

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	24/04/2023 10:49 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	22/04/2023 02:00 (SGT)
Exact Location of Accident	648 Pasir Ris Drive 10, Block 648, Singapore 510648
Additional Location Information	CAR PARK 648 PASIR RIS DRIVE 10 SINGAPORE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMP8376A
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	KOH SENG LEONG (XU SHENGLONG)
NRIC No	S8328200B
Email Address	EASY2FINDME@GMAIL.COM
Mobile Phone No	(Phone) +65-96488228
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Alfa Romeo
Model	ALFA ROMEO / GIULIA 2.9 V6
Variant	ALFA ROMEO / GIULIA 2.9 V6
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	2891

INSURANCE COMPANY

Name of Insurance Company	FWD Singapore Pte. Ltd.
Policy Number / Cover Note Number	PNPV2022-00004200

DRIVER

Name of Driver	KOH SENG LEONG (XU SHENGLONG)
NRIC No	S8328200B
Date Of Birth	19/09/1983
Occupation	Indoor

Date Of Driving Pass	17/03/2006
Driving experience	17 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-96488228
Alt. Phone Number	-
Email Address	EASY2FINDME@GMAIL.COM
Address	BLK 648 PASIR RIS DRIVE 10 11-54 SINGAPORE 510648
Address complement	-
Postcode	510648
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	Bedok Division Headquarters
Police Station Phone No	(Phone) +65-18002440000
Alt. Police Station Phone No	(Fax) +65-64443009
Police Station Address	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED
STATEMENT RECORDED BY ANNIE - PROGRESSIVE CAR CARE PTE LTD
TEL 67415336

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLH627H
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:

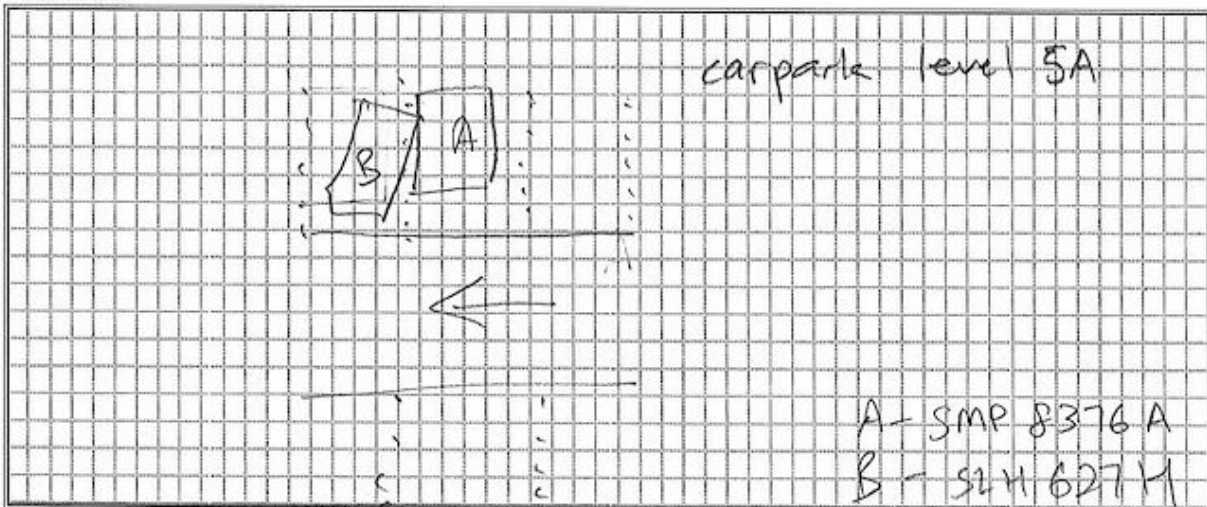
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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



Declaration

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.

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

Report No. G/20230422/7037

Date/Time Report Made 22/04/2023 13:35	Vide Report No.	Station Diary No.
Name Of Informant <u>KOH SENG LEONG</u>	Address 648 PASIR RIS DRIVE 10 #11-54 SINGAPORE 510648	
ID Type / ID No. NRIC NO / S8328200B	Contact No.	
	Home/Office:	Mobile: 96488228
Nationality <u>SINGAPORE CITIZEN</u>	Email Address EASY2FINDME@GMAIL.COM	
Occupation Company director	Sex Male	Age 39
Institution/School Name	Date of Birth 19/09/1983	Race Chinese
Date/Time Of Incident 22/04/2023 02:00 - 22/04/2023 10:00	Language English	
	Location Of Incident 648 PASIR RIS DRIVE 10 #11-54 SINGAPORE 510648	

Subjects Involved

 Accident report **S000234O0007**



**SINGAPORE
POLICE FORCE**



G/20230422/7037

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20230422/7037

Suspect			
Person Name	Unknown		
Gender	Male	Age	18-30
Build	Slim	Attire Last Worn	Grey T shirt and dark coloured knee length bermudas
Hair Colour	Black	Habits & Oddities	wearing dark rimmed spectacles
Victim			
Person Name	KOH SENG LEONG		
ID Type	NRIC NO	ID No	S8328200B
Gender	Male	Age	39
Race	Chinese	Language	English
Occupation	Company director	Address	648 PASIR RIS DRIVE 10 #11-54 SINGAPORE 510648
Mobile No	96488228	Is Informant A Victim?	Yes
Person Name	KOH SENG LEONG (Informant)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 22/04/2023 13:35
Officer In-Charge Of Case:	Classification Of Case: