SJ0G235D000V / JP Knights Pte Ltd ENTRY DATE & TIME: 15/05/2023 16:07 (SGT) SUBMITTED BY: Weine Chiang VERSION: 1 (15/05/2023 16:07 (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 <u>completed by the Policyholder and/or the Actual Driver</u>
 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

- A. 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 Accident Exact Location of Accident Additional Location Information	Both Policyholder and Actual Driver 12/05/2023 05:20 (SGT) Jansen Rd, Singapore
Country/State of Loss	

Additional Location Information	Jansen Rd, Singapore
Country/State of Loss	Singapore
DETAILS OF	OWN VEHICLE
Vehicle Registration Number	ŞKF28J
INSURED/POLICYHOLDER	
is company? Name Of Registered Owner NRIC No Email Address Mobile Phone No Alternative Phone No	No TAN PANG HWEE SXXXX887J INTEXCO@SINGNET.COM.SG (Phone) +65-97978987
VEHICLE PARTICULARS	
Manufacturer Model 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	BMW 520i - Private use No - Claiming third party Private car Auto 1998
INSURANCE COMPANY	
Name of Insurance Company Policy Number / Cover Note Number	ERGO Insurance Pte. Ltd. DMPG22015869
DRIVER	
Name of Driver NRIC No Date Of Birth	TAN PANG HWEE SXXXX887J 30/03/1954

Indoor

Occupation

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address 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 Insurance Company of Other Vehicle Owned by Driver	02/07/1980 42 YEARS AND 10 MONTHS Male (Phone) +65-97978987 - INTEXCO@SINGNET.COM.SG 31 EE TEOW LENG ROAD - 549641 Yes - No
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?	No 2 No
Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver)	Yes
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Translator's name	No .
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? Was notice of intended Prosecution given? If yes, against whom?	No No -
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO POLICE REPORT F/20230512/0071	
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

Name of Driver

Contact Number

SBR99Y

Audi

Audi

Private car

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	UNKNOWN
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	_
Vehicle Colour	_
Vehicle Category	NA / Unknown
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

- 1. Please correctly report the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyheider anti/or the Authorized Driver.
- Information provided must be as truttiful and accurate as possible. Any willful 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. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurence Association of Singapore (GIA) for prohibing and that copies of this report will for a fee be made available upon application by interested parties.
- 7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the center and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

tunderstand, 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 presessed 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 :
- (ii) processing, handling and/or dealing with my claims including the selflement of the claims and any necessary investigations relating to the claims.
- (i) investigating the accident and/or my claims.
- (iii) carrying out and/or dealing with mylinstructions or responding to any enquiries by me.
- (iv) administering my claims (including the mailing of correspondence, statements, invokes, 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' tawyers/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 on be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law fags), which may be sited outside of Singapore, for one or more of the above Purposes.

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

120523 1530HRS

Witnessed by Reporting Centre Personnel

EBU NTRING

Policyholder's Signature / Date & Time

Sketch Plan

JANSEN ROAD

& Tane

A -SKF28J

B-SBR99Y

C- PARKED VEHICLE

Describe Circumstances of the	Accident	
PLEASE REFER TO I	POLICE REPORT F/20230512/0071	
Declaration		
We declare the foregoing particular	s are true in every respect.	
	5 forms	FLASH ACCIDENT ASPORTED CATACON FRO HANGES
Policyholder's Signature / Date & Time	Driver's Signature (if driver is not the poscyholder) / Date & Time 120523 1530HRS	Witnessed by Reporting Centre Personnel





1 of 3

Report No. T/20230515/7059

Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/05/2023 16:34	Vide Report No.: F/20230512/0071	Station Diary No.:
Informant's Particulars		
Name of Informant: TAN PANG HWEE	Address: 31 EE TEOW LENG ROAD SINGAP	ORE 549641
ID Type / ID No.: NRIC NO / S0019887J	Contact No.: Home/Office: Mobi	le: 98344999
Nationality: SINGAPORE CITIZEN	Email: INTEXCO@SINGNET.COM.SG	
Sex: Age: Date of Birth: Male 69 30/03/1954	Type of Informant: Vehicle Owner	
Race: Chinese	Language: English	
Occupation: Company director	Driving Licence Information: Class: Date	of Expiry:

general illionnati	on of the Accident					
Type of Accident:	Non-Injury Attended by Police		Drink Drive: No	Date/Time of Accident: 12/05/2023 05:25		Type of Location: Straight Road
Location:	•					
JANSEN ROAD						
Weather:		Road S	Surface:			
Clear		Dry				
Traffic Flow:		Traffic	Control:		Traff	ic Volume:
Two Way		Not Co	ntrolled		No T	raffic
Type of Collision: Moving Vehicle A	gainst - Parked Vehic	le				one conveyed by ulance:

Details of Vo	shicle involved	i				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SKF28J	Car	BMW	520i	Grey	Seriously Damaged	0

Details of Ve	hicle insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKF28J	SHC INSURANCE PTE. LTD.	DMPG22015869	28/12/2022	27/12/2023





Report No. T/20230515/7059

2 of 3

Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

CONTINUATION OF REPORT

Any Pedestrian I	nvolved: No					
No. of Pedestriar	s Injured: NIL		Use of Pec	lestrian	Cross	ing: NA
Vehicle Owner						
Name	TAN PANG HWEE			ID No.		S0019887J
Related Vehicle	NIL			Conta	ct No.	98344999
Hospital/Clinic	NIL.		Class Driving Licence Expiry	g æ&	Class: NIL Date of Expiry: NIL	
Date	NIL		Date		NIL	

Brief Details.

