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 witholding 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.

- 4. The issue and acceptance of this is form by instrained 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 01/12/2022 09:06 (SGT) Reported by Date of Accident 30/11/2022 12:45 (SGT) Exact Location of Accident Singapore Additional Location Information SIMEI STREET 4 CARPARK Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Mercedes

Auto

1800

Vehicle Registration Number SMN8881T

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner YAP ZHILIANG BENJAMIN NRIC No SXXXX466I Email Address ben.yap@outlook.com Mobile Phone No (Phone) +65-88818863 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model E250 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 No - Claiming third party your vehicle? Vehicle Category Private car Transmission

INSURANCE COMPANY

Name of Insurance Company **EQ Insurance Company Ltd** Policy Number / Cover Note Number DMPPHQ22-002637

DRIVER

CC

Name of Driver YAP ZHILIANG BENJAMIN NRIC No SXXXX466I Date Of Birth 13/04/1988 Occupation Indoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address 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	27/03/2007 15 YEARS AND 8 MONTHS Male (Phone) +65-88818863 - ben.yap@outlook.com BLK 861 TAMPINES AVENUE 5 #07-575 - 520861 Yes - No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface OTHER INFORMATION	Hit and run / Vandalism / Damaged whilst parked Clear Dry
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	Yes Traffic Police (Phone) +65-65470000 (Fax) +65-65474900 10 Ubi Avenue 3 Singapore 408865 No
PLEASE REFER TO ATTACHED REPORT	
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	
DETAILS OF OTHER	VEHICLE PROPERTY 1

Vehicle Model

Vehicle Registration NumberSNF2201BVehicle Manufacturer-

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. The Formmust be completed by the Policyholder and/or the Authorised Driver.
- 3 information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material locks 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. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Slingapore (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)

Lunderstand, acknowledge, agree and consent that

(a) Millinsurer, 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) wind have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the insurers law yers/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:

(N) 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 SIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore for one or more of the above Purposes.

Policy Dider's Signature / Date &

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

Witnessed by Reporting Centre

Sketch Plan

TARE T

(A) - SMN8881T

(B) - SNFZZOIB

BIR 224 Sime, St. 4 Corpork

Describe Circumstances of the Accident	
- Refe	to police report attacked - t No.: T/20221130/7045
Repor	+ No 1/20221130/1045
The second secon	
	. /)
	/
	/
/	

Declaration

INVe declare the foregoing particulars are true in every respect.

Policy Mier's Signature / Date &

Driver's Signature (# driver is not the policyholder) / Date

Witnessed by Reporting Centre

Personnel





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20221130/7045

CONTINUATION OF REPORT

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
SMN8881T	EQ INSURANCE COMPANY LTD.	DMPPHQ22- 002637	05/04/2022	04/04/2023	

Details of Perso	n Involved					
Any Pedestrian Ir	nvolved: No				- Markey	
No. of Pedestrian	s Injured: NIL		Use of Peo	Use of Pedestrian Crossing: NA		
Vehicle Owner						
Name	YAP ZHILIANG, BE	YAP ZHILIANG, BENJAMIN		ID No.	S8812466I	
Related Vehicle	NIL			Contact No	. 88818863	
Hospital/Clinic	NIL			Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL	
Date	NIL	Date		NIL	-	
No. of Days gran	ted Medical Leave	NIL	Degree of	NIL		

Brief Details

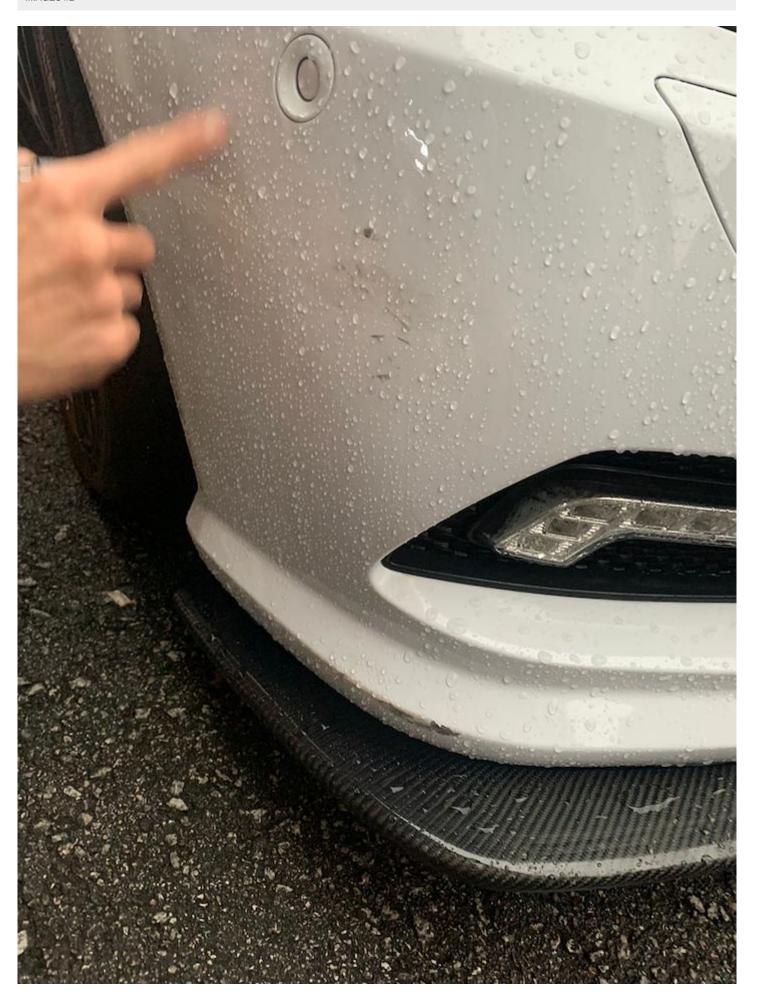
My vehicle SMN8881T (Car A) was involved in a hit and run accident at Blk 224 Simei St 4 surface carpark Lot 131 (white lot). The other party vehicle is parking at Lot 130 (red lot). The other party vehicle number is SNF2201B Renault/Captur 1.3L (Car B).

My vehicle was parked at 12.14pm and the other vehicle was already parked there. When i was about to head out, i notice that my front bumper has been damaged and the other party vehicle was no longer there.

I played back my camera and notice that Car B first turned out of the lot, hit my car (my video shows my car shaked alittle) reverse back into the lot and drive out again.

There was no note placed on my windscreen. I have 4K Full HD video recording of the incident. File size about 200Mb,.

