

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 08/11/2022 11:16 (SGT)
Reported by Driver
Date of Accident 04/11/2022 18:40 (SGT)
Exact Location of Accident Singapore
Additional Location Information CENTRAL EXPRESSWAY
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBD9928U

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner AD PRESS PTE LTD
Company Reg No 201128688K
Email Address address@singnet.com.sg
Mobile Phone No (Phone) +65-62979971
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Nissan
Model Nv350
Variant -
Exact purpose for which vehicle was being used at time of accident Employment
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Commercial vehicle
Transmission Manual
CC 2488

INSURANCE COMPANY

Name of Insurance Company ERGO Insurance Pte. Ltd.
Policy Number / Cover Note Number DMCG22003619

DRIVER

Name of Driver KHOO KEE SUAN TIBURTIUS
NRIC No S1129621A
Date Of Birth 11/06/1955
Occupation Outdoor

Date Of Driving Pass	15/10/1979
Driving experience	43 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-96289961
Alt. Phone Number	-
Email Address	adpress@singnet.com.sg
Address	BLK 575 HOUGANG ST 51 #14-43
Address complement	-
Postcode	530575
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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)	2
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	-

PASSENGER 1

Name	DAUGHTER
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Hougang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004890999
Alt. Police Station Phone No	(Fax) +65-63128989
Police Station Address	60 Hougang Ave 9 Singapore 538775
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKECH PLAN DRAFT AND POLICER REPORT T/20221105/2017

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	SHD3499J
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)	-

WITNESS DETAILS

WITNESS 1

Name	DAUGHTER
Phone	(Phone) +65-96289961
Email	-

IMPORTANT NOTICE

SKETCH PLAN

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 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

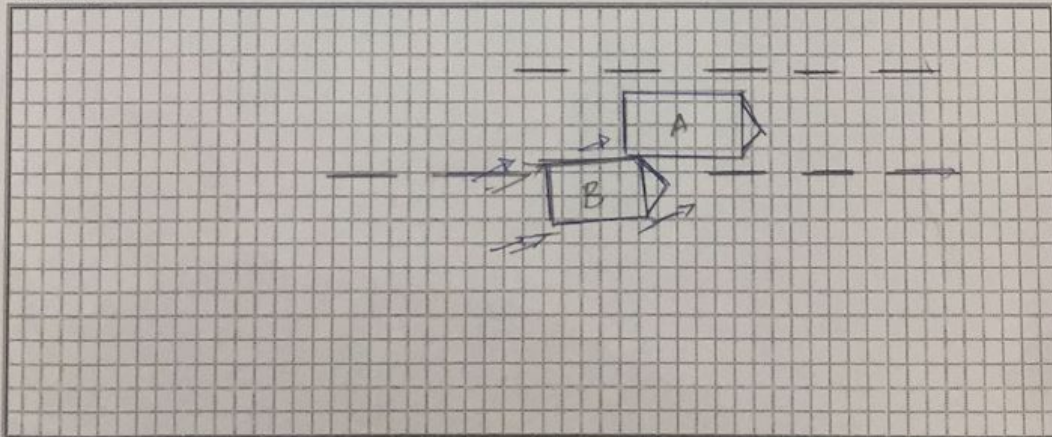


Actual Driver's Signature (if driver is not the policyholder) / Date & Time



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

Sketch Plan



vJun2022

1

USER NAME ENQUIRY@FORZAAUTO.SG

PN : JCNARPI68 we chat pin
(SMALL CAP) 9177 5773 FORZA

faantoworks@gmail.com - 6348115




enquiry@jcngrp.com - jcngrp18168

enquiry@forzauto.sg - ZAG1500 2108

Describe Circumstance of the Accident

REFER TO POLICE REPORT / T/2022/105/2017

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

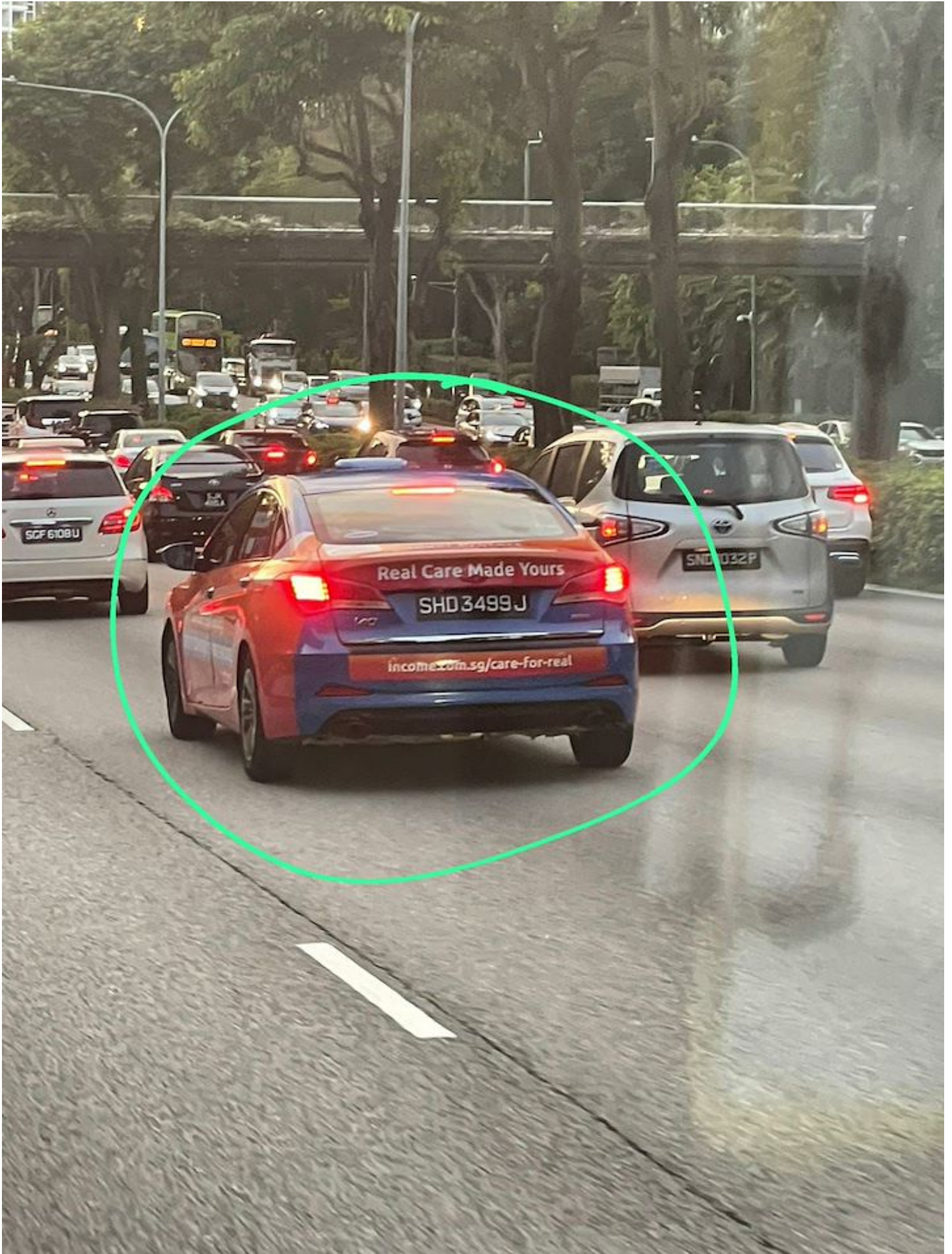
Policyholder's Signature / Date & Time Actual Driver's Signature (if driver is not the policyholder) / Date & Time Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

vam2022 2

(SMALL CAP) 9877 5773 FORZA

FORZA - WIFI LINK

enquiry@forza.com - 2022/105/2017
enquiry@forza.com.sg - 2022/105/2017
claim@forza.com.sg - 2022/105/2017

























**SINGAPORE
POLICE FORCE**



T/20221105/2017

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

1 of 3

Report No. T/20221105/2017

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/11/2022 09:51	Vide Report No.:	Station Diary No.: 54
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Informant's Particulars

Name of Informant: KHOO KEE SUAN TIBURTIUS		Address: APT BLK 575 HOUGANG STREET 51 #14-43 SINGAPORE 530575	
ID Type / ID No.: NRIC NO / S1129621A		Contact No.: Home/Office: Mobile: 87504722	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 67	Date of Birth: 11/08/1955	Type of Informant: Driver
Race: Chinese		Language: Chinese	Institution / School Name:
Occupation: DELIVERY		Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:	

General Information of the Accident

Type of Accident: Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 04/11/2022 18:40	Type of Location: Straight Road
Location: CENTRAL EXPRESSWAY			
Weather: Clear		Road Surface: Dry	Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBD9928U	Van				Slightly Damaged	1
SHD3499J	Car					0

Details of Person Involved

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

USER NAME: ENQUIRY@FORZA.AUTD.SG



**SINGAPORE
POLICE FORCE**



T/20221105/2017

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

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Report No. T/20221105/2017

CONTINUATION OF REPORT

Driver			
Name	KHOO KEE SUAN TIBURTIUS		ID No. S1129621A
Related Vehicle	GBD9928U (Van)		Contact No. 87504722
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 04/11/2022 at about 1838hrs, while I was driving my van (GBD9928U) along CTE towards City, I suddenly felt an impact from the rear right side of my van. As such I slowed down and change lane to the side as I thought the vehicle that hit onto me would slow down and exchange particulars. At that moment, I realised the vehicle that hit onto the rear right side of my van was a taxi (SHD3499J) however the taxi driver just wind down his window and told me that it was just a small damage and there is nothing serious. Shortly after the taxi driver just drove off without stopping. After reaching my destination, I went to make a check and I realised that there was scratches on the rear right side of my van. That is all.



SINGAPORE
POLICE FORCE



T/20221105/2017

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

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Report No. T/20221105/2017

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 3 LEE SHENG XIANG

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
05/11/2022 09:51

Officer In Charge Of Case:
TP / HRT /
SR STAFF SGT RASHIDAH BINTE AZMAN
Contact No.: 65476902

Classification Of Case:

NP168

(SMALL CAP) 9677 5770 FORZA

enquiry@jingji.com