On 12th May 2023 at 11.50am, Heft my house to retrieve my vehicle (SKF 28 J) for work which was parked outside along Jansen Road.

Upon arrival, I realized that the side of my vehicle was damaged from the rear right passenger's door to the driver's door and further on to the right side of the front bumper.

After which, I immediately called my insurance agent to seek advice in which she advised me to not move the vehicle and to call the traffic police straightaway.

However, I knew that my in-car camera was faulty at the point of time thus, I immediately proceeded to my neighbour's house to seek assistance as I remembered that he has installed a CCTV outside his house which was facing the road in which my vehicle was parked.

Both my neighbour and I went through his CCTV footage of the night before and found out that on the night of 12th May at 05.24am, my vehicle was hit by another vehicle.

However, neither a note nor contact number was left after the accident.

I immediately, made a call to traffic police hotline at 12.37pm to report this incident and following on, a traffic policeman arrived on motorbike around 12.55pm.

I filled him in on the details while showing him the video footage as well.

Shortly after upon seeing the arrival of the traffic policeman, one of my neighbour came over to us to admit to hitting my vehicle on the night before.

While admitting to this, his vehicle was being towed. His vehicle number is SBR 99 Y.

The traffic policeman took down both the drivers particulars and also both vehicles photos.

I asked for the Accident Report but was given the Case No. F/20230512/0071 written on a white piece of paper.

Yours Sincerely Tan Pang Hwee IC No. S0019887 J Hp: 9834 4999



T/20230515/7059

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865

Report No. T/20230515/7059

3 of 3

Tel No: 65470000

NP168

CONTINUATION OF REPORT

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: 15/05/2023 16:34
Officer In Charge Of Case: TP / TPIB / MOHAMED SUFIAN BIN MOHAMED JUNID Contact No.: 65476247	Classification Of Case:





1 of 3

Report No. T/20230516/7045

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

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/05/2023 14:54			Vide Report No.: F/20230512/0071	Station Diary No.:	
Informant'	s Particul	ars			
Name of In	formant:		Address:		
TAN PANG	HWEE		31 EE TEOW LENG ROAD	SINGAPORE 549641	
ID Type / II	D No.:		Contact No.:		
NRIC NO /	S0019887	7J	Home/Office:	Mobile: 98344999	
Nationality			Email:		
SINGAPOR	RE CITIZE	N	INTEXCO@SINGNET.COM	.SG	
Sex:	Age:	Date of Birth:	Type of Informant:		
Male	69	30/03/1954	Vehicle Owner		
Race:			Language:		
Chinese			English		
Occupation:			Driving Licence Information:		
Company director			Class:	Date of Expiry:	

Seneral Informa	ition of the Accident			
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 12/05/2023 05:25	Type of Location Straight Road
Location:	!.	INO	12/03/2023 03.23	
EE TEOW LEN	G ROAD			
Weather:		Road Surface:		
Clear		Dry		
Traffic Flow:		Traffic Control:		Traffic Volume:
Two Way		Not Controlled		No Traffic
Type of Collision Moving Vehicle	n: Against - Parked Vehic	de		Anyone conveyed by ambulance:

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SKF28J	Car	BMW	520i	Grey	Seriously	0
					Damaged	

Details of Ve	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKF28J	SHC INSURANCE PTE. LTD.	DMPG22015869	28/12/2022	27/12/2023
	<u> </u>			





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Report No. T/20230516/7045

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

CONTINUATION OF REPORT

Details of Perso	n Involved					
Any Pedestrian II	nvolved: No					
No. of Pedestrian	ns Injured: NIL		Use of Pedestrian Crossing: NA			
Vehicle Owner						
Name	TAN PANG HWEE			ID No.	•	S0019887J
Related Vehicle	NIL			Conta	ct No.	98344999
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.

To Add On:

Referring to my Vide Report No. T/20230515/7059

Due to the strong impact of the accident, my car (SKF28J) has been pushed to the side thus, knocking against the road kerb.

Therefore, there are also damages to the left side of my car.





2000 1017 040

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Report No. T/20230516/7045

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

CONTINUATION OF REPORT

Signature Of Interpreter: Not applicable Date/Time: 16/05/2023 14:54 Officer In Charge Of Case: TP / TPIB / MOHAMED SUFIAN BIN MOHAMED JUNID Contact No : 65476247	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.
TP / TPIB / MOHAMED SUFIAN BIN MOHAMED JUNID		
Community (10.1004)	TP / TPIB /	Classification Of Case: