SS3D23590007 / Strides Automotive Services Pte Ltd (757705) ENTRY DATE & TIME: 09/05/2023 13:16 (SGT) SUBMITTED BY: GRACE NG SIU CHING (SMRT19) VERSION: 1 (09/05/2023 13:16 (SGT))

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.

- 4. The issue and acceptance of this is form by instrained 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 09/05/2023 13:16 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 23/04/2023 02:05 (SGT) Exact Location of Accident Singapore Additional Location Information 605 TAMPINES ST 61 MSCP Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SFF57771

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner **ERIC HIAH BOON CHUAN** NRIC No SXXXX972I Fmail Address ERICHIAH2011@HOTMAIL.SG Mobile Phone No (Phone) +65-91770786 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Camry 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? Vehicle Category

Transmission CC

Private use

No - Claiming third party Private car

Auto 2000

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited Policy Number / Cover Note Number 5127087508

DRIVER

Name of Driver **ERIC HIAH BOON CHUAN** NRIC No SXXXX972I Date Of Birth 21/11/1990 Occupation Indoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver	29/05/2014 8 YEARS AND 11 MONTHS Male (Phone) +65-91770786 - ERICHIAH2011@HOTMAIL.SG BLK 605D #12-356 TAMPINES ST 61 TAMPINES GREENRIDGES - S524605 Yes - No
Insurance Company of Other Vehicle Owned by Driver	-
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Hit and run / Vandalism / Damaged whilst parked Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement	No 2 No - Yes 0 No
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Police Station Name Police Station Phone No Alt. Police Station Phone No Police Station Address Was notice of intended Prosecution given? If yes, against whom?	Yes Traffic Police (Phone) +65-65470000 (Fax) +65-65474900 10 Ubi Avenue 3 Singapore 408865 No
CINCUMSTANCES OF ACCIDENT	
PLEASE REFER POLICE REPORT : T/20230505/7011	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes No
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model	-

Vehicle Variant

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	TAN BOON LENG
NRIC No	SXXXX905A
Contact Number	(Phone) +65-94692907
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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- 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.

Any false reporting may be referred to the Traffic Police Department for investigation.

- 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.
- 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")

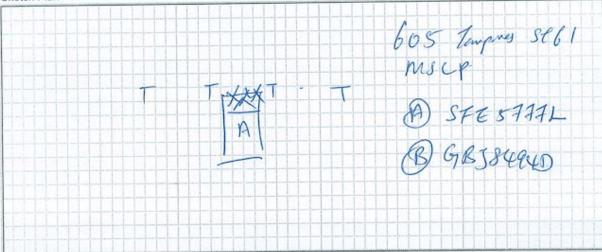
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the 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.

