SN09235M0006 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 22/05/2023 16:59 (SGT) SUBMITTED BY: Chew Hsiao Tong VERSION: 1 (22/05/2023 16:59 (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.

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   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 22/05/2023 16:59 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 18/05/2023 18:00 (SGT) Exact Location of Accident Stadium PI, Singapore Additional Location Information **CARPARK** Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SMU4A

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner FOK KAH HON(HUO JIAHAN) NRIC No SXXXX592D Fmail Address jiahan83@hotmail.com Mobile Phone No (Phone) +65-85698888 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model S400I 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

Mercedes

No - Claiming third party Private car

Auto 2996

**INSURANCE COMPANY** 

Name of Insurance Company Sompo Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number D23MTPV1003021

DRIVER

Name of Driver FOK KAH HON(HUO JIAHAN) NRIC No SXXXX592D Date Of Birth 26/12/1983 Occupation Indoor

Date Of Driving Pass 23/04/2004 Driving experience 19 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-85698888 Alt. Phone Number Email Address jiahan83@hotmail.com Address 29A HILLVIEW AVENUE #07-07 Address complement Postcode 669562 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 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) 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? If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO POLICE REPORT T/20230522/7041 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 **SNF5874P** 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)	-

# WITNESS DETAILS

WITNESS 1

Name HUI XIN

Phone -

Email huixin\_lin@hotmail.com

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2 This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 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.
- 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 Police for investigation.
- 6. The 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.
- 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 (all insurers), the honetery 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/trail 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 law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholden's Signature / Date & Driver's Signature (If driver is not the policyholden) / Date Wiffnessed by Reporting Centre Personnel

Sketch Plan

Hadram Mace

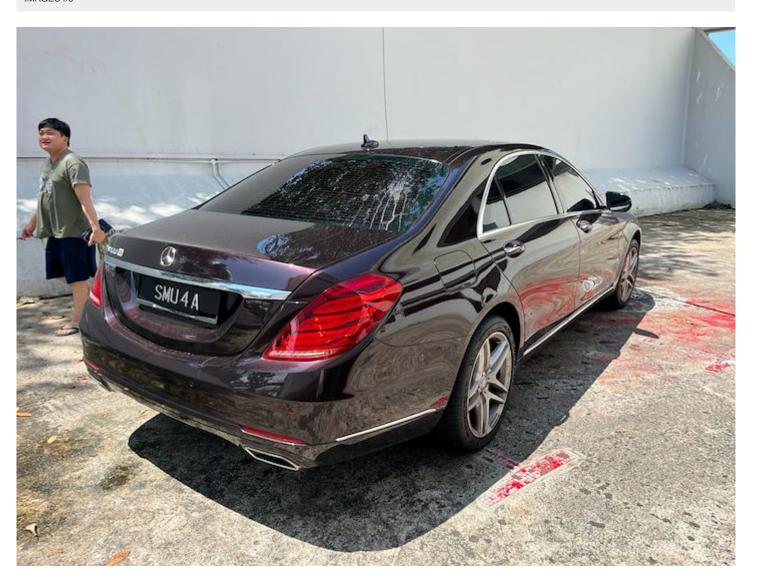
(B) SNE 59741

Accident report SN09235M0006

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

c Police Report No. T/20230522/7041

Tel No: 65470000

# REPORT OF A TRAFFIC ACCIDENT

22/05/2023 13:35		ладе:	Vide Report No.:	Station Diary No.:
Informa	nt's Partic	ulars	STEWNS	
Name of Informant: FOK KAH HON		3000000	Address: 29A HILLVIEW AVENUE #07-07 S	INGAPORE 669562
ID Type / ID No.: NRIC NO / S8341592D		92D	Contact No.: Home/Office: Mo	bile: 85698888
National SINGAP	ity: ORE CITIZ	EN .	Email: JIAHAN83@HOTMAIL.COM	
Sex: Male	Age: 39	Date of Birth: 26/12/1983	Type of Informant: Driver	
Race: Chinese		.01-	Language: English	
Occupation: Company director			Driving Licence Information: Class: Date	te of Expiry:

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 18/05/2023 18:00	Type of Location Car Park
Location: STADIUM PL	ACE			
Weather:		Road Surface: Dry		
Clear				
Clear Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light

Details of Vehicle Involved					SELECTION TO SELECT	
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SMU4A	Car	MERCEDES BENZ	S400L (R19 LED)	Black		0
SNF5874P	Car					0.

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMU4A	TENET SOMPO INSURANCE PTE. LTD.	D23MTPV0100302	16/03/2023	15/03/2024



T/20230522/7041

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

2 of 3 Report No. T/20230522/7041

# CONTINUATION OF REPORT

Details of Perso	n Involved	All Prints			
Any Pedestrian I	nvolved: No				
No. of Pedestriar	ns Injured: NIL		Use of Pe	edestrian C	rossing: NA
Driver		ARTES OF			
Name	FOK KAH HON		ID No.	S8341592D	
Related Vehicle	SMU4A (Car)		Contact	No. 85698888	
Hospital/Clinic	NIL			Class of Driving Licence Expiry	Class: NIL Date of Expiry: NIL &
Date	NIL		Date	N	IL
No. of Days gran	ted Medical Leave	NIL	Degree o		The same of the sa

#### Brief Details.

On 18 May 2023, I parked my car SMU 4A at Kallang Wave Mall carpark at around 430pm. Upon returning back to the car, I saw a note on the front windscreen from a lady, Hui Xin, who's an eye-witness to the hit and run accident. She asked me to contact her if I wanted the camera footage of the accident. She sent the footage to me on 19 May 2023 at 412pm via email. I have video and a photo of the incident. My car's front bumper was knocked and scratched. The car that knocked into me has the car plate number SNF 5874P. It is a silver BMW. Thank you



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



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Report No. T/20230522/7041

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: 22/05/2023 13:35
Officer In Charge Of Case: TP / TPIB / IRMAN BIN MOHAMAD SAID Contact No.: 65476145	Classification Of Case:

