

## 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 .....	09/01/2023 16:15 (SGT)
Reported by .....	Both
Date of Accident .....	08/01/2023 17:45 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	OPEN SPACE CAR-PARK LOT 218 BOON KENG VILLE
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SDZ168R

#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	TAN ENG HWEE
NRIC No .....	SXXXX185A
Email Address .....	MELVINTAN168@HOTMAIL.COM
Mobile Phone No .....	(Phone) +65-96182168
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	Rush
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 .....	1500

#### INSURANCE COMPANY

Name of Insurance Company .....	Auto & General Insurance (Singapore) Pte. Limited.
Policy Number / Cover Note Number .....	P10439935R02

#### DRIVER

Name of Driver .....	TAN ENG HWEE
NRIC No .....	SXXXX185A
Date Of Birth .....	22/07/1966
Occupation .....	Indoor

Date Of Driving Pass .....	23/01/1985
Driving experience .....	38 YEARS
Gender .....	Male
Mobile Number .....	(Phone) +65-96182168
Alt. Phone Number .....	-
Email Address .....	MELVINTAN168@HOTMAIL.COM
Address .....	5 SUNBIRD ROAD
Address complement .....	-
Postcode .....	487130
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 .....	Changi Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18005872999
Alt. Police Station Phone No .....	(Fax) +65-65872900
Police Station Address .....	9 Simei Street 2 Singapore 529914
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO THE SKETCH PLAN AND POLICE REPORT

#### 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 .....	GBL9867U
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-

Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
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

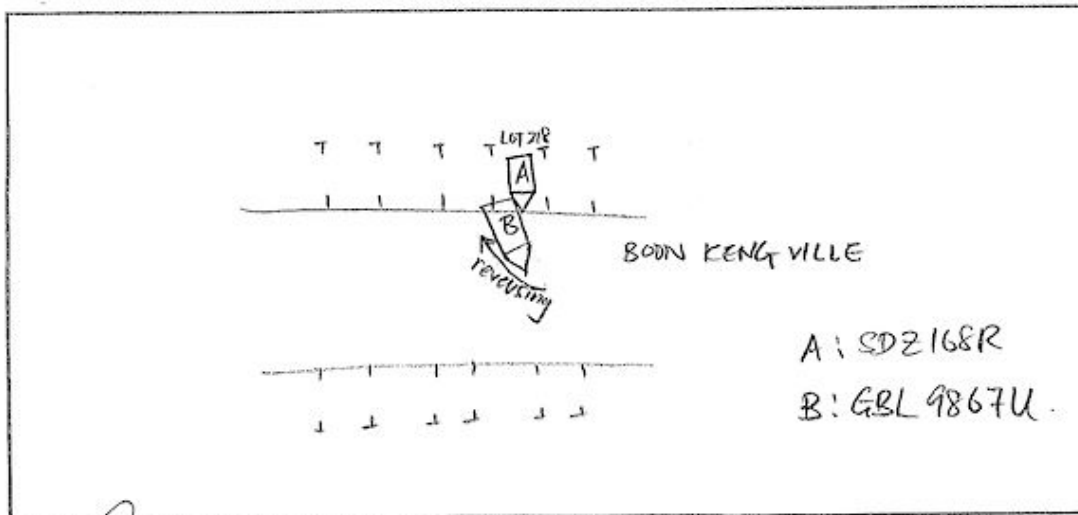
Name .....	MR WEE
Phone .....	(Phone) +65-90011896
Email .....	-

## SKETCH PLAN

## IMPORTANT NOTICE

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 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 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.

## Sketch Plan



*[Signature]*

Policyholder's Signature / Date & Time

19th Jan 2023

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

*[Signature]* 09/01/2023

Witnessed by Reporting Centre Personnel



AN HIA MOTOR COMPANY

Date of accident: 08/01/2023 Time: 7:45 Location: Open Space Campsite lot 218,  
 My Vehicle A: SDZ 168P Vehicle B: GBL 9867U Vehicle C: ---

SKETCH PLAN

Describe Circumstances of the Accident.

\* Refer To Police Report \*

~~08/01~~ 7/2023 0108/2023

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information.

☐ Claim OD/TP at Ah Lim Motor ☒ Claim OD/TP at other workshop ☐ Reporting Only

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

9th Jan 2023

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

Witnessed by Reporting Centre Personnel






















**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Changi N.P.C  
9 Simei Street 2 SINGAPORE 529914  
Tel No: 1800-5872999



T/20230108/2085

1 of 3

Report No. T/20230108/2085

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 08/01/2023 23:33		Vide Report No.:		Station Diary No.: 100	
<b>Informant's Particulars</b>					
Name of Informant: TAN ENG HWEE			Address: 5 SUNBIRD ROAD SINGAPORE 487130		
ID Type / ID No.: NRIC NO / S1748185A			Contact No.: Home/Office: Mobile: 96182168		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 56	Date of Birth: 22/07/1966	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Unemployed			Driving Licence Information: Class: 3		Date of Expiry:

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 08/01/2023 17:45	Type of Location: Car Park
Location:  UPPER BOON KENG ROAD				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control: Not Controlled	Traffic Volume:	
Type of Collision: Reversing Vehicle collision				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
GBL9867U	Van		Town Ace 1.5 GL Auto			0
SDZ168R	Car	TOYOTA	RUSH 1.5X A	Silver	Slightly Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
SDZ168R	AUTO & GENERAL INSURANCE (SINGAPORE) PTE. LIMITED	P10439935R02	11/09/2022	10/09/2023



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Changi N.P.C  
9 Simei Street 2 SINGAPORE 529914  
Tel No: 1800-5872999



T/20230108/2085

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Report No. T/20230108/2085

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	TAN ENG HWEE	ID No.	S1748185A
Related Vehicle	SDZ168R (Car)	Contact No.	96182168
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 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 the above-mentioned date, time and location, I discovered my vehicle to have damages on the right side of the front bumper. There was a witness who saw the whole incident and informed the subject that his vehicle has collided with mine. The witness then left for the marketplace. The witness upon returning to the collision scene, the vehicle has already fled. I wish to state there was no written notes left for my acknowledgement and I have camera footages of the collision.

**Witness details:**

Name: Mr Wee  
Handphone: +65 9001 1896





**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Changi N.P.C  
9 Simel Street 2 SINGAPORE 529914  
Tel No: 1800-5872999



T/20230108/2085

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Report No. T/20230108/2085

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:

G /  
SGT 1 MUHAMMAD HARITH BIN  
AMRAN

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
08/01/2023 23:33

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

Classification Of Case:

NP168

OTHER DOCUMENTS

It pays to choose

**Budget  
Direct  
insurance**

## Certificate of Insurance

 Comprehensive Car Policy  
 Policy Number: P1043993SR02

Motor Vehicles (Third-Party Risks And Compensation) Act 1960 of Singapore, Motor Vehicles (Third-Party Risks And Compensation) Rules of Singapore, Road Transport Act 1987 of Malaysia, Road Transport (Amendment) Act 2019 of Malaysia, Motor Vehicles (Third-Party Risks) Rules, 1959 of Malaysia, or any Amendment, Act or Acts passed in substitution thereof.

**Certificate Number P1043993SR02 (Comprehensive / Named Driver Plan)**

- |  |   |                    |
|--|---|--------------------|
| 1) Vehicle Registration Number   | : | SDZ169R            |
| Chassis Number   | : | J200E0028763       |
| 2) Effective Date / Time of Commencement of Insurance for the Purpose of the Act | : | 11/09/2022 (00:00) |
| 3) Date / Time of Expiry of Insurance  | : | 10/09/2023 (23:59) |
| 4) Excess (i) Policy   | : | S\$ 600.00         |
| (ii) Windscreen  | : | S\$ 100.00         |
| 5) Policyholder  | : | Tan Eng Hwee       |

**6) Persons or Classes of Persons Entitled to Drive\***

Drivers named as a Main / Named Driver in this Certificate of Insurance only.

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 any reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act 1961 of Singapore and its registration under the said Road Traffic Act has not been cancelled at the time of accident or loss. Please refer to the Product Disclosure Document for full terms and conditions.

Main Driver / Date of Birth : Tan Eng Hwee (22/02/1966)

Named Driver(s) / Date of Birth : Yap Bing Chong (10/03/1972)

**7) Limitation as to use\***

Use only for social, domestic and pleasure purposes. The Policy does not cover use for hire or reward, tuition or driving tests, racing, pace-making, reliability trials, speed testing or 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.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act 1960 of Singapore and Section 95 of the Road Transport Act 1987 of Malaysia, are not to be included under these headings.

- |                    |   |                  |
|--------------------|---|------------------|
| 8) Finance Company | : | Top Carz Pte Ltd |
|--------------------|---|------------------|

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 1960 of Singapore and Part IV of the Road Transport Act 1987 of Malaysia or any Amendment, Act or Acts passed in substitution thereof.

 Issued in Singapore on  
 02/09/2022

 Auto & General Insurance (Singapore) Pte. Limited  
 Trading as Budget Direct Insurance



 Simon Birch  
 Chief Executive Officer

Auto & General Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G), trading as Budget Direct Insurance  
 190 Clemenceau Avenue, #03-01, Singapore Shopping Centre, Singapore 239926 Tel: 6221 2111 budgetdirect.com.sg