

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 26/09/2022 10:01 (SGT)
Reported by Both
Date of Accident 25/09/2022 12:04 (SGT)
Exact Location of Accident Somerset Rd, Singapore
Additional Location Information SP BUILDING
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SNC7201J

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner YEO KEN LITT KENNETH (YAO JIANLI KENNETH)
NRIC No SXXXX276G
Email Address kenyeokl@yahoo.com
Mobile Phone No (Phone) +65-97252517
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Mercedes
Model E300
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 1991

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number DMPCSNW00235962100

DRIVER

Name of Driver YEO KEN LITT KENNETH (YAO JIANLI KENNETH)
NRIC No SXXXX276G
Date Of Birth 16/05/1974
Occupation Indoor

Date Of Driving Pass	09/01/2001
Driving experience	21 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97252517
Alt. Phone Number	-
Email Address	kenyeokl@yahoo.com
Address	BLK 19 QUEEN'S CLOSE #04-115
Address complement	-
Postcode	140019
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
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	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH AND POLICE REPORT T/20220925/7029

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKA6666D
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

IMPORTANT NOTICE

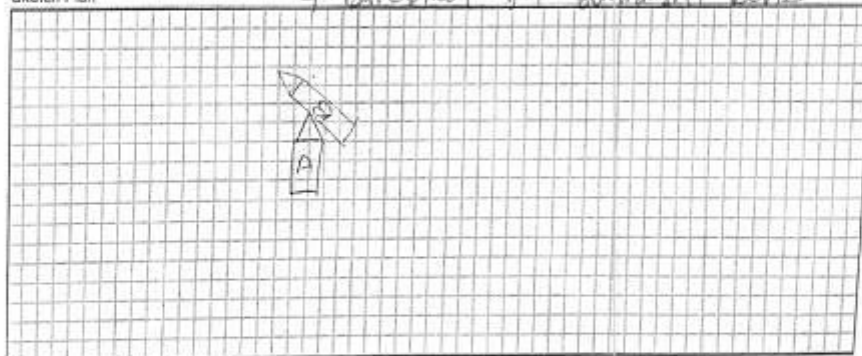
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 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**
I understand, 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/are 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


Witness (Reporting Centre Personnel) (Name and NRIC/D card)

Sketch Plan



A = SNC7201J
B = SKA6666D

Describe Circumstance of the Accident

Visited SP Building 25 Sept 2022 and parked my car, SNC 7201 J, for lunch.
When I returned back to pick up my car, I realised my front bumper was damaged.

POLICE REPORT 7/20220925/2022

Declaration

I/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
(Name as in NRIC/ID card)









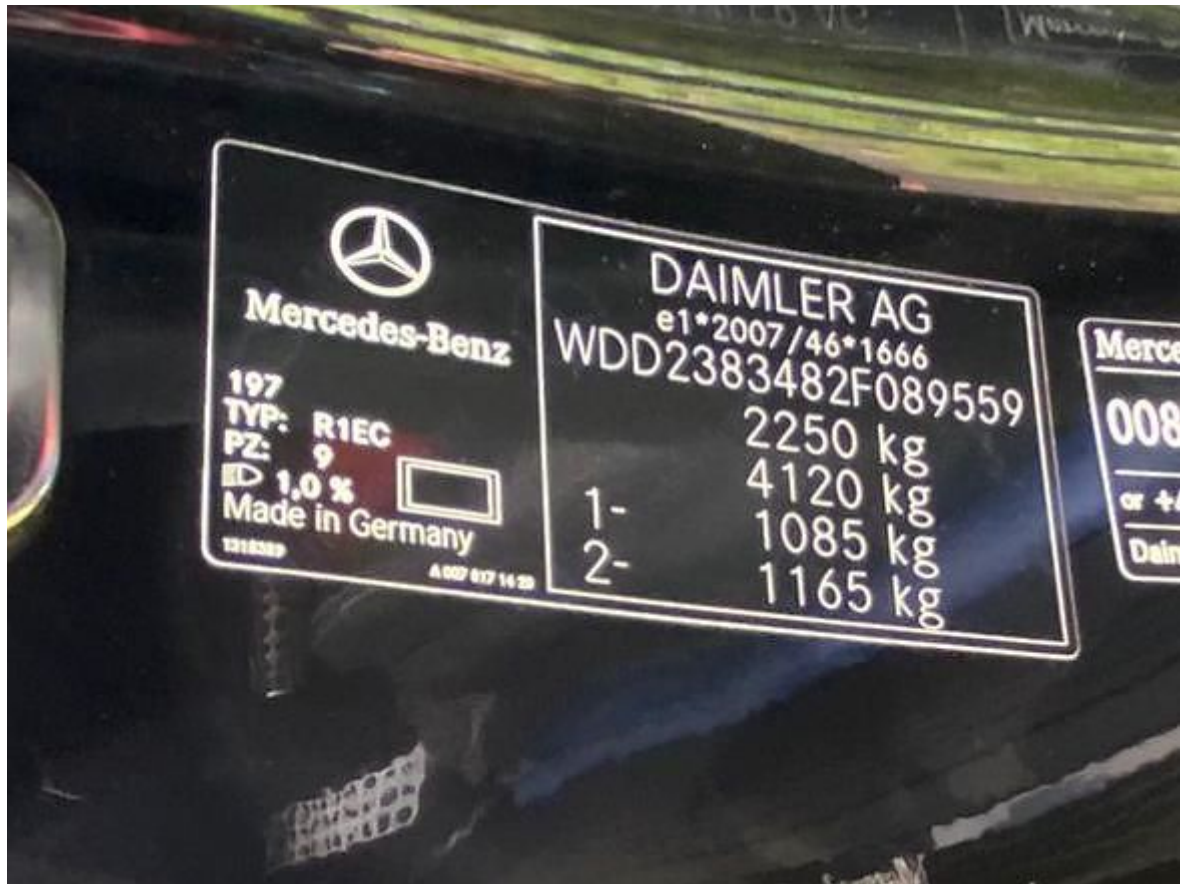













**SINGAPORE
POLICE FORCE**

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



T/20220925/7029

1 of 3

Report No. T/20220925/7029

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/09/2022 17:44	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: YEO KEN LITT KENNETH	Address: 19 QUEEN'S CLOSE #04-115 SINGAPORE 140019
ID Type / ID No.: NRIC NO / S7415276G	Contact No.: Home/Office: Mobile: 97252517
Nationality: SINGAPORE CITIZEN	Email: KENYEOKL@YAHOO.COM
Sex: Male Age: 48 Date of Birth: 16/05/1974	Type of Informant: Vehicle Owner
Race: Chinese	Language: English Institution / School Name:
Occupation:	Driving Licence Information: Class: Date of Expiry:

General Information of the Accident

Type of Accident: Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 25/09/2022 12:05	Type of Location: Car Park
Location: SOMERSET ROAD			
Weather:	Road Surface:		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	Conditio	No of
SKA6666D	Car	BMW		Blue		0
SNC7201J	Car	MERCEDES BENZ	E300 Coupe	Black		0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**

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



T/20220925/7029

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Report No. T/20220925/7029

CONTINUATION OF REPORT

Vehicle Owner			
Name	YEO KEN LITT KENNETH		ID No. S7415276G
Related Vehicle	NIL		Contact No. 97252517
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: NIL Date of Expiry: NIL
Date	NIL		Date NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

Visited SP Building on 25th Sept 2022 and parked my car SCN7201J for lunch. When i returned back to pick up my car, I realised my front bumper was damaged.

**SINGAPORE
POLICE FORCE**

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



T/20220925/7029

3 of 3

Report No. T/20220925/7029

CONTINUATION OF REPORTSketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPB /
RASHIDAH BINTE AZMAN
Contact No.: 65476902

NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
25/09/2022 17:44

Classification Of Case: