SN09232L0003-01 / National Assessment Centre Services [408933]
ENTRY DATE & TIME: 21/02/2023 17:05 (SGT)
SUBMITTED BY: NIVITHA
VERSION: 2 (22/02/2023 13:16 (SGT))

Your NCD will be affected due to late reporting

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.
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	21/02/2023 17:05 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	20/01/2023 18:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	BLK 435A HOUGANG AVENUE 8 MULTI-STOREY CAPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGY4554C

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	HO SHIONG BOCK JOHN
NRIC No	SXXXX478A
Email Address	natchi@yahoo.com
Mobile Phone No	(Phone) +65-90100427
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Avante
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 - Reporting only
Vehicle Category	Private car
Transmission	Auto
CC	1591

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNW00076502201

DRIVER

Name of Driver	HO SHIONG BOCK JOHN
NRIC No	SXXXX478A
Date Of Birth	24/08/1971
Occupation	Indoor

Date Of Driving Pass	13/12/1994
Driving experience	28 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-90100427
Alt. Phone Number	-
Email Address	natchi@yahoo.com
Address	436 HOUGANG AVENUE 8
Address complement	# 04-1501
Postcode	530436
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	Wet

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)	1
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE ATTACHED STATEMENT

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	UNKNOWN
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

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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 / the / our 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.

21 Feb 2023

Policyholder's Signature / Date & Time

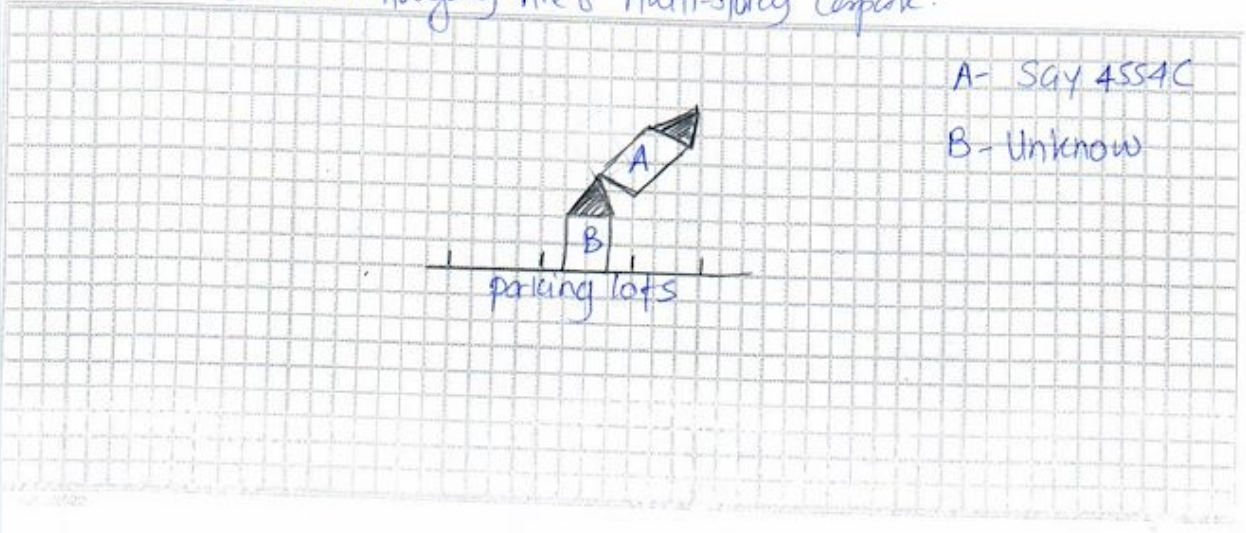
Actual Driver's Signature (if driver is not the policyholder) / Date & Time

21/2/2023

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

Sketch Plan

Blk 435A Hougang Ave 8 Multi-Storey Carpark.



Describe circumstance of the Accident

Please Refer to the attached statement

Declaration

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

21 Feb 2023

Policyholder's Signature / Date & Time

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

21/2/2023

Witness / Reporting Officer's Signature (Name as in NRIC/ID card)

20 Jan 2023 (Friday), incident happened around 1845h.

Weather: raining, dark

Enironment condition: dark, as the lights in the carpark hasn't turned on.

Location: Covered car park MSCP, blk 435A Hougang ave 8, level 1

Event happening:

I was driving a vehicle (hyundai avante) SGY4554A and arrived into the MSCP. I looked around for a empty car park lot and attempted to backed into the lot. Unfortunately the area was dark as the lights hasn't turned on (they are automatically turned on after 1900-1915h, i think). As i reversed into the lot, and looking around for other vehicles and passerbys, i bumped into a vehicle behind (parked in adjcent lot).

I Hit his front right portion of the vehicle.

I forwarded my car and re-parked my car in the next level as it was brighter. Then i went to checked on both vehicles (front bumper of the vehicle i bumped into and the rear bumper of my car). I noticed there was no dents in both bumpers and I left the location. Also to mention the surface of the carpark was wet.

I didn't take any photos or take note of the vehicle number.

IMAGES

IMAGES #2

IMAGES #3

IMAGES #4

IMAGES #5

IMAGES #6


현대자동차㈜
변속기 TRANSM
차축 AXLE
도장 PAINT
의장 TRIM
P
H
2R
9Y
정비부호 S.V.C
형식 APPD
승인 MODEL
번호 NO
HYUNDAI MOTOR COMPANY
KMHDU41BR7U243500

GENERAL INSURANCE ASSOCIATION
RECORD MANAGEMENT CENTRE

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: SN09232L0003 Vehicle Registration No: SGY 4554C

Name (as shown in NRIC): Ho Shiong Bock John NRIC/FIN/Passport No: S7129478A

(*~~Vehicle Driver~~/Policyholder) (*) Please delete as appropriate

Address: 436 Hougang Avenue 8 # 04-1501 Singapore (530436

Contact (Tel): Mobile No.: 9010 0427

Email Address: natchi@yahoo.com

Date of Accident: 20/01/2023 Time of Accident: 18:45

Place of Accident: Blk 435A Hougang Ave 8 Multi-Storey Carpark

Insurance Company: China Taiping

(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:

Amend policy Number - DMPCSNW0007650220l

Policyholder / Actual Driver's Signature
Date:

22/2/23
Reporting Centre Personnel's Signature
Name (as in NRIC/ID card):
Date: