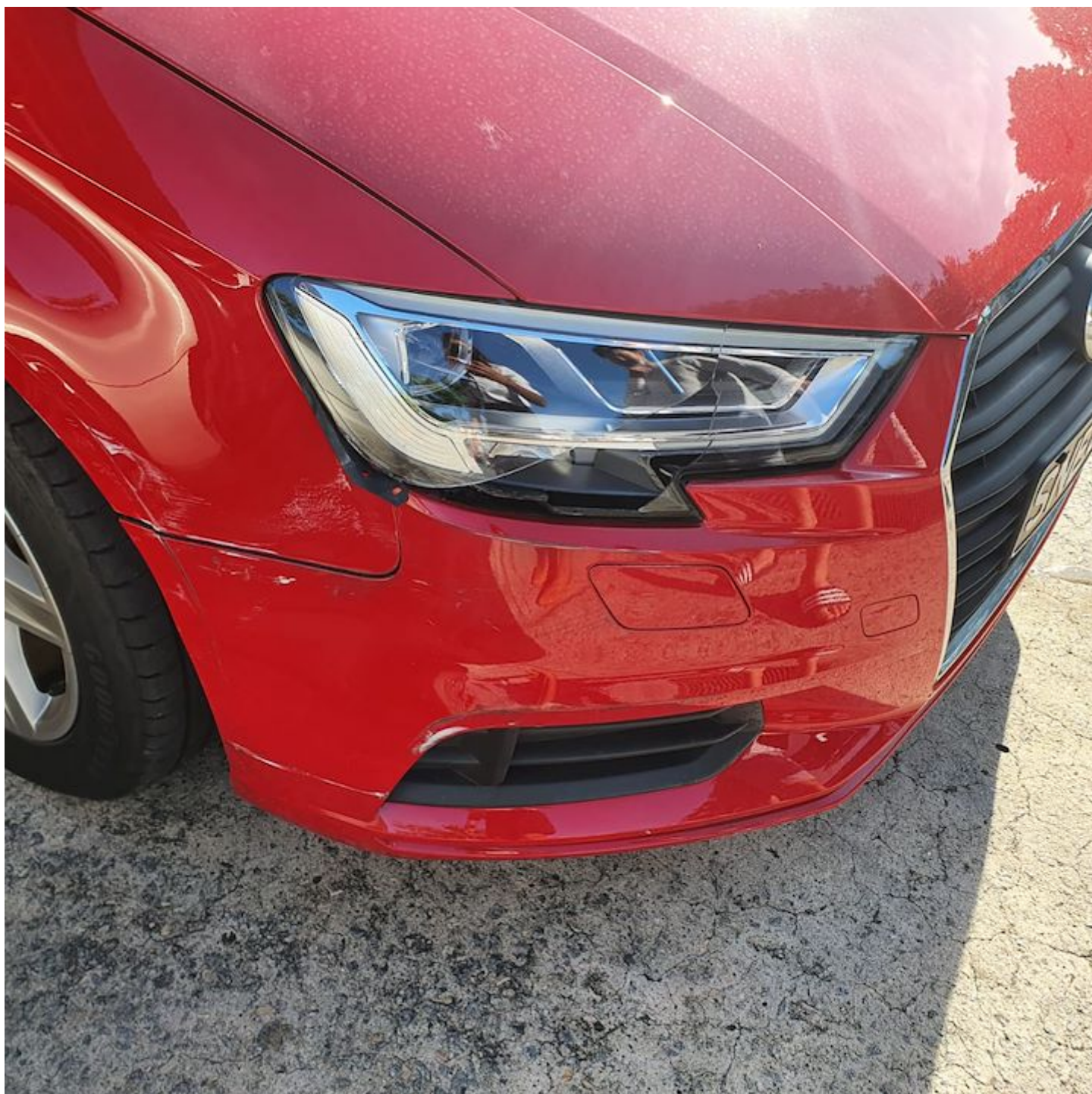
Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre  
Personnel

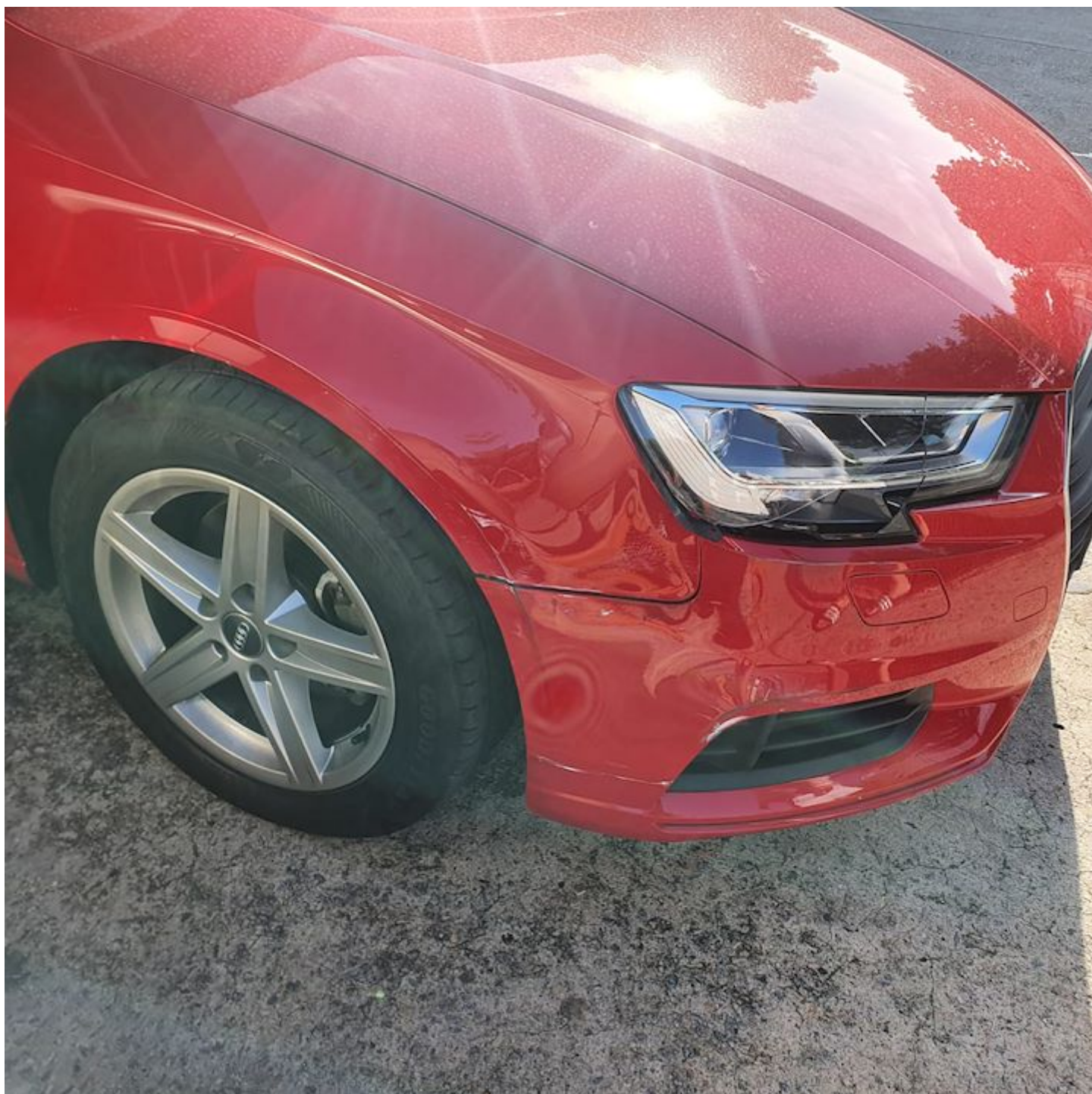








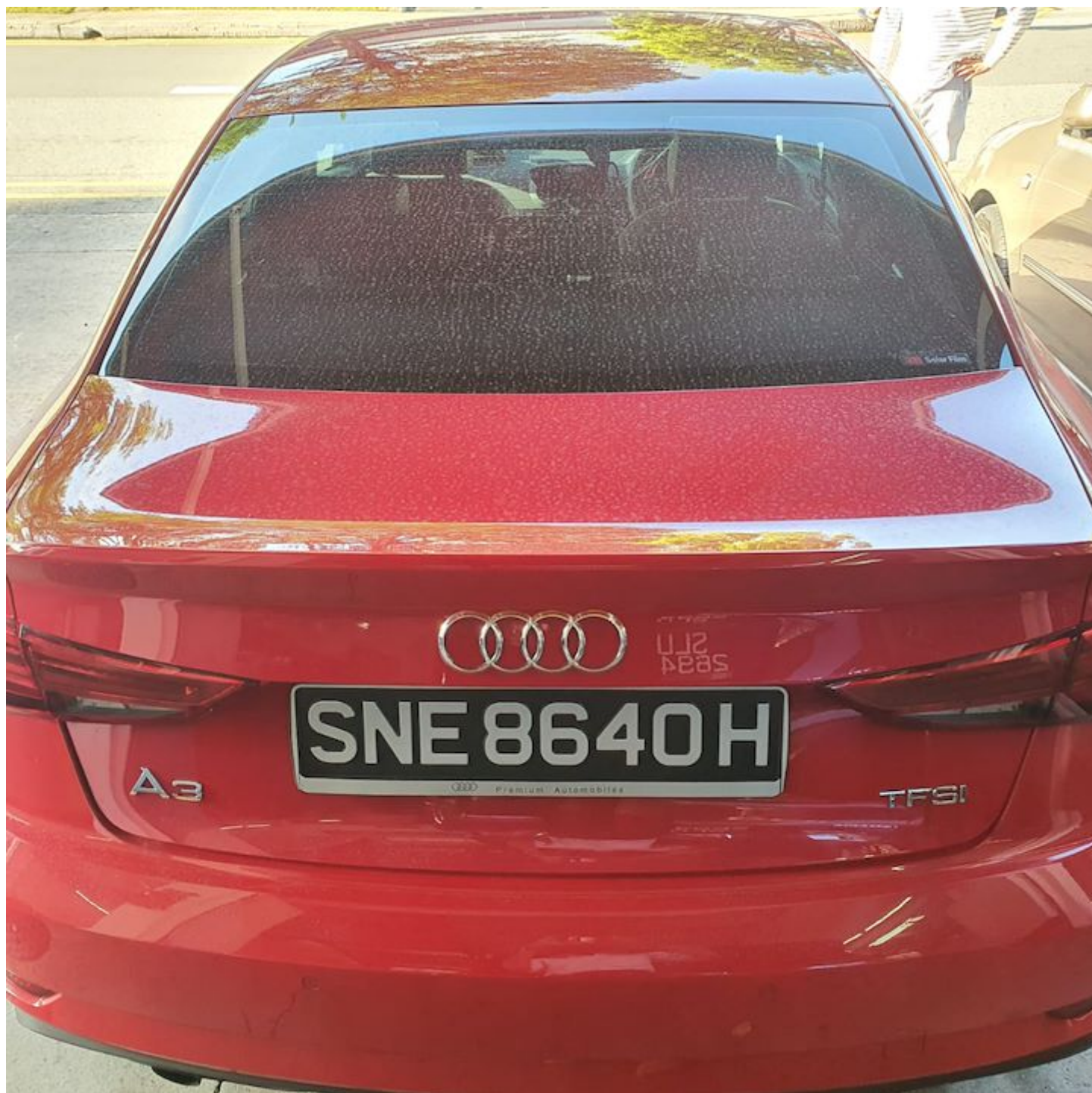


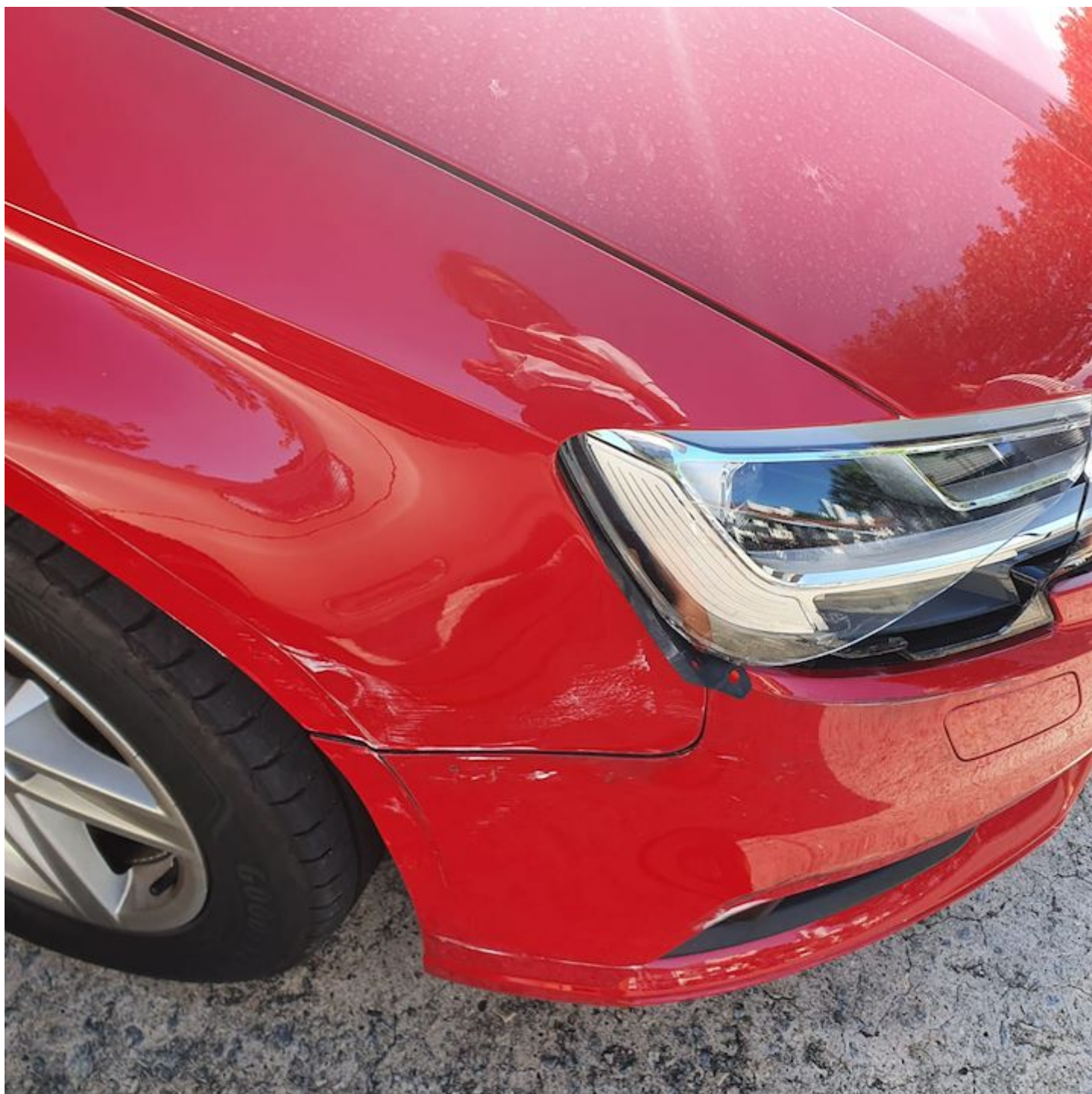














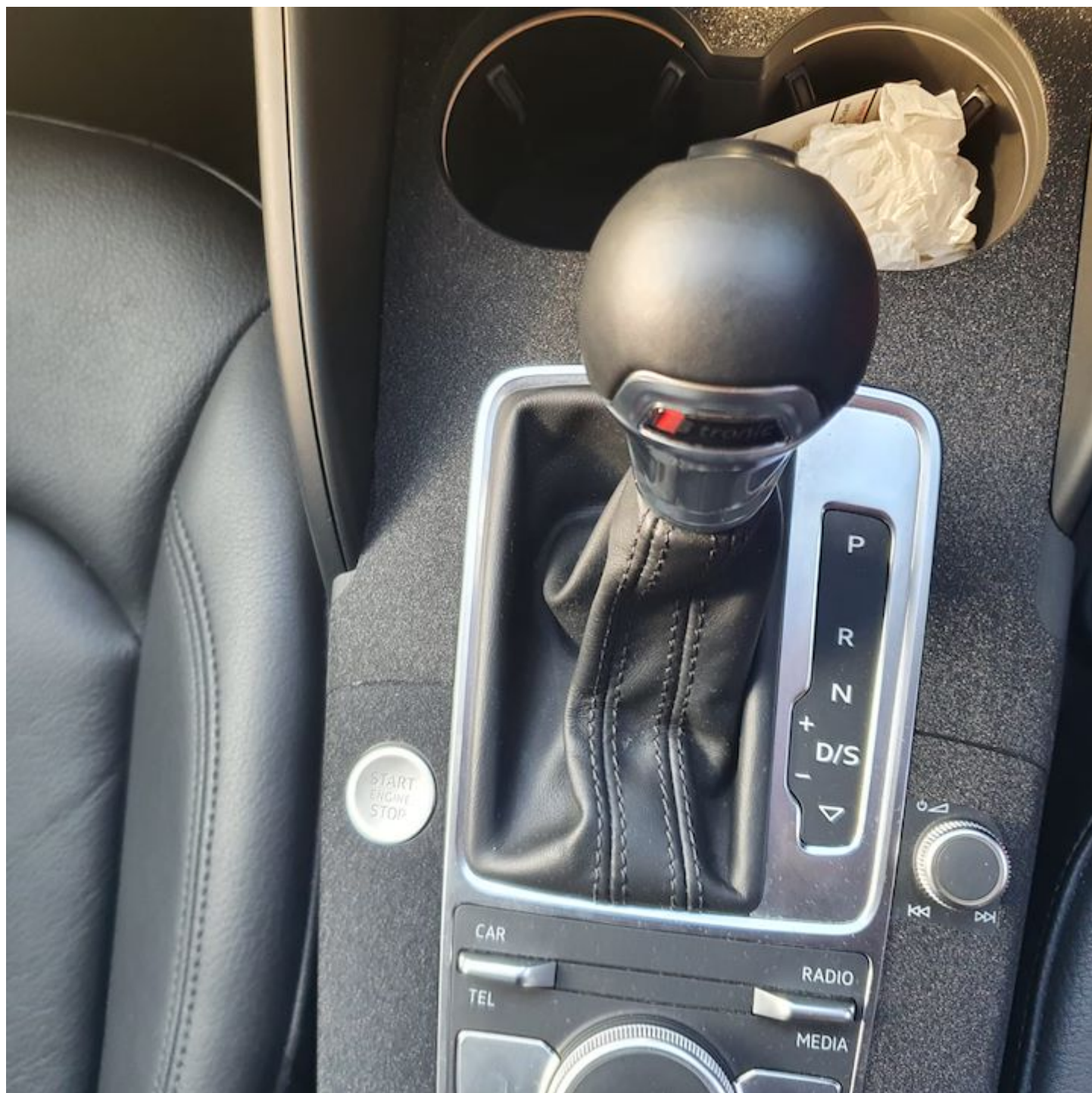














**SINGAPORE  
POLICE FORCE**



T/20220614/2062

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

1 of 3

Report No. T/20220614/2062

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 14/06/2022 16:27	Vide Report No.:	Station Diary No.: 7
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Informant's Particulars			
Name of Informant: CHEN SHIH HSIANG CHRISTOPHER		Address: APT BLK 9 TOH YI DRIVE #09-321 SINGAPORE 590009	
ID Type / ID No.: NRIC NO / S9471835Z		Contact No.: Home/Office: Mobile: 96187507	
Nationality: TAIWANESE		Email:	
Sex: Male	Age: 27	Date of Birth: 21/09/1994	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: BANK ANALYST		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 14/06/2022 13:00	Type of Location: Car Park
Location:  TOH YI DRIVE				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SNE8640H	Car	AUDI	A3	Red	Seriously Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20220614/2062

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

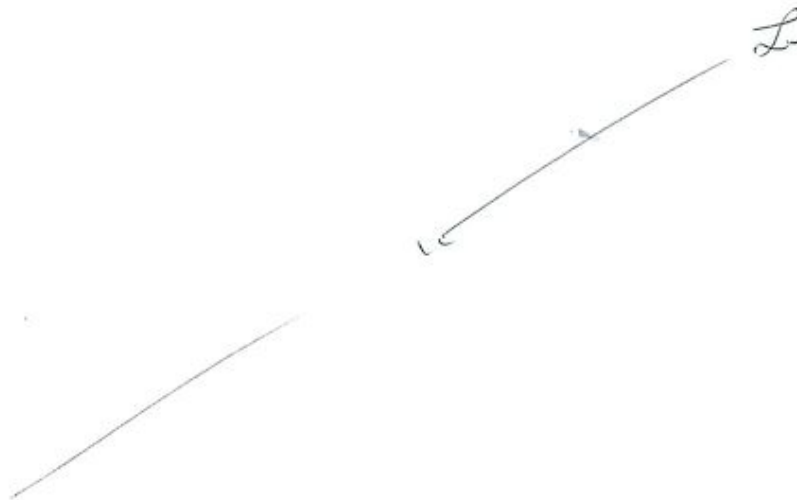
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Report No. T/20220614/2062

**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 /

Other MUHAMMAD ZAMIR BIN  
MAZELAN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

14/06/2022 16:27

Officer In Charge Of Case:

TP / HRT /

Other SUFIYAN BIN KHAIRI

Contact No.: 65476148

Classification Of Case:

NP168





**SINGAPORE  
POLICE FORCE**



T/20220614/2062

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

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Report No. T/20220614/2062

**CONTINUATION OF REPORT**

Driver			
Name	CHEN SHIH HSIANG CHRISTOPHER	ID No.	S9471835Z
Related Vehicle	SNE8640H (Car)	Contact No.	96187507
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 13/06/22 at about 2300hrs, I had parked my vehicle registration number SNE8640H at the open HDB carpark 'CLTY2' located in front of block 9 Toh Yi Drive. It was to the left side of the mentioned block. All was normal when I left the vehicle. On 14/06/22 at about 1100hrs, I had walked my dog near my vehicle however I did not notice unusual. After that at about 1300hrs as I was about to drive off, I noticed that the front right side of my vehicle was damaged. The front right side mirror was broken and the bumper came off. The front right side was also dented. I then noticed a piece of part of a car near the front right side tire. On the piece it indicated 'Mazda' logo. I believe that my vehicle was hit and run off by a Mazda brand vehicle however I do not have its registration number. My vehicle was installed with dashcam however I have yet to check if it capture the incident. I wish to state that usually I will park my vehicle at the multi storey carpark nearby however I had came back late that day thus I just park at the open carpark.



**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: SM0M226E000B Vehicle Registration No: SNE8840H  
 Name (as shown in NRIC): WONG WEI YONG NRIC/FIN/Passport No: S0000065A  
 (\*Vehicle Driver/Vehicle Owner) (\*) Please delete as appropriate  
 Address: \_\_\_\_\_ Singapore ( )  
 Contact (Tel): 90529288 Mobile No.: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Date of Accident: 14/06/2022 Time of Accident: 13:00  
 Place of Accident: Teh Yi Dr, Singapore  
 Insurance Company: NTUC

**(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:

\*\*\*Withdraw own damaged claims and amend report to Third party claims\*\*

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 Policyholder / Driver's Signature  
 Date: \_\_\_\_\_

GIASMG Addendum Form

  
 Reporting Centre Personnel's Signature  
 Name: \_\_\_\_\_  
 NRIC/FIN No.: \_\_\_\_\_  
 Date: \_\_\_\_\_



**SINGAPORE  
POLICE FORCE**



D/20220616/7046

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## POLICE REPORT (NP299)

Report No. D/20220616/7046

Police Station Of Origin  
Clementi Division HQ  
20 Clementi Avenue 5 SINGAPORE 129858  
Tel No:1800-7740000

Date/Time Report Made 16/06/2022 21:40	Vide Report No.	Station Diary No.		
Name Of Informant CHEN SHIH HSIANG CHRISTOPHER	Address 9 TOH YI DRIVE #09-321 SINGAPORE 590009			
ID Type / ID No. NRIC NO / S9471835Z	Contact No. Home/Office:	Mobile: 96187507		
Nationality TAIWANESE	Email Address christopherchen1994@gmail.com			
Occupation Bank Analyst	Sex Male	Age 27	Date of Birth 21/09/1994	Race Chinese
Institution/School Name	Language English			
Date/Time Of Incident 14/06/2022 05:50 - 14/06/2022 06:00	Location Of Incident 9 TOH YI DRIVE #09-321 SINGAPORE 590009			

### Brief details.

This is a continuation follow up report on T/2022614/2062 which involve a hit and run incident on my parked vehicle. After the initial report was made, I went home and retrieved the dash cam footage which discover that the culprit who hit and ran my car was a white Mercedes Benz with a comfort limo cab logo at the side with yellow car plate. The license plate was blurry and hence I could not provide the license plate at that point. I subsequently uploaded the footage into iwitness on SPF website. On the night of the 15th Jun, I drafted a complaint email to comfort delgro with dash cam evidences and incident details in hope for their assistance. The following morning on the 16th Jun, I was contact by comfort delgro representative informing me that they have identified the culprit with the evidences I provided them on my

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: 16/06/2022 21:40
Officer In-Charge Of Case:	Classification Of Case:





**SINGAPORE  
POLICE FORCE**



D/20220616/7046

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. D/20220616/7046

email and they asked how I would like to proceed further with the settlement via their insurance party. I have obtained the culprit's car plate and furnished the information to the investigating officer. At the point of this report, mode of settlement is still in discussion.

Subjects Involved			
Suspect			
Person Name	SHC8037G		
Victim			
Person Name	CHEN SHIH HSIANG CHRISTOPHER		
ID Type	NRIC NO	ID No	S9471835Z
Gender	Male	Age	27
Race	Chinese	Language	English
Occupation	Bank Analyst	Address	9 TOH YI DRIVE #09-321 SINGAPORE 590009
Mobile No	96187507	Is Informant A Victim?	Yes
Person Name	CHEN SHIH HSIANG CHRISTOPHER (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: 16/06/2022 21:40
Officer In-Charge Of Case:	Classification Of Case: