

## 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 .....	04/04/2023 16:30 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	04/04/2023 07:32 (SGT)
Exact Location of Accident .....	531 Pasir Ris Dr 1, Block 531, Singapore 510531
Additional Location Information .....	LOT 133.
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SLT7520Y
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	NG EE CHIN, CHARLES
NRIC No .....	SXXXX603I
Email Address .....	CHARLES.NEC@GMAIL.COM
Mobile Phone No .....	(Phone) +65-98440765
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	BMW
Model .....	216i
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 .....	FWD Singapore Pte. Ltd.
Policy Number / Cover Note Number .....	PNPV2019-00017208-03

#### DRIVER

Name of Driver .....	NG EE CHIN, CHARLES
NRIC No .....	SXXXX603I
Date Of Birth .....	24/09/1982
Occupation .....	Indoor

Date Of Driving Pass .....	18/03/2003
Driving experience .....	20 YEARS AND 1 MONTH
Gender .....	Male
Mobile Number .....	(Phone) +65-98440765
Alt. Phone Number .....	-
Email Address .....	CHARLES.NEC@GMAIL.COM
Address .....	BLK 531 PASIR RIS DR 1 #05-300
Address complement .....	-
Postcode .....	510531
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 .....	Traffic Police
Police Station Phone No .....	(Phone) +65-65470000
Alt. Police Station Phone No .....	(Fax) +65-65474900
Police Station Address .....	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLS REFER TO POLICE REPORT NO.T/20230404/7049.

#### 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 .....	SLK2339K
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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**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.

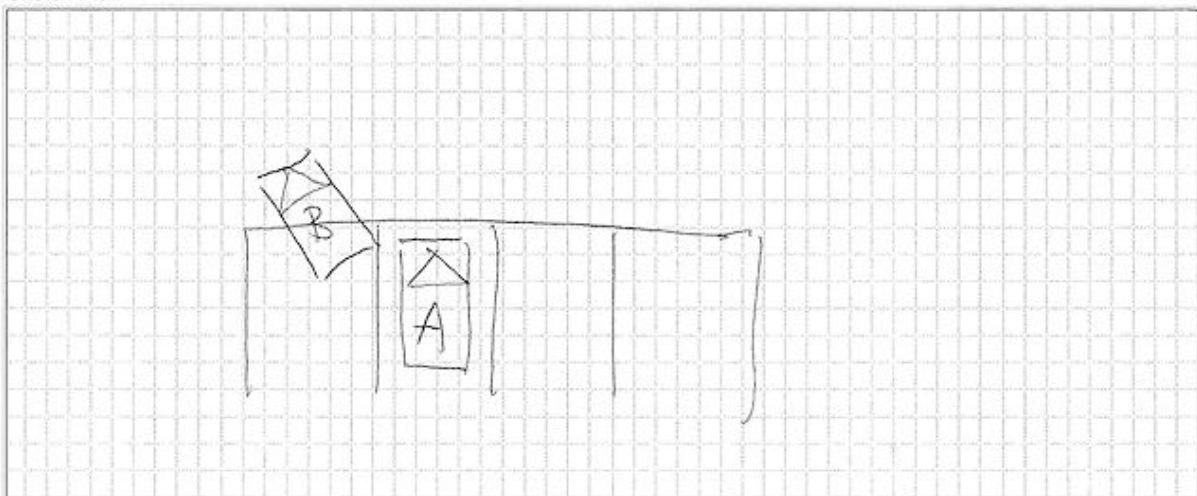


Policyholder's Signature / Date & Time

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

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

Sketch Plan



Describe Circumstance of the Accident

refer to police report

Declaration

I/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

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





















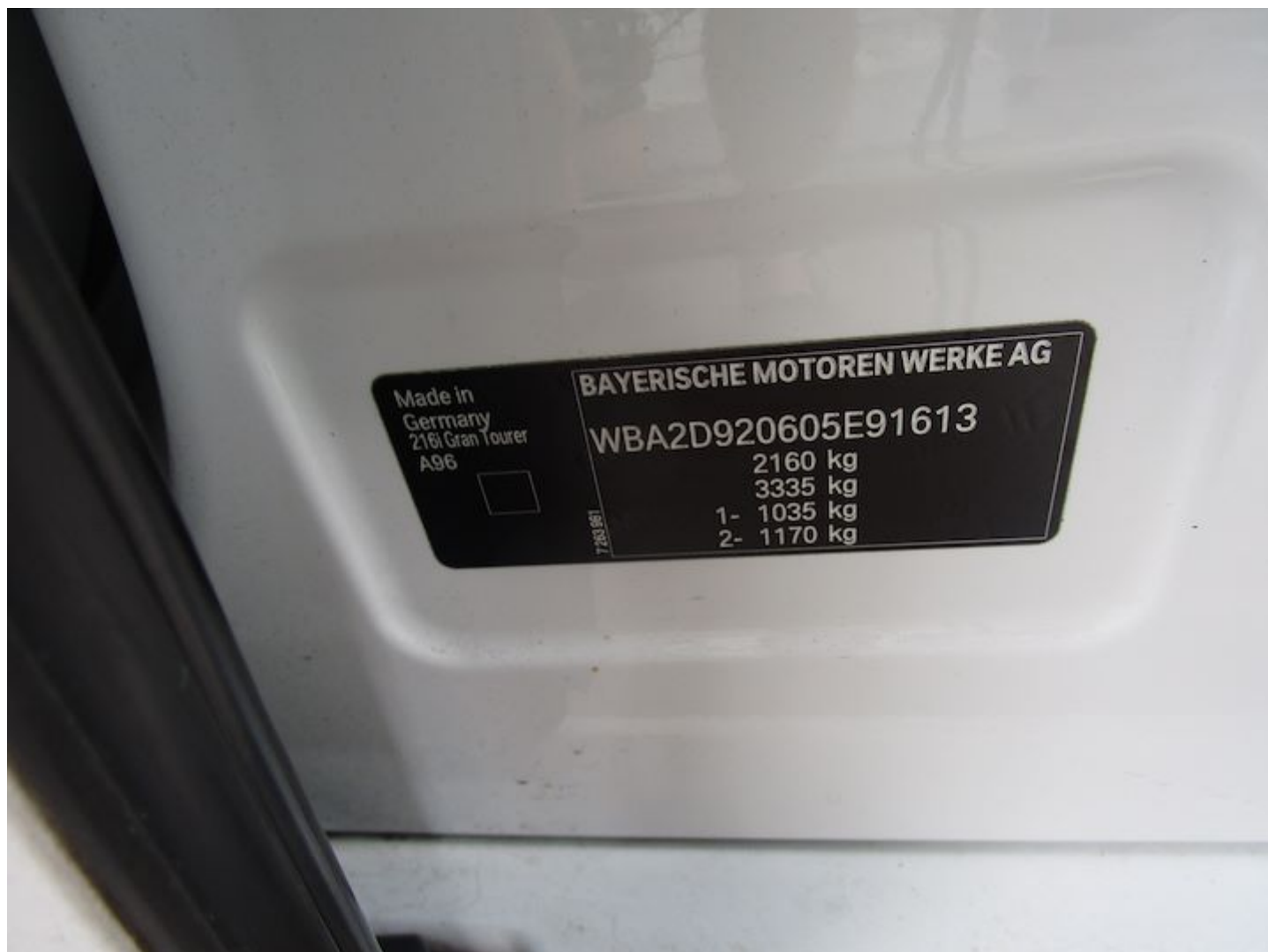
























**SINGAPORE  
POLICE FORCE**



T/20230404/7049

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408665  
Tel No: 65470000

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Report No. T/20230404/7049

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 04/04/2023 14:45	Vide Report No.:	Station Diary No.:
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**Informant's Particulars**

Name of Informant: NG EE CHIN, CHARLES			Address: 531 PASIR RIS DRIVE 1 #05-300 SINGAPORE 510531		
ID Type / ID No.: NRIC NO / S82286031			Contact No.: Home/Office: Mobile: 98440765		
Nationality: SINGAPORE CITIZEN			Email: CHARLES.NEC@GMAIL.COM		
Sex: Male	Age: 40	Date of Birth: 24/09/1982	Type of Informant: Vehicle Owner		
Race: Chinese			Language: English	Institution / School Name:	
Occupation:			Driving Licence Information: Class:	Date of Expiry:	

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 04/04/2023 07:30	Type of Location: Car Park
Location:  PASIR RIS DRIVE 1				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 20 Km/h	
Traffic Flow: One Way		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
SLT7520Y	Car	BMW	216i	White	Slightly Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLT7520Y	FWD Singapore Pte. Ltd	PNPV2019-00017208-03	10/11/2022	09/11/2023



**SINGAPORE  
POLICE FORCE**



T/20230404/7049

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20230404/7049

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Vehicle Owner			
Name	NG EE CHIN, CHARLES	ID No.	S8228603I
Related Vehicle	NIL	Contact No.	98440765
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

**Brief Details.**

SLK2339K white Honda Shuttle is the said culprit.

Reversed into the left side my car, white BMW 216i, which was parked and unmanned at that time of incident. And then culprit drove off. Causing damage to my left front (passenger seat) door frame. Photo available.

Car cam showed footage of said incident. Video footage available (3.1MB).

Carpark area at the site of incident is tight, due to a construction going on, and offers little manoeuvring space.

This is an open air carpark at Block 531, Pasir Ris Dr 1, Lot 133. Culprit is believed to be parked at Lot 134. Time of incident according to car cam was 7.32am on 4 April 2023.



SINGAPORE  
POLICE FORCE

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000



T/20230404/7049

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Report No. T/20230404/7049

## CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPIB /  
IRMAN BIN MOHAMAD SAID  
Contact No.: 65476145

NP168

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by Singpass. No signature is  
required.

Date/Time:  
04/04/2023 14:45

Classification Of Case:



Calderbank Hong  
Kong Insurance Co., Ltd.

Please call \_\_\_\_\_ for FWD Emergency Assistance  
if your car breaks down or is involved in an accident.  
All accidents must be reported within 24 hours or the next working day of the incident  
regardless of whether it will lead to a claim.

**Policy number** : PNPV2019-00017208-03

**About this policy**

Premium paid	: S\$752.51	Coverage start date	: 10/11/2022
(Inclusive of GST)		Coverage end date	: 09/11/2023
Who is insured to drive:	: You and any Authorised Driver		
Plan type	: Classic		

**About you (As the policyholder)**

Your name	: Ng Ee Chin Charles		
Address	: 525C Pasir Ris Street 51 13-585 Costa Ris Singapore 513525		
Email	: charles.nec@gmail.com		
NRIC/FIN	: S8228603I	Date of birth	: 24/09/1982
Marital status	: Married	Gender	: Male
Current no claims discount	: 50%	Mobile number	: 98440765
Years of driving experience	: Three or more	Certificate of merit	: Yes

**About your car**

Car make and model	: BMW 216I GRAN TOURER
Year of first registration	: 2017
Car plate number	: SLT7520Y
Issued on:	: 09/09/2022

**Khor Kee Eng**  
Chief Executive Officer  
FWD Singapore Pte Ltd

Please refer to contract for specific terms, conditions  
and exclusions of this policy.

Please immediately inform us at **+65-6820-8888**  
or email us to **contact.sg@fwd.com** if any details in  
this Car Insurance Summary need to be changed.