

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 | 21/02/2023 15:28 (SGT) |
| Reported by | Both Policyholder and Actual Driver |
| Date of Accident | 20/02/2023 15:00 (SGT) |
| Exact Location of Accident | 254 Jurong East St 24, Singapore 600254 |
| Additional Location Information | CARPARK |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------------|---------|
| Vehicle Registration Number | SMU991A |
|-----------------------------------|---------|

INSURED/POLICYHOLDER

| | |
|--------------------------------|----------------------|
| Is company? | No |
| Name Of Registered Owner | LIM CHEE HAO |
| NRIC No | SXXXX019A |
| Email Address | limcheehao@gmail.com |
| Mobile Phone No | (Phone) +65-96505499 |
| Alternative Phone No | - |

VEHICLE PARTICULARS

| | |
|--|---------------------------|
| Manufacturer | Suzuki |
| Model | Swift |
| Variant | - |
| Exact purpose for which vehicle was being used at time of accident | - |
| Are you claiming under your own insurance policy for repair to your vehicle? | No - Claiming third party |
| Vehicle Category | Private car |
| Transmission | Manual |
| CC | 1586 |

INSURANCE COMPANY

| | |
|---|--------------------------|
| Name of Insurance Company | Income Insurance Limited |
| Policy Number / Cover Note Number | 5103354002-04 |

DRIVER

| | |
|----------------------|--------------|
| Name of Driver | LIM CHEE HAO |
| NRIC No | SXXXX019A |
| Date Of Birth | 02/05/1989 |
| Occupation | Indoor |

| | |
|--|----------------------|
| Date Of Driving Pass | 14/10/2013 |
| Driving experience | 9 YEARS AND 4 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-96505499 |
| Alt. Phone Number | - |
| Email Address | limcheehao@gmail.com |
| Address | 54 VERDE GROVE |
| Address complement | - |
| Postcode | 688586 |
| 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 | Jurong East Neighbourhood Police Centre |
| Police Station Phone No | (Phone) +65-18008999999 |
| Alt. Police Station Phone No | (Fax) +65-66655791 |
| Police Station Address | No. 92 Boon Lay Way Singapore 609962 |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

PLEASE SEE ATTACHED SKETCH PLANS.
THIRD PARTY VEHICLE NUMBER NOT ACCURATE. IT IS EITHER YQ7928S OR YG7928U.
ONLY 2 VEHICLES INVOLVED.

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 | YG7928U |
| 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) | - |

DETAILS OF OTHER VEHICLE PROPERTY 2

| | |
|---|--------------------|
| Vehicle Registration Number | YQ7928S |
| 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) | - |

SKETCH PLAN

IMPORTANT NOTICE


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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:

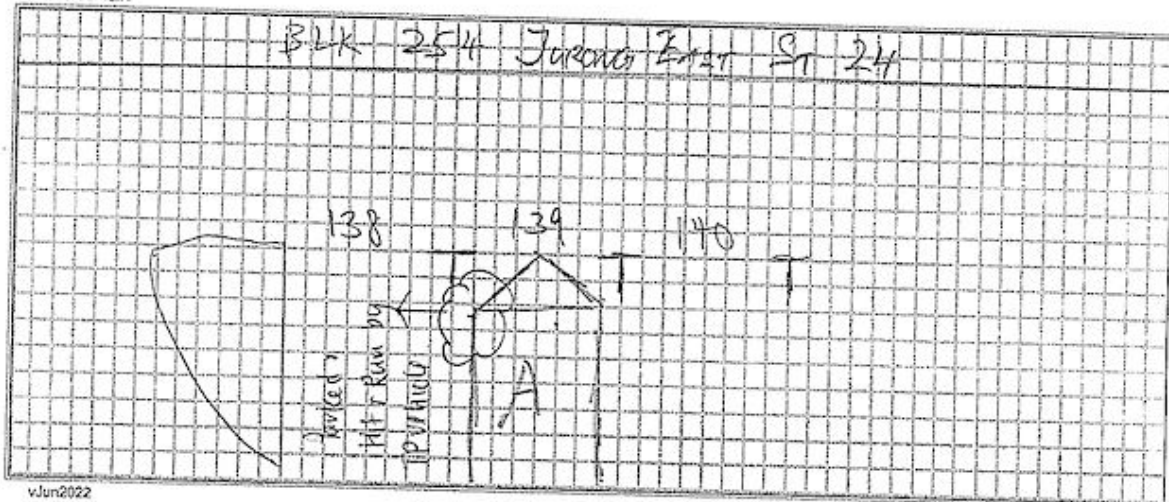
- (a) My Insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this form and any other personal information provided by me or possessed by my insurer (collectively the "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.


21 FEB 23
Policyholder's Signature / Date & Time


21 FEB 23
Actual Driver's Signature (if driver is not the policyholder) / Date & Time


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

Sketch Plan





Describe Circumstance of the Accident

Refer to police report report no T/20230220/2094

Declaration

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


21 FEB '23
Policyholder's Signature / Date & Time


21 FEB '23
Actual Driver's Signature (if driver is not the policyholder)
/ Date & Time


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































**SINGAPORE
POLICE FORCE**



T/20230220/2094

Police Station Of Origin:
Jurong East N.P.C
92 Boon Lay Way SINGAPORE 609962
Tel No: 1800-8999999

1 of 3
Report No. T/20230220/2094

REPORT OF A TRAFFIC ACCIDENT

| | | | | | |
|--|------------|------------------------------|---|--------------------------|----------------------------|
| Date/Time Report Made: 20/02/2023 17:31 | | Vide Report No.: | | Station Diary No.: 67 | |
| Informant's Particulars | | | | | |
| Name of Informant: LIM CHEE HAO | | | Address: 54 VERDE GROVE SINGAPORE 688586 | | |
| ID Type / ID No.: NRIC NO / S8915019A | | | Contact No.: Home/Office: Mobile: 96505499 | | |
| Nationality: SINGAPORE CITIZEN | | | Email: limcheehao@gmail.com | | |
| Sex: Male | Age: 33 | Date of Birth: 02/05/1989 | Type of Informant: Vehicle Owner | | |
| Race: Chinese | | | Language: English | | Institution / School Name: |
| Occupation: ENGINEER | | | 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: 20/02/2023 15:00 | Type of Location: Car Park |
| Location: JURONG EAST STREET 24 | | | | |
| Weather: Drizzling | | Road Surface: Dry | | Road Speed Limit: |
| Traffic Flow: Two Way | | Traffic Control: Not Controlled | | Traffic Volume: Light |
| 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 |
|-------------|------|--------|-------|-------|------------------|------------------|
| SMU991A | Car | SUZUKI | SWIFT | Grey | Slightly Damaged | 0 |

Details of Person Involved

| | |
|---------------------------------|--------------------------------|
| Any Pedestrian Involved: No | |
| No. of Pedestrians Injured: NIL | Use of Pedestrian Crossing: NA |



**SINGAPORE
POLICE FORCE**



T/20230220/2094

Police Station Of Origin:
Jurong East N.P.C
92 Boon Lay Way SINGAPORE 609962
Tel No: 1800-8999999

2 of 3

Report No. T/20230220/2094

CONTINUATION OF REPORT

| Vehicle Owner | | | |
|-----------------------------------|--------------|--|---------------------------------|
| Name | LIM CHEE HAO | ID No. | S8915019A |
| Related Vehicle | NIL | Contact No. | 96505499 |
| 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 20/02/2023 at about 1500hrs, I had parked my vehicle along Blk 254 Jurong East St 24 carpark, carpark lot number 139, in which my vehicle was intact before I left. I then came back to my vehicle about 1630hrs in which I realised that the front left passenger door handle was completely dismantled. I also noticed that the handle was on the ground and destroyed. There was also a scratch on the left side mirror. I do not have any suspect in mind. My in car camera was not able to capture the incident when it happened.

There was one passerby who informed me that earlier he had seen a lorry that had hit onto my vehicle earlier, believed to be either YQ7928S or YG7928U however there was no further details provided. This is the first time I have encountered such incident. I noticed that there was a nearby POLCAM 03 and POLCAM 04 however I am not sure if it is able to capture the incident where my vehicle was parked at.



**SINGAPORE
POLICE FORCE**



T/20230220/2094

Police Station Of Origin:
Jurong East N.P.C
92 Boon Lay Way SINGAPORE 609962
Tel No: 1800-8999999

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Report No. T/20230220/2094

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:

D /
SGT 2 NUR ILLFA BATRISYA
BINTE YUSNI

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / HRT /
STAFF SGT SUFIYAN BIN KHAIRI
Contact No.: 65476148

Signature Of Informant:

Date/Time:
20/02/2023 17:31

Classification Of Case:

NP168