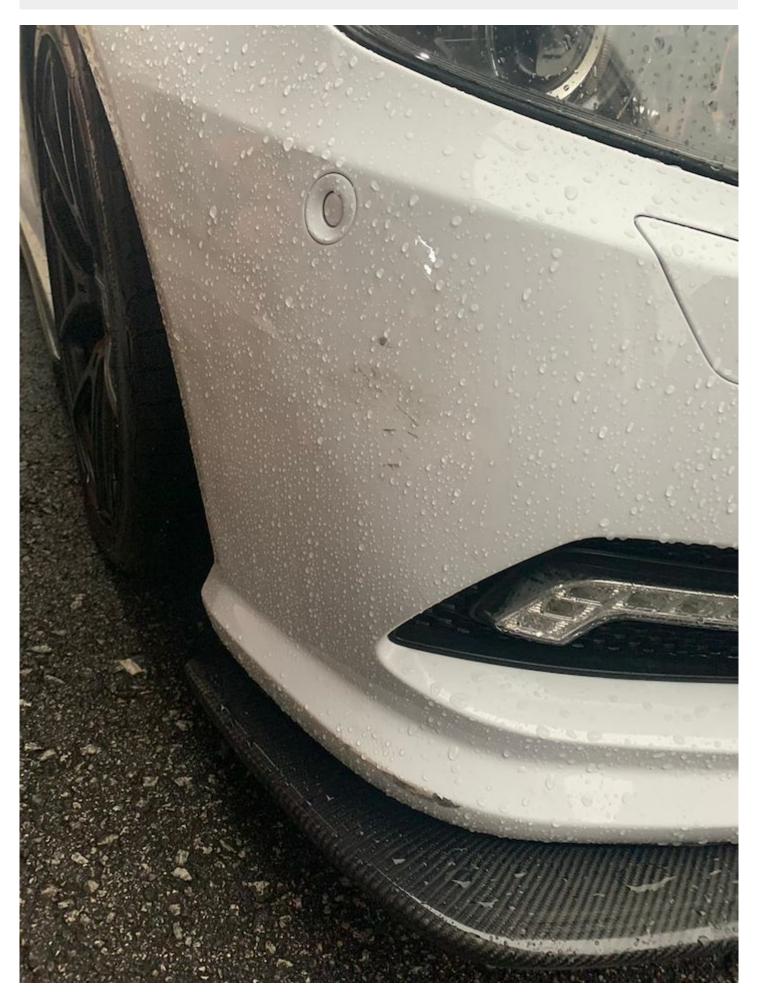


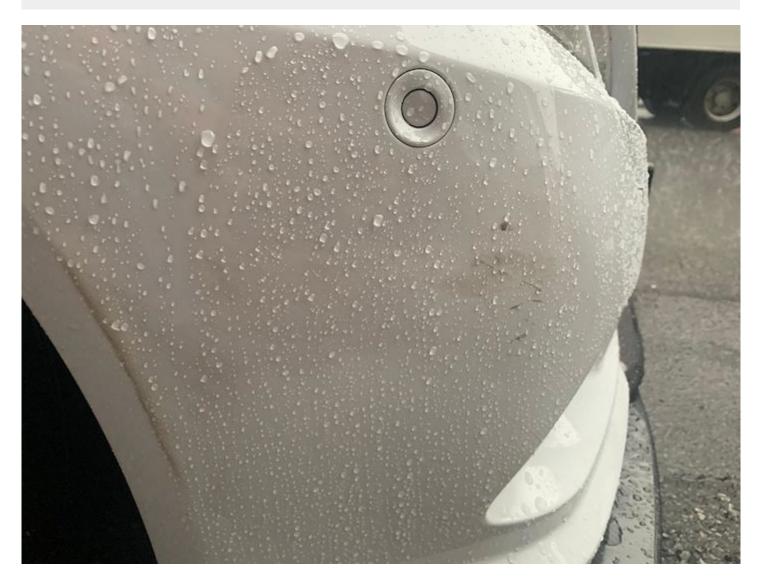


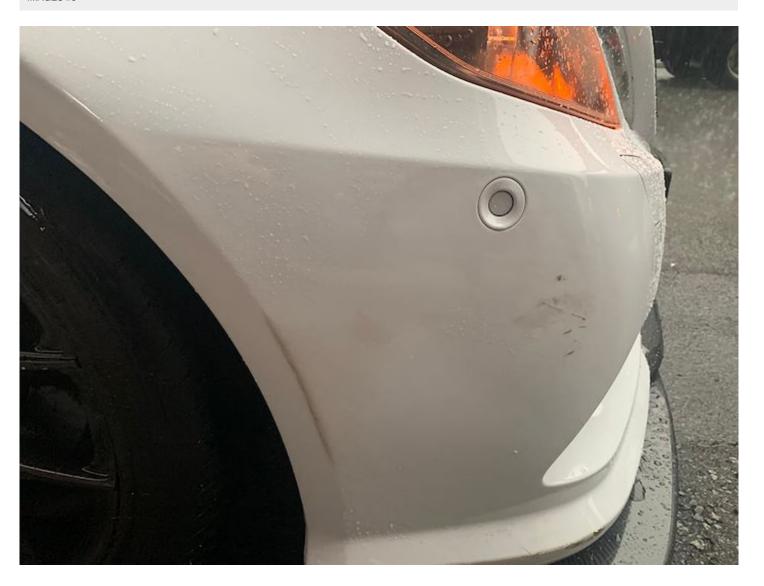




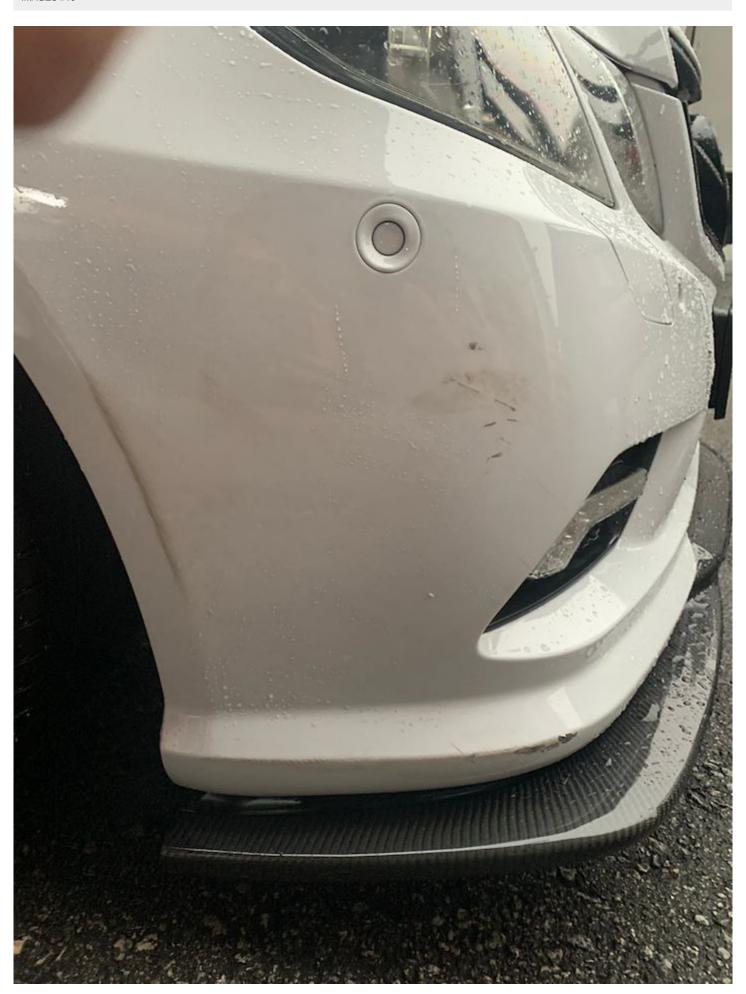


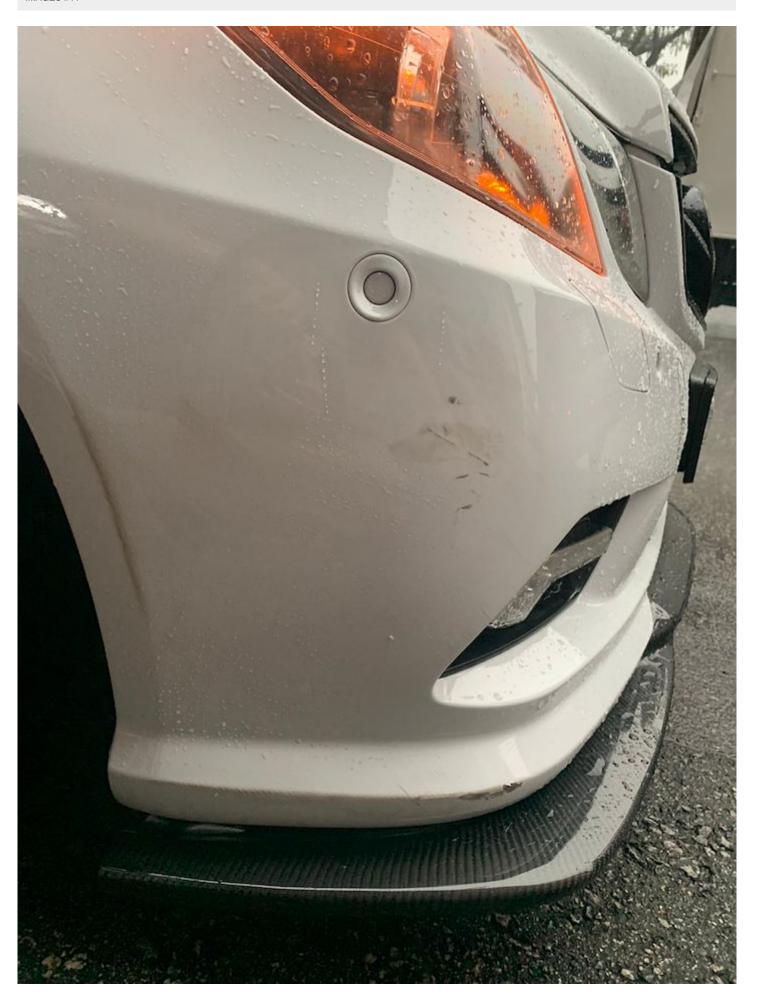






















T/20221130/7045

Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 3 Report No. T/20221130/7045

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/11/2022 15:38		Made:	Vide Report No.:	Station Diary No.
Informa	nt's Partice	ulars		
	Informant: ILIANG, BE		Address: 861 TAMPINES AVENUE 5	#07-575 SINGAPORE 520861
ID Type / ID No.: NRIC NO / S8812466I		661	Contact No.: Home/Office:	Mobile: 88818863
National SINGAP	ity: ORE CITIZ	EN	Email: BEN.YAP@OUTLOOK.COM	И
Sex: Age: Date of Birth: Male 34 13/04/1988			Type of Informant: Vehicle Owner	
Race: Chinese			Language: English	Institution / School Name:
Occupation:			Driving Licence Information: Class:	Date of Expiry:

General Inform	mation of the Accide	nt		
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 30/11/2022 12:45	Type of Location: Car Park
Location: SIMEI STREE	ET 4			
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control:		Traffic Volume: No Traffic
Type of Collis	sion:			Anyone conveyed by ambulance: No

Vehicle No.	Туре	Make	Model	Color	Conditio	No of
SMN8881T	Car	MERCEDES BENZ	E250 Cabriolet	White	Slightly Damaged	0
SNF2201B	Car	RENAULT	RENAULT/C APTUR 1.3L AT PRIVILEGE	White		1





Police Station Of Origin:

2 of 3 Report No. T/20221130/7045

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

CONTINUATION OF REPORT

Details of V	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMN8881T	EQ INSURANCE COMPANY LTD.	DMPPHQ22- 002637	05/04/2022	04/04/2023

Details of Perso	n Involved		WAY YOU LAND	THE RESERVE		
Any Pedestrian Ir	nvolved: No				The state of the s	
No. of Pedestrian	ns Injured: NIL		Use of Ped	Use of Pedestrian Crossing: NA		
Vehicle Owner						
Name	YAP ZHILIANG, BE	YAP ZHILIANG, BENJAMIN		ID No.	S8812466I	
Related Vehicle	NIL			Contact No	b. 88818863	
Hospital/Clinic	NIL			Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL	
Date	NIL D		Date	NIL		
No. of Days gran	ted Medical Leave	NIL	Degree of	NIL		

My vehicle SMN8881T (Car A) was involved in a hit and run accident at Blk 224 Simei St 4 surface carpark Lot 131 (white lot). The other party vehicle is parking at Lot 130 (red lot). The other party vehicle number is SNF2201B Renault/Captur 1.3L (Car B).

My vehicle was parked at 12.14pm and the other vehicle was already parked there. When i was about to head out, i notice that my front bumper has been damaged and the other party vehicle was no longer there.

I played back my camera and notice that Car B first turned out of the lot, hit my car (my video shows my car shaked alittle) reverse back into the lot and drive out again.

There was no note placed on my windscreen. I have 4K Full HD video recording of the incident. File size about 200Mb,.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20221130/7045

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

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: 30/11/2022 15:38
Officer In Charge Of Case: TP / TPIB / RASHIDAH BINTE AZMAN Contact No.: 65476902	Classification Of Case:

NP168