

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 17/11/2022 12:58 (SGT)
Reported by Both
Date of Accident 14/11/2022 22:34 (SGT)
Exact Location of Accident 24A Nim Green, Singapore 807644
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SFD9998U

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TEO KAI MING, RYAN
NRIC No SXXXX099H
Email Address RYANTEOKM@GMAIL.COM
Mobile Phone No (Phone) +65-84287136
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Hyundai
Model CN7 AVANTE 1.6 DOHC CVT S/R
Variant HYUNDAI
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 1598

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number DMPCSNW00088222200

DRIVER

Name of Driver TEO KAI MING, RYAN
NRIC No SXXXX099H
Date Of Birth 06/05/1999
Occupation Indoor

Date Of Driving Pass	21/12/2017
Driving experience	4 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84287136
Alt. Phone Number	-
Email Address	RYANTEOKM@GMAIL.COM
Address	24A NIM GREEN
Address complement	-
Postcode	807644
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	Ang Mo Kio Division Headquarters
Police Station Phone No	(Phone) +65-18002180000
Alt. Police Station Phone No	(Fax) +65-64814246
Police Station Address	51 Ang Mo Kio Avenue 9 Singapore 569784
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT NO.: F/20221117/7006

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	SHA4121H
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)	-

SKETCH PLAN

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6. The 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.
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
Sketch Plan


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


Witnessed by Reporting Centre Personnel


REFER TO POLICE REPORTS NO: F/20221117/7006

We declare the foregoing particulars are true in every respect.

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

Witnessed by Reporting Centre Personnel





























**SINGAPORE
POLICE FORCE**



F/20221117/7006

1 of 2

POLICE REPORT (NP299)

Report No. F/20221117/7006

Police Station Of Origin
Ang Mo Kio Division HQ
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No:1800-2180000

Date/Time Report Made 17/11/2022 01:12	Vide Report No.	Station Diary No.
Name Of Informant TEO KAI MING, RYAN	Address 24A NIM GREEN SINGAPORE 807644	
ID Type / ID No. NRIC NO / S9915099H	Contact No. Home/Office:	Mobile: 84287136
Nationality SINGAPORE CITIZEN	Email Address RYANTEOKM@GMAIL.COM	
Occupation Student	Sex Male	Age 23
Institution/School Name	Date of Birth 06/05/1999	Race Chinese
Date/Time Of Incident 14/11/2022 22:30 - 14/11/2022 22:35	Location Of Incident 24A NIM GREEN SINGAPORE 807644	

Brief details.

Hit and run incident by comfort taxi. Have reported the relevant case to comfort delegro on 16 Nov 2022 at 1524. I parked my outside my house and the next day late afternoon i saw there was some damages done to the rear bumper, rims and fenders. The incident occurred outside 24A Nim Green on 14 Nov 1034pm according to the footage captured. I have the footage of the incident but the camera couldnt capture the car plate due to dark exposure.

Subjects Involved
Suspect

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: 17/11/2022 01:12
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



F/20221117/7006

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20221117/7006

Person Name	Taxi Driver		
ID Type	OTHERS / -	ID No	-
Gender	Unknown	Age	10-70
Occupation	Taxi driver		
Victim			
Person Name	TEO KAI MING, RYAN		
ID Type	NRIC NO	ID No	S9915099H
Gender	Male	Age	23
Race	Chinese	Language	English
Occupation	Student	Address	24A NIM GREEN SINGAPORE 807644
Mobile No	84287136	Is Informant A Victim?	Yes
Person Name	TEO KAI MING, RYAN (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: 17/11/2022 01:12
Officer In-Charge Of Case:	Classification Of Case:



IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: _____ Vehicle Registration No: SFD 9998U
 Name (as shown in NRIC): TEO KAI MIN, RYAN NRIC/FIN/Passport No: S4919099H
 (*Vehicle Driver/Policyholder) (*) Please delete as appropriate
 Address: 24A NIM GREEN Singapore 857640
 Contact (Tel): 84287136 Mobile No.: _____
 Email Address: RYANTEO@GMAIL
 Date of Accident: 14/11/22 Time of Accident: 10-34PM
 Place of Accident: ALONG 24A, NIM GREEN
 Insurance Company: CHINA TRIPING INSURANCE

(B) ADDITIONAL INFORMATION /AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

TO UPDATE THIRD PARTY VEHICLE (TAXI) NUMBER
SHA4121H.

Policyholder / Actual Driver's Signature
 Date: _____

Reporting Centre Personnel's Signature
 Name (as in NRIC/ID card): _____
 Date: _____



中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Private Car

MX1F

E SN

AN0006A

Cov. Type C

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.

DMPCSNW00088222200

Engine No.: G4FMMU263864

Cha. No. KMHLN41ETNU156371

1 Index Mark and Registration
Number of Vehicle

SFD9998U

2 Name of Policy Holder

TEO KAI MING, RYAN

3 Effective date of the Commencement of
Insurance for the purposes of the Regulations,
Ordinance or Enactment05/04/2022
(00:00:00)

Named Drivers Ex Sect. 1

\$5500.00

Additional Ex Other than Named Drivers

Ex Sect. 1 - Age <= 25

\$33,000.00

Ex Sect. 1 - Age >= 26

\$5500.00

* Age as at date of accident

EX ON WINDSCREEN

\$3100.00

4 Date of Expiry of Insurance

14/04/2023

5 Persons or Classes of Persons entitled to drive*

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or
regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of
a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor
Vehicle.

6 Limitations as to use*

Use for social, domestic and pleasure purposes and for the Policyholder's business.
The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability
trial, speed-testing, the carriage of goods other than samples in connection with any trade or business
or use for any purpose in connection with the Motor Trade.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft)
will be doubled.

One time Waiver of Excess for the first \$5500 will apply to the Insured and Named Drivers in the event
of Own Damage Claim at our Authorised Workshops for each Policy Year.

HIRE PURCHASE CO.: DBS BANK LTD

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
and Section 25 of the Road Transport Act 1987 (Malaysia); are not to be included under these headings.

I/We hereby Certify that the policy to which this Certificate relates is issued in accordance with the
provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road
Transport Act, 1987 (Malaysia)

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By

Moses Chia Wen Jye
Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)
3 Anson Road #16-00 Springleaf Tower Singapore 079909

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☎ 6222 1033

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