

方商昭喷漆 POON SIANG SEOW

Sin Ming Autocity, No 160 Sin Ming Drive, #05-13, Singapore 575722 Tel: 6453 7511 Fax: 6453 8046 Email: sitti1@singnet.com.sg Regn. No: 05396600K

Our ref.: SLC9810L

Date: 12/08/2022

Time: 9AM

CHINA TAIPING INSURANCE SINGAPORE PTE LTD

FAX;

Attn.; Motor Claims Department

Dear Sirs

ACCIDENT ON 08/08/2022 INVOLVING SLC9810L AND SLH9634C ALONG 787 UPPER SERANGOON ROAD

We are instructed by LEE SWEE HONG of SLC9810L

,the owner

You are the insurers of motor car no. SLH9634C

We are instructed to give you 48 hours Notice for the per-repair inspection under NIMA Protocol of the damage to our clients' car before any repairs are carried out

Our client's car may be inspected at POON SIANG SEOW SIN MING AUTOCITY NO. 160, SIN MING DRIVE, #05-13, SINGAPORE 575722 Tel; 64537511, Fax 64538046

Your faithfully

ALBERT POON





1220000/1043

1 of 3

Report No. T/20220808/7043

Police Station Of Origin:
Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

REPORT	OF A	TRAFFIC	ACCIDENT
--------	------	---------	-----------------

Date/Time 08/08/2022		/lade:	Vide R	eport No.:			Station Diary No.:
Informant'	s Partic	ulars					
Name of In CHIA KAI			Addres 525 JU 64052	JRONG WE	ST STREET	52 #09-27	73 SINGAPORE
ID Type / ID No.: NRIC NO / S9227660J		Contact No.: Home/Office: Mobile			Mobile: 9	90307222	
Nationality: SINGAPOR		ZEN .	Email: BECC	ACHIA@HC	OTMAIL.COM	Л	¥ .
Sex: Female	Age: 29	Date of Birth: 13/08/1992	Type of Driver	of Informant			
Race: Chinese			Langu Englis			Institution	n / School Name:
Occupation	า:		Driving Class:	g Licence In	formation:	Date of E	Expiry:
			1				
General Inf	ormatio	n of the Accident					
Type of Accident:		Non-Injury Hit and Run		Drink Drive: No	Date/Tim Accident 08/08/20		Type of Location: Car Park
Location:				•			
UPPER SE	ERANGO	OON ROAD					
Weather:			Road	Surface:		F	Road Speed Limit:
Traffic Flow:		Traffic Control:			1	Traffic Volume: No Traffic	
Type of Co	ollision:						Anyone conveyed by ambulance:

	ehicle Invol		1			1
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SLC9810L	Car					0
SLH9634C	Car	TOYOTA	CAMRY 2.0	Silver		0
SLN9034C	Cai	IOIOIA	AUTO	Ciivoi		

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





2 of 3

Report No. T/20220808/7043

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

CONTINUATION OF REPORT

Driver						
Name	CHIA KAI XIN			ID No.		S9227660J
Related Vehicle	SLC9810L (Car)			Conta	ct No.	90307222
Hospital/Clinic	NIL			Class Driving Licent Expiry	g ce &	Class: NIL Date of Expiry: NIL
Date	NIL		Date		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	

Brief Details.

Location: 787 Upper Serangoon Road Carpark

Date: 8th August 2022

Time: 12:16 PM

My car was parked stationary at the carpark of above-mentioned location, while I was away, a vehicle

(SLH9634C) hit my vehicle at the driver's side door resulting in a dent. I have video proof.





3 of 3

Report No. T/20220808/7043

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

CONTINUATION OF REPORT

_	12	120		
CL	etc	h	DI.	an
On	יבונ	. 1 1	ГΙ	an

Informant is not able to provide sketch

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: 08/08/2022 18:48
Officer In Charge Of Case: TP / TPIB / SUFIYAN BIN KHAIRI Contact No.: 65476148	Classification Of Case:

NP168

SS2E228A0004 / S & H Motor Pte Ltd ENTRY DATE & TIME: 10/08/2022 16:45 (SGT) SUBMITTED BY: Cynthia Myint Myint Than VERSION: 1 (10/08/2022 16:45 (SGT))

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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

This Form must be completed by the Policyholder and/or the Actual Driver
 Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate

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

Reported by

Date of Accident

Exact Location of Accident

Additional Location Information

Country/State of Loss

10/08/2022 16:45 (SGT)

Driver

08/08/2022 12:16 (SGT)

787 Upper Serangoon Rd, Singapore 534654

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLC9810L

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No

Email Address

Mobile Phone No

Alternative Phone No

No

Lee Swee Hong

S1794185B

beccachia@hotmail.com (Phone) +65-96950222

VEHICLE PARTICULARS

Manufacturer

Model

Kia Forte

Variant Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to

your vehicle?

Vehicle Category

Transmission

CC

Private use

No - Claiming third party

Private car

Auto

1600

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

NTUC Income Insurance Co-operative Ltd 5118485872-01

DRIVER

Name of Driver

NRIC No

Date Of Birth

Occupation

Chia Kai Xin S9227660J

13/08/1992

Outdoor



Date Of Driving Pass

Driving experience

Gender

Mobile Number

Alt. Phone Number

Email Address

Address

Address complement

Postcode

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

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

Weather Conditions

Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident?

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?

Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

Translator's name

Translator's ID

Translator's phone number

Translator's email

Original language used in the statement

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Police Station Name

Police Station Phone No

Alt. Police Station Phone No.

Police Station Address

Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

Refer attached police report no: T/20220808/7043

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Reasons for not uploading a video of the accident

Yes

Yes

Video footage with driver

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer

Vehicle Model

SLH9634C Toyota

Camry

Accident report SS2E228A0004

Female

04/04/2020

2 YEARS AND 4 MONTHS

(Phone) +65-90307222

beccachia@hotmail.com 525 Jurong West st.52 #09-273

640525

No

Niece

No

Hit and run / Vandalism / Damaged whilst parked

Clear

Dry

No

2 No

Yes

Yes

Traffic Police

(Phone) +65-65470000 (Fax) +65-65474900

10 Ubi Avenue 3 Singapore 408865

Vehicle Variant	-
Vehicle Colour	_
Vehicle Category	Private car
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 Actual 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 Traffic Police Department for investigation.
- This report will be forwarded by the insurers to 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' Jawyers/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.

		and the second s
Policynolder's Signature : Date & Time	Driver's Signature (if driver is not the policyholder. / Dato & Time	Witnessed by Repoding Centre Personnel Name as in NRIO10 card
Sketch Plan		
and the second second second second second	and the second	" [[[[[[[[[[[[[[[[[[[
		and the foreign of the control of th
and the second of the second s		No. 1 Company of the second of
	the second section of the second section of the second section of the second section section section section sec	
		A STATE OF THE STA
and the second s		
	And the second of the second o	The state of the s
and the second s	and the second second	
		and the state of t
Late the first the beginning the first many		
	the second secon	the state of the s
		the state of the s
 I i i i i i i i i i i i i i i i i i i	manda a companya a proposala de la companya del companya de la companya de la companya del companya de la compa	
	the second secon	and the state of t
was a supplied to the supplied of the supplied		the second secon
I have been been been been been been been be	the second control of the second of	
	The second secon	and the second s
and the second s		the state of the s
	and the second section of the second	
		and the second
	The state of the s	
	a color deserve Profit Server	
1 I I I I I I I I I I I I I I I I I I I	A STATE OF THE PROPERTY OF THE	
		the control of the co
 Control of the Control of the Control	A Company of the Comp	
	the second secon	And the second s
The second secon	A CONTRACTOR OF THE STATE OF TH	

ribe Circumstance of the Accident		amput Resident
and the second s	14 78 7 11 1970 1780 17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A CARGARA
- LA MARCHE STREET	12 18 1 17 1 18 1 1 1 1 1 1 1 1 1 1 1 1 1	The second second
Coffee Id to got Amount De	92 67 1712 Francis	
its after littles brode &	does Vittle at prive.	The second second
My Ladren Al Bell	P. P.	
and the same of th		
	proposition of the second seco	
		and the second s
		200 PM 20
	and the second of the second s	and the second s
	and the second s	Observative (in the property of the control of the property of
		and the second s
		the control of the second seco
and the second s		appropries with the control of the c
or contraction.		
	and the properties of the control of	and the second
A PARAMETER STATE OF THE STATE		and produce of the state of the
	Communication of the Communica	and the state of t
		er (Standard Const.) The state of the second distribution of the state of the state of the second distribution of the state of the stat
	and the second s	terry milk predigental formers. In the finding measurement of the state of the first of the second section of the section
	•	The constitution of the second section of the
		on the facility of the control of th
the second secon	Company of the Compan	
		an electrical angle of the contribution and the con
		manus (prod
	The second secon	
and the second of the second o		
AND STATE OF THE S	and the second s	and an experience of the contract and an experience of the contract of the con
	the control of the commence of the control of the c	Contraction of the second section of the section of the second section of the section of th
	the state of the s	and the state of t
		the same of the same same same same same same same sam
		And the process of the second
Declaration	quant respect	
I-We declare the foregoing particulars are true in	overy respecti	
•		
		Wonessed by Reporting Centre Personnel