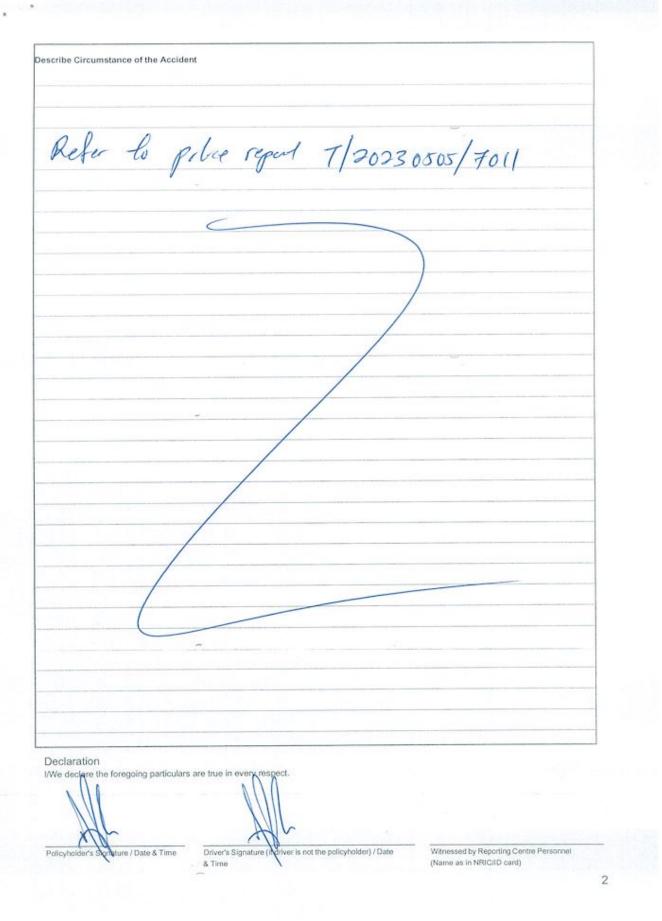
Policyholder's Signature / Date & Time

Oriver's Signature (If driver is not the policyholder) / Date

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

Sketch Plan





























Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1/20230305/7011 1 of 3

Report No. T/20230505/7011

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/05/2023 11:11		Vide Report No.: G/20230423/0045	Station Diary No.:		
Informa	nt's Partic	ulars			
Name of Informant: ERIC HIAH BOON CHUAN			Address: 605D TAMPINES STREET 61 #12-356 SINGAPORE 524605		
	/ ID No.: O / S90449	721	Contact No.: Home/Office:	Mobile: 91770786	
Nationality: SINGAPORE CITIZEN		Email: ERICHIAH2011@HO	TMAIL.SG		
Sex: Male	Age: 32	Date of Birth: 21/11/1990	Type of Informant: Vehicle Owner		
Race: Chinese		Language: English			
Occupation: Insurance sales agent/broker		Driving Licence Inform Class:	nation: Date of Expiry:		

Type of Accident: Non-Injury Attended by Police		Drink Drive:	Date/Time of Accident:	Type of Location Car Park
Location:		No	23/04/2023 02:05	
TAMPINES S	TREET 61			
Weather:		Road Surface:		
		Dry	240	
Clear		T /// 0	-	
Traffic Flow: One Way		Traffic Control: Not Controlled		raffic Volume:

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenge
GBJ8494D	Van	NISSAN	NV 200	Grey		0
SFE5777L	Car	ТОУОТА	Camry	White	Seriously Damaged	0



T/20230505/7011

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20230505/7011

CONTINUATION OF REPORT

Details of Perso	n Involved					
Any Pedestrian I	nvolved: No					LO ANADONI
No. of Pedestriar	ns Injured: NIL		Use of Pe	destriar	Cross	sing: NA
Driver						
Name	TAN BOON LENG			ID No		S6821905A
Related Vehicle	GBJ8494D (Van)			Contact No.		94692907
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g ce &	Class: 3 Date of Expiry: NIL
Date	NIL Date				NIL	
No. of Days gran	o. of Days granted Medical Leave NIL Degree			f	NIL	
Vehicle Owner						
Name	ERIC HIAH BOON CHUAN			ID No		S9044972I
Related Vehicle	NIL		Contact No.		91770786	
Hospital/Clinic	NIL			Class of Driving Licence & Expiry		Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL		
No. of Days gran	ted Medical Leave	NIL	Degree of	f	NIL	<u> </u>

Brief Details.

I received a notification from my dad on the 23/04/2023 that my parked vehicle SFE5777L encountered a collision from a commercial vehicle GBJ8494D. As I was overseas at the time and was only back on the 05/05/2023, I could only make the report today. A case card was found on my front windscreen, prompting me to make the police report. The owner of the commercial vehicle provided his particulars for contact and agreed to file for insurance claim.

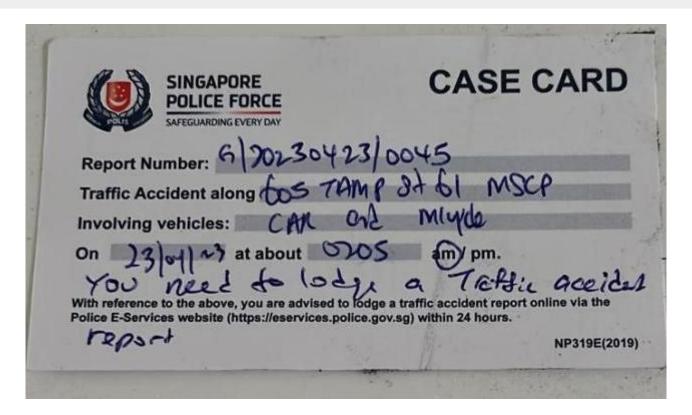




Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20230505/7011

CONTINUATION OF REPORT

Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.				
Date/Time: 05/05/2023 11:11				
Classification Of Case:				



	irline Confirmation United Airline s - 5SSIZN, Air Japan - 5SSIZN	es - ER3XWQ,l	Jnited
All Nippon Airways NH7395 operated by United Airlines Economy(L) Plane: 320	Vancouver Intl - (YVR)	Depart	Wednesda y 03/05/23 07:00
	San Francisco Intl - (SFO)	Arrive	Wednesda y 03/05/23 09:27
		Duration	2 hr 27 min
All Nippon Airways NH7 Economy(L) Plane: 77W	San Francisco Intl - (SFO)	Depart	Wednesda y 03/05/23 12:20
	Tokyo Narita - (NRT)	Arrive	Thursday 04/05/23 15:25 (+1 day)
		Duration	11 hr 5 min
All Nippon Airways NH801 operated by Air Japan Economy(L) Plane: 789	Tokyo Narita - (NRT)	Depart	Thursday 04/05/23 18:15
	Singapore Changi - (SIN)	Arrive	Friday 05/05/23 00:35 (+1 day)
		Duration	7 hr 20 min

