

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

 Please report <u>correctly</u> the details of the accident to speed up the claims process.
 This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>
 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.

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 Reported by Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss

05/05/2023 12:15 (SGT) **Actual Driver** 03/05/2023 11:15 (SGT) E Coast Rd, Singapore

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLX3138Z

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No Email Address Mobile Phone No Alternative Phone No

No LEE MENG LING S8287471B GERALDLAU.WINE@GMAIL.COM (Phone) +65-89237974

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

Private use

Toyota

Wish

No - Claiming third party Private car Auto 1800

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number Etiqa Insurance Pte Ltd M0035830

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

LAU HWANG SENG GERALD S8321049D 13/07/1983 Indoor



Date Of Driving Pass Driving experience

Gender Mehile No

Mobile Number Alt. Phone Number

Email 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

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions Road Surface

Side Swipe Clear Dry

No

No

Yes

0

No

2

18/02/2011

Male

470142

Spouse

No

No

12 YEARS AND 3 MONTHS

GERALDLAU.WINE@GMAIL.COM

BLK 142 BEDOK RESERVOIR ROAD #03-1551

(Phone) +65-89237974

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

Yes

Traffic Police

(Phone) +65-65470000 (Fax) +65-65474900

10 Ubi Avenue 3 Singapore 408865

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?

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT: T/20230504/7012

ATTACHMENT(S)

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

Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant

SLU8889Y

-

Accident report SS2X23550005

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SKETCH PLAN

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- 7. By the ladgement 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)

lunderstand, 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' law yers/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:
- (i) investigating the accident and/or my claims;
- (ii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (w) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve \cdot , 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 tow 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 callect, 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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Driver's Egnature (If driver is not the policyholder) / Date Witnessed by Reporting C & Time Personnel Sketch Plan

Roles Police Report No.	
 7/20230504/7012	
1 002 0000 1 1012	
	No.





1 of 3 Report No. T/20230504/7012

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

	ne Report 023 10:46	Made:	Vide Report No.:		Station Diary No.
Informa	nt's Partic	ulars			
Name of Informant: LAU HWANG SENG, GERALD			Address: 142 BEDOK RESERVOIR ROAD #03-1551 SINGAPORE 470142		
ID Type / ID No.; NRIC NO / S8321049D			Contact No.: Home/Office:	Mobile: 8	39237974
Nationality: SINGAPORE CITIZEN		EN	Email: GERALDLAU.WINE@GMAIL.COM		
Sex: Age: Date of Birth: Male 39 13/07/1983			Type of Informant: Vehicle Owner		
Race: Chinese			Language: English		
Occupation: Company director			Driving Licence Informati Class:	on: Date of E	xpiry:

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 03/05/2023 11:15	Type of Location Straight Road
Location: EAST COAST	ROAD			
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way Type of Collision		Traffic Control: Not Controlled		Traffic Volume:

No of Passenger
. i asserige

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	
Janob, ME	Use of Pedestrian Crossing: NA







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

2 of 3 Report No. T/20230504/7012

CONTINUATION OF REPORT

Vehicle Owner				
Name	LAU HWANG SENG, GE	RALD	ID No.	S8321049D
Related Vehicle	NIL		Contact No	. 89237974
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL	
Vo. of Days grant	ed Medical Leave NII	L Degree of	of NIL	

Brief Details

I was parking along EAST COAST ROAD at 8.30am, on 3 May 2023, at 1.40pm when I came back to get my car i realize my right side mirror have been damaged.

i start to trace back my CARCAM and realize it was a hit and run by a car plate number SLU8889Y, MERCEDES GLC at 11.15am base on the car cam recording time



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



3 of 3 Report No. T/20230504/7012

CONTINUATION OF REPORT

Signature Of Informant: The identity of the person making this report habeen authenticated by Singpass. No signature i required.		
Date/Time: 04/05/2023 10:46		
Classification Of Case:		