

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 21/09/2022 17:09 (SGT)
Reported by Driver
Date of Accident 21/09/2022 11:36 (SGT)
Exact Location of Accident Near 235 Pasir Laba Rd, Singapore 637387
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMG7710Y

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner Chan Choy May (Chen Cuimei)
NRIC No SXXXX359Z
Email Address ericseng6383@gmail.com
Mobile Phone No (Phone) +65-91916383
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Subaru
Model Forester
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 2000

INSURANCE COMPANY

Name of Insurance Company India International Insurance Pte Ltd
Policy Number / Cover Note Number D20MPC0007717_01

DRIVER

Name of Driver Seng Yong Koon
NRIC No SXXXX641H
Date Of Birth 02/10/1969
Occupation Outdoor

Date Of Driving Pass	06/10/1988
Driving experience	33 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96846466
Alt. Phone Number	-
Email Address	ericseng6383@gmail.com
Address	Block 50 Punggol Walk
Address complement	#11-01
Postcode	828830
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	Paya Lebar Neighbourhood Police Post
Police Station Address	Blk 114 Hougang Avenue 1 #01-1270 Singapore 530114
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

On 21/09/2022 at about 1136hrs, I parked my vehicle (A: SMG7710Y) at the outside Pasir Laba Camp open space carpark. When I went back to my vehicle from the Pass office, I discovered that my vehicle's rear portion was damaged and the SAF officer came to me and claimed that a vehicle (B: 34662MID) reversed and hit the rear portion of my vehicle.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	34662MID
Vehicle Manufacturer	Ford
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Government
Name of Driver	Zac Soo Zi Ming
Contact Number	(Phone) +65-85330686
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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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.**
6. 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' 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

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

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan

Passer Laba Camp Open Carpark

21/09/2022 1550hrs

A: SMG7H0Y

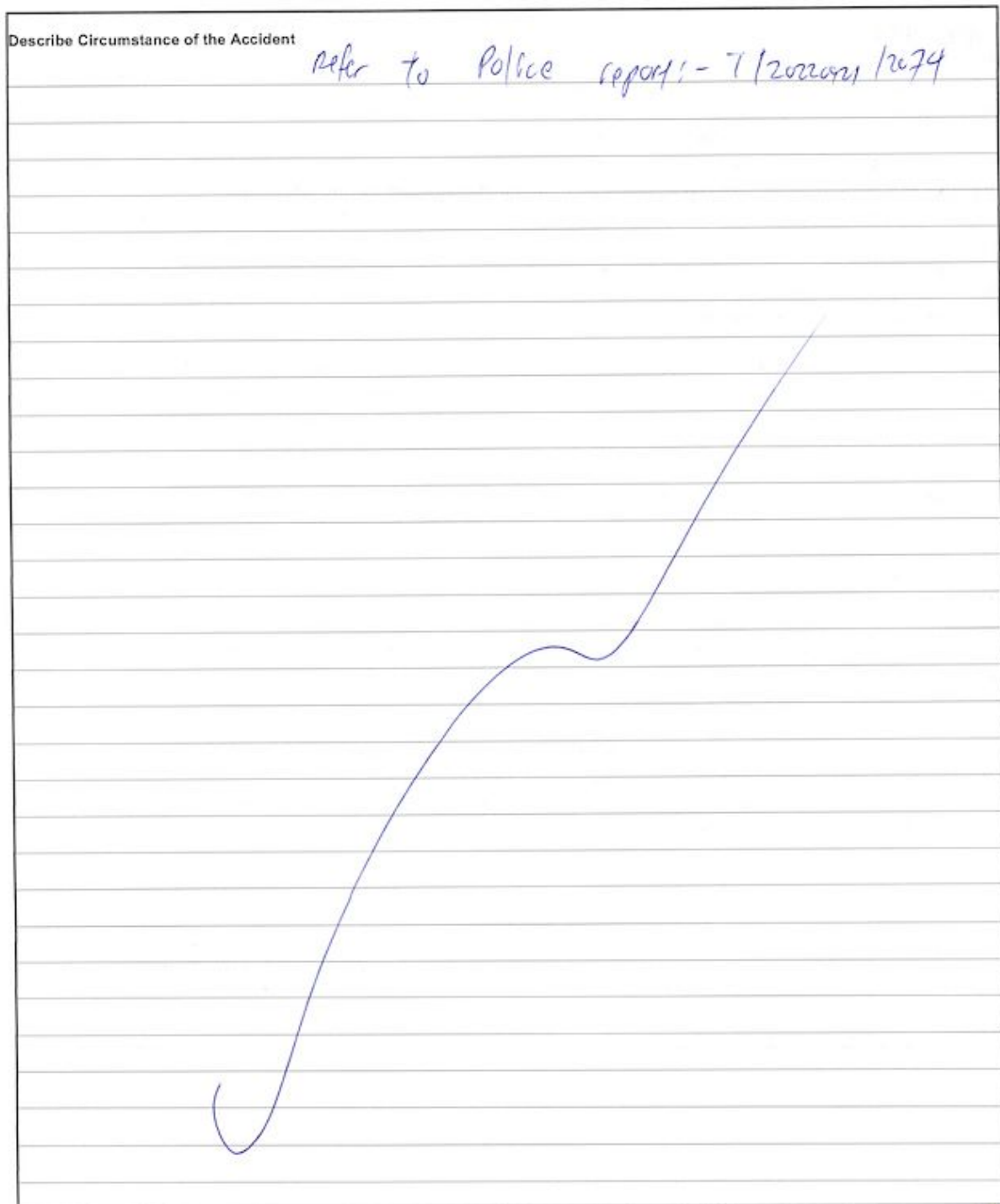
B: 34662M1D

Diagram showing two vehicles (A and B) involved in an accident, with a damaged area indicated.

vJun2022

Describe Circumstance of the Accident

Refer to Police report - 7/2022021/2674



Declaration

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

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

21/09/2020 15:50hrs

Lim Wei Sheng









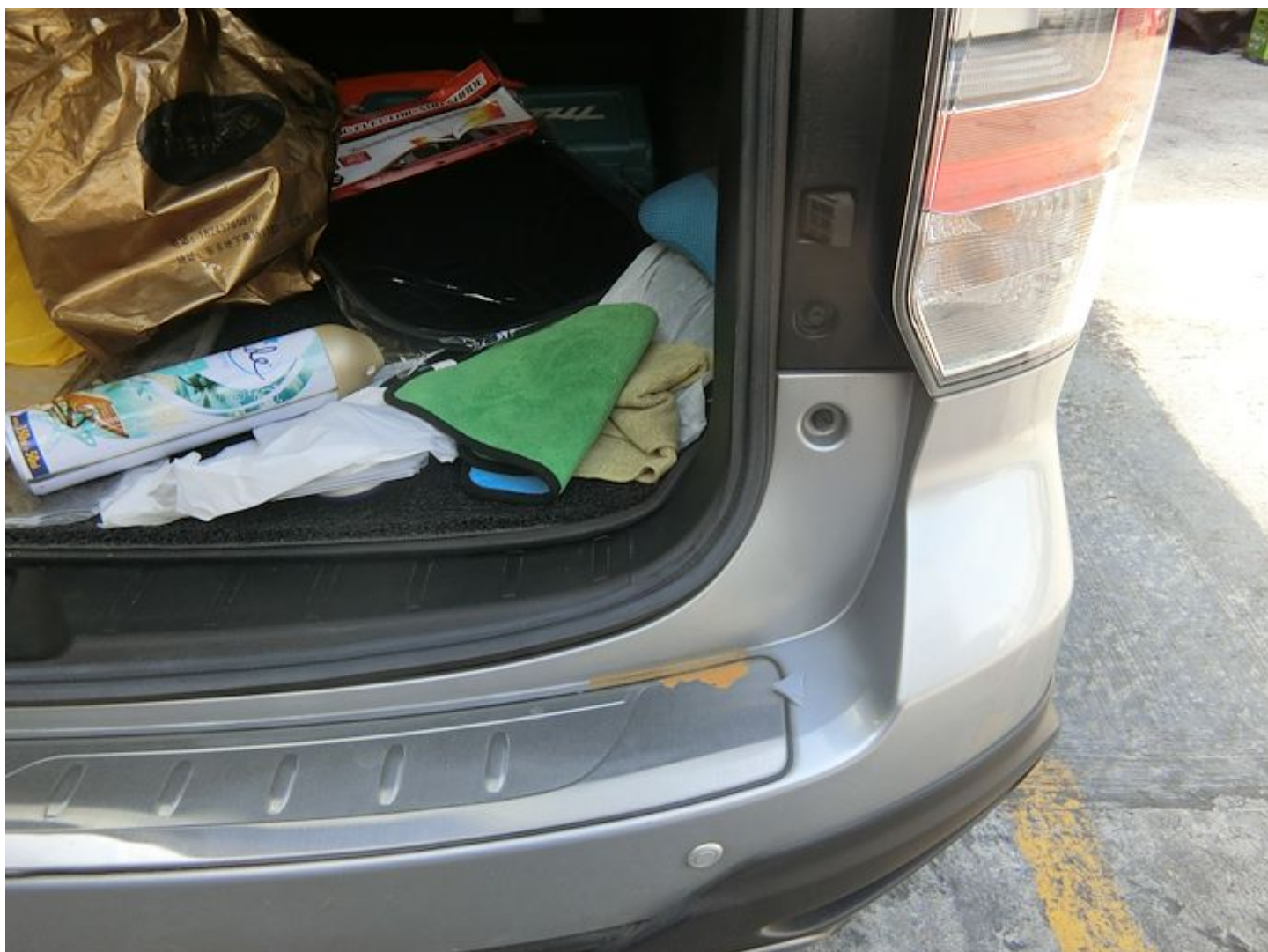




























**SINGAPORE
POLICE FORCE**



T/20220921/2074

1 of 3

Police Station Of Origin:
Paya Lebar NPP
114 Hougang Avenue 1 #01-1270
SINGAPORE 530114
Tel No: 1800-2899999

Report No. T/20220921/2074

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/09/2022 16:37	Vide Report No.:	Station Diary No.: 24
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Informant's Particulars

Name of Informant: SENG YONG KOON			Address: BLK 50 PUNGGOL WALK #11-01 SINGAPORE 828830	
ID Type / ID No.: NRIC NO / S6933641H			Contact No.: Home/Office: Mobile: 96846466	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 52	Date of Birth: 02/10/1969	Type of Informant: Vehicle Owner	
Race: Chinese			Language:	Institution / School Name:
Occupation: Contractor			Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury Government Vehicle	Drink Drive: No	Date/Time of Accident: 21/09/2022 11:35	Type of Location: Car Park
Location: PASIR LABA ROAD				
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
34662MID	Van					0
SMG7710Y	Car	SUBARU	FORESTER 2.0I-L CVT AWD SR	Silver	Slightly Damaged	0

Details of Person Involved

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



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T/20220921/2074

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Paya Lebar NPP
114 Hougang Avenue 1 #01-1270
SINGAPORE 530114
Tel No: 1800-2899999

2 of 3

Report No. T/20220921/2074

CONTINUATION OF REPORT

Driver			
Name	Zac Soo Zi Meng		ID No. S9637513A
Related Vehicle	34662MID (Van)		Contact No. 85330686
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Vehicle Owner			
Name	SENG YONG KOON		ID No. S6933641H
Related Vehicle	SMG7710Y (Car)		Contact No. 96846466
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 21/09/2022, at about 1136hrs, I parked my vehicle (SMG7710Y) outside of Pasir Laba Camp open space carpark. When I went back to my vehicle from the pass office, I discovered that my vehicle's rear portion was damaged and the SAF driver (Zac Soo Zi Meng, NRIC: S9637513A, HP: 85330686) came to me and informed that his paramedic type vehicle (34662MID) reversed and hit the rear portion of my vehicle. The left rear of my vehicle was dented.



**SINGAPORE
POLICE FORCE**



T/20220921/2074

3 of 3

Police Station Of Origin:
Paya Lebar NPP
114 Hougang Avenue 1 #01-1270
SINGAPORE 530114
Tel No: 1800-2899999

Report No. T/20220921/2074

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:

F /

SGT 2 LOH YU JING CLAYTON

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

21/09/2022 16:37

Officer In Charge Of Case:

TP / GIA /

SI ANG YI TING, STEPHANIE

Contact No.: 65476414

Classification Of Case:

NP168