

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 16/02/2023 13:49 (SGT)
Reported by Both Policyholder and Actual Driver
Date of Accident 15/02/2023 11:00 (SGT)
Exact Location of Accident Singapore
Additional Location Information 851A MULTI STOREY CARPARK, LEVEL 5
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMS6116G

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner ONG BENG PHENG
NRIC No SXXXX374D
Email Address danielobp9698@gmail.com
Mobile Phone No (Phone) +65-90116263
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Toyota
Model COROLLA ALTIS ELEGANCE (AUTO)(2WD)
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 1598

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number DMPCSNW00004072302

DRIVER

Name of Driver ONG BENG PHENG
NRIC No SXXXX374D
Date Of Birth 24/10/1962
Occupation Indoor

Date Of Driving Pass	07/05/1984
Driving experience	38 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90116263
Alt. Phone Number	-
Email Address	danielobp9698@gmail.com
Address	BLK 851 HOUGANG CENTRAL #08-01
Address complement	-
Postcode	530851
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)	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?	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 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	GBK3920T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	ANG CHEE HUP
NRIC No	SXXXX631A
Contact Number	(Phone) +65-85000066
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

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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.

Policyholder's Signature / Date & Time

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

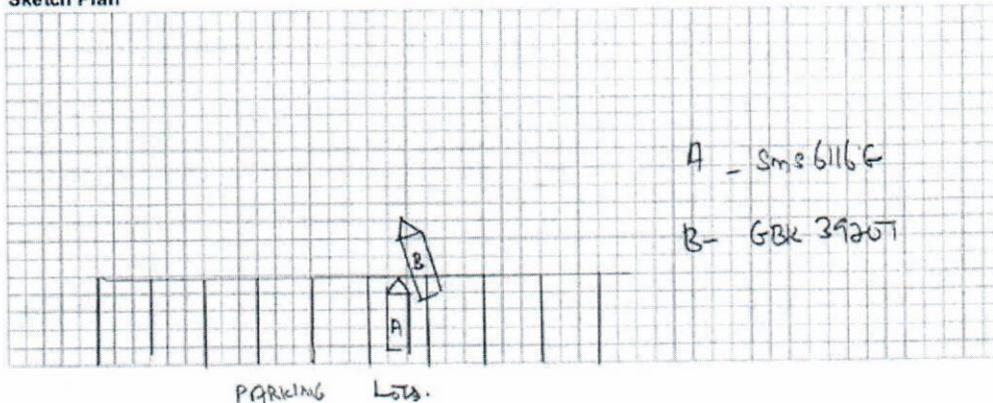
16/2/23 12pm

Kiara



Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

Refer to police Report. T/2022226/2001.

Third party admitted and written a note attached.

T/claim@GUAN AUTO SERVICES 

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time



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

16/2/23 12pm

Kidwa.



Witnessed by Reporting Centre Personnel


**SINGAPORE
POLICE FORCE**

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



T/20230216/2001

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Report No. T/20230216/2001

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/02/2023 00:18	Vide Report No.:	Station Diary No.: 1
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Informant's Particulars

Name of Informant: ONG BENG PHENG		Address: APT BLK 851 HOUGANG CENTRAL #08-01 SINGAPORE 530851	
ID Type / ID No.: NRIC NO / S1521374D		Contact No.: Home/Office: Mobile: 90116263	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 60	Date of Birth: 24/10/1962	Type of Informant: Driver
Race: Chinese		Language: Chinese	Institution / School Name:
Occupation: PART TIME		Driving Licence Information: Class: 2B,2A,2,3,4,5 Date of Expiry:	

General Information of the Accident

Type of Accident: Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 15/02/2023 11:00	Type of Location: Car Park
Location: HOUGANG CENTRAL			
Weather: Clear	Road Surface: Dry	Road Speed Limit:	
Traffic Flow:	Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SMS6116G	Car	TOYOTA	COROLLA ALTIS ELEGANCE (AUTO)(2W D)	Grey	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



**SINGAPORE
POLICE FORCE**



T/20230216/2001

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

Report No. T/20230216/2001

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
SMS6116G	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW000040 72302	08/01/2023	07/01/2024

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	ONG BENG PHENG		ID No.	S1521374D
Related Vehicle	SMS6116G (Car)		Contact No.	90116263
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4,5 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL

Brief Details.

On 14/02/2023 at about 2235hrs, I parked my vehicle SMS6116G at the MSCP located at Blk 850A Hougang Central level 5 near to lift lobby beside a van. At the point of time, everything was secured and intact.

On 15/02/2023 at about 1100hrs, I went back to my vehicle, I discovered dents on the front right side of my vehicle and when I view my CCTV footages that was installed inside my vehicle, I spotted one van (GBK3920T) could have collided onto the front right side of my vehicle when the driver was exiting the carpark lot.

At about 2340hrs, I spotted the said van (GBK3920T) had parked at a loading and unloading bay located at blk 853 hougang central. When I went to make a check, I discovered scratches on the center left side of the van and I suspected that the driver of the said van could have collided onto the right side of my vehicle and drove off. I would like to state that my in-car camera footages did not capture the whole incident.



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POLICE FORCE**

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



T/20230216/2001

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Report No. T/20230216/2001

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: 16/02/2023 00:18
Officer In Charge Of Case: TP / HRT / SR STAFF SGT IRMAN BIN MOHAMAD SAID Contact No.: 65476145	Classification Of Case:

NP168