

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 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 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	08/09/2022 15:44 (SGT)
Reported by	Both
Date of Accident	05/09/2022 11:45 (SGT)
Exact Location of Accident	Chinatown, Singapore
Additional Location Information	CHINATOWN COMPLEX MULTJ CARPARK LEVEL 3 LOT 3
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMZ2199G
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ALEX GOH WEE TONG
NRIC No	SXXXX325D
Email Address	ALEX82821142@GMAIL.COM
Mobile Phone No	(Phone) +65-93639131
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	C180
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	0

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5124888950

DRIVER

Name of Driver	ALEX GOH WEE TONG
NRIC No	SXXXX325D
Date Of Birth	17/09/1968
Occupation	Indoor

Date Of Driving Pass	22/07/1992
Driving experience	30 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93639131
Alt. Phone Number	-
Email Address	ALEX82821142@GMAIL.COM
Address	APT BLK 334 TAMPINES STREER 32 #10-520
Address complement	-
Postcode	520334
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	Collided into Parked Vehicle
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
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?	Yes
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

REFER TO ATTACHMENT

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 WITH OWNER

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLQ3674D
Vehicle Manufacturer	-
Vehicle Model	-

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

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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.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

(A) SM 22199G
(B) SL 03634P

car park

Describe Circumstances of the Accident

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



















[illegible]

Report No. G/20220905/7085

Date/Time Report Made 05/09/2022 20:38	Vide Report No.	Station Diary No.
Name Of Informant ALEX GOH WEE TONG	Address 334 TAMPINES STREET 32 #10-520 SINGAPORE 520334	
ID Type / ID No. NRIC NO / S6835325D	Contact No. Home/Office: Mobile: 93639131	
Nationality SINGAPORE CITIZEN	Email Address ALEX82821142@GMAIL.COM	
Occupation Sales and related associate professionals	Sex Male	Age 53
	Date of Birth 17/09/1968	Race Chinese
Institution/School Name	Language English	
Date/Time Of Incident 05/09/2022 11:45 - 05/09/2022 11:50	Location Of Incident 334 TAMPINES STREET 32 #10-520 SINGAPORE 520334	

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: 05/09/2022 20:38
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



G/20220905/7085

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20220905/7085

during his reverse parking to lot 38 (right side of my car) and drove off at 11:45am. I went to look for the car and found the car parked at carpark lot 08 level 03. I have took a few photos on the left side Mercedes E200 which have scratched marking on the front and back. Traffic police came about 2:15pm and a traffic police report was lodged by officer Amir with case number A/20220905/0057. I sincerely seek your help to investigate the above incident will be very much appreciated. Thank you.

Subjects Involved			
Victim			
Person Name	ALEX GOH WEE TONG		
ID Type	NRIC NO	ID No	S6835325D
Gender	Male	Age	53
Race	Chinese	Language	English
Occupation	Sales and related associate professionals	Address	334 TAMPINES STREET 32 #10-520 SINGAPORE 520334
Mobile No	93639131	Is Informant A Victim?	Yes
Person Name	ALEX GOH WEE TONG (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: 05/09/2022 20:38
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