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.

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 22/06/2023 11:33 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 21/06/2023 16:00 (SGT) Exact Location of Accident Tampines Ave 4, Singapore Additional Location Information TAMPINES AVENUE 4 SINGAPORE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **SLQ3650Y**

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner CHEN LI FEN (ZENG LIFEN) NRIC No SXXXX611J Email Address LIFEN86@HOTMAIL.COM Mobile Phone No (Phone) +65-98335694 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Honda Model Variant HONDA / JAZZ 1.5 VTIR CVT ABS D/AIRBAG 2WD 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

No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto CC 1498

INSURANCE COMPANY

Name of Insurance Company FWD Singapore Pte. Ltd. Policy Number / Cover Note Number PNPV2022-00001949

DRIVER

Name of Driver CHEN LI FEN (ZENG LIFEN) NRIC No SXXXX611J Date Of Birth 09/04/1986 Occupation Indoor

Date Of Driving Pass Driving experience	21/11/2008 14 YEARS AND 7 MONTHS
Gender Mobile Number	Female (Phone) +65-98335694
Alt. Phone Number	-
Email Address	LIFEN86@HOTMAIL.COM
Address	APT BLK 32 MARINE CRESCENT #5-129
Address complement Postcode	- 440032
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	NO
Tomore Hogiculation Hamber of Guiler Verlier Guiller By Enver	<u>-</u>
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	No
Translator's ID	-
Translator's phone number	-
Translator's email	
Original language used in the statement	
Original language asca in the statement	-
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	Yes
Police Station Name	Tampines Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18005871999
Alt. Police Station Phone No	(Fax) +65-65871699
Police Station Address	6 Tampines Ave 4 Singapore 529682
Was notice of intended Prosecution given?	No
If yes, against whom?	- ⁻
CIRCUMSTANCES OF ACCIDENT	
REFER TO ATTACHED STATEMENT RECORDED BY ANNIE - PROGRESSIVE CAR CAI TEL 67415336	RE PTE LTD
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
DETAILS OF OTHER	VEHICLE PROPERTY 1

GBH1397H

Vehicle Registration Number
Vehicle Manufacturer

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	Lonpac Insurance Bhd
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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ation dare the foregoing particulars a sh to claim against your own p made within the stipulated tim	olicy, please be	advised that your insurer	may have a fourt	teen (14) days clause whereby insurer for more details.	the claim
2£.				(I
der's Signature / Date & Time	Driver's Signatur & Time	re (if driver is not the policyho	lder) / Date	Witnessed by Reporting Centre I (Name as in NRIC/ID card)	Personnel
				- 1-4000 0 5-1800 100 000 000 500 000 000 000 000 000 0	2

SKETCH PLAN

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.
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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.

5. 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")

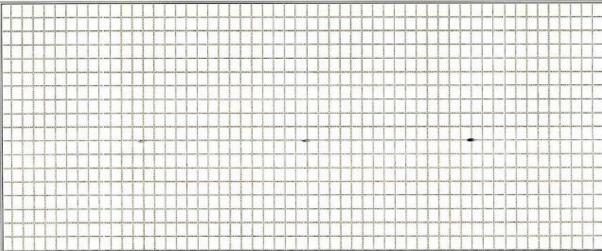
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the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

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

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

Sketch Plan



1

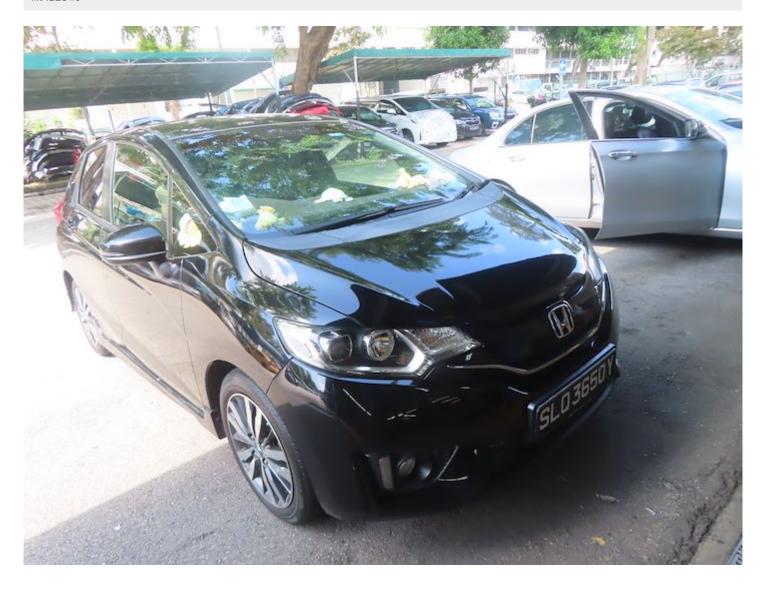


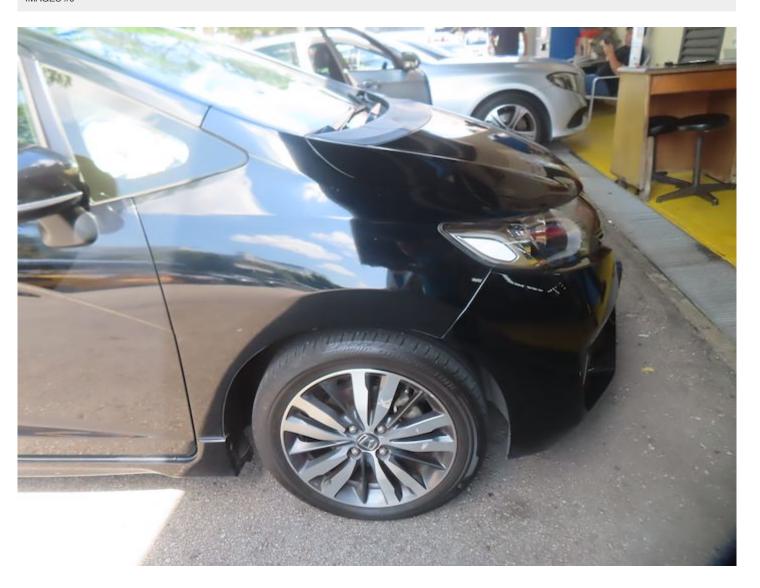








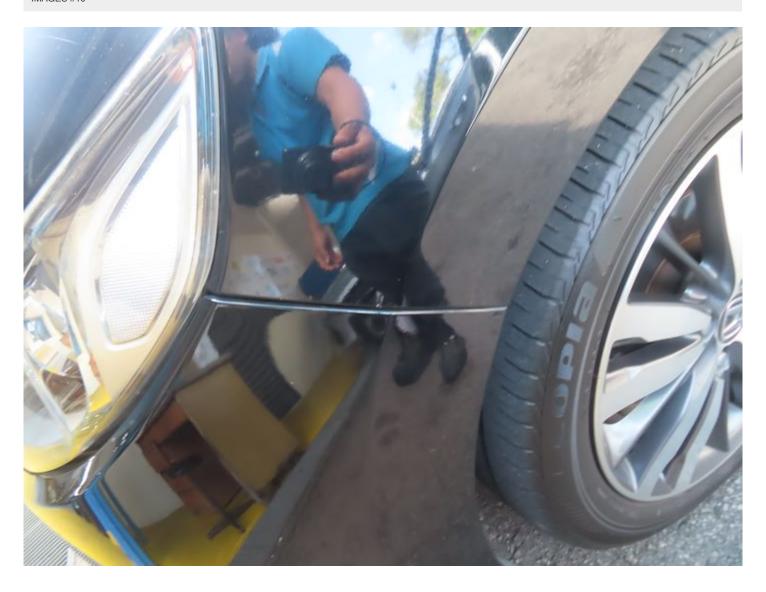


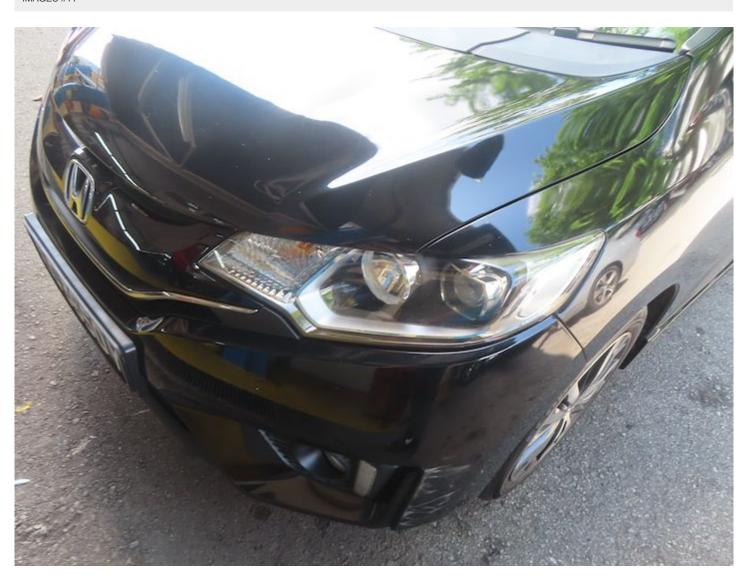




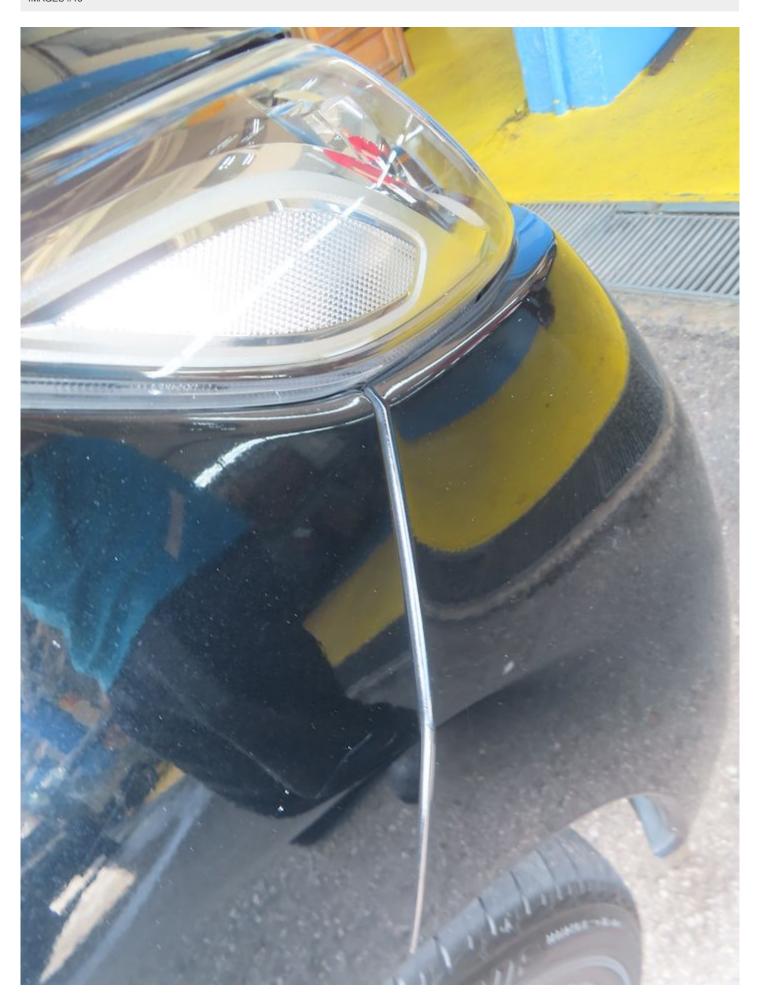




















Police Station Of Origin:

Tampines N.P.C

6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

1 of 3 Report No. T/20230621/2101

REPORT OF	A TRAFFIC	ACCIDENT		Station Diary No.	
Date/Time Report Made: 21/06/2023 18:21			Vide Report No.:	64	
Informant	's Particu	ilars			
and the second second	nformant:		Address: APT BLK 32 MARINE CRESC 440032	ENT #05-129 SINGAPORE	
ID Type / ID No.: NRIC NO / S8609611J		11J	Contact No.: Home/Office: Mobile: 98335694		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Age: Date of Birth: Female 37 09/04/1986		Date of Birth:	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: Chemical engineer			Driving Licence Information: Class: 3	Date of Expiry:	

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 21/06/2023 16:00	Type of Location Car Park
Location: TAMPINES A	AVENUE 4	Road Surface:		
Weather: Clear		Dry	-	n =
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: Light
Two Way Type of Colli	sion: cle Against - Parked V			Anyone conveyed by ambulance: No

Contract to the second second	ehicle Invo	Torrespond to the Control of the Con	144 141	Color	Condition	No of Passenge
Vehicle No.	Type	Make	Model	COIDI	The second section is a second section of the section of the second section of the section o	^
GBH1397H	Andrew Control				Slightly	0
GBH139711	Vail				Damaged	
SLQ3650Y	Car	HONDA	JAZZ 1.5 VTIR CVT	Black	Slightly Damaged	0
			ABS D/AIRBAG 2WD			





Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999 CONTINUATION OF REPORT

2 of 3 Report No. T/20230621/2101

Details of V	ehicle Insurance			A CONTRACTOR OF
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLQ3650Y	FWD Singapore Pte. Ltd	PNPV2022- 00001949	06/07/2022	05/07/2023

Details of Perso	n Involved					
Any Pedestrian I	nvolved: No					
No. of Pedestrian	ns Injured: NIL		Use of Ped	destriar	Cross	ing: NA
Driver		A STATE OF THE PARTY OF THE PAR				
Name	CHEN LIFEN	CHEN LIFEN		ID No		S8609611J
Related Vehicle	NIL			Conta	ct No.	98335694
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g ce &	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Disci	narge	NIL	
No. of Days granted Medical Leave NIL			Degree of Injury NIL			

Brief Details

On 21/06/2023 at about 3.50pm, I parked my vehicle, SLQ3650Y at the open carpark lot of Blk 801 Tampines Avenue 4. (I cannot recall the carpark lot number). I secured my car and went about my own errands. At about 4.20pm, I returned back to my car and I discovered some scratch marks on my front left bumper. I reviewed my in-car CCTV camera and I spotted the van GBH1397H moving out from his carpark lot and hitting my vehicle. The driver did not leave any details to inform me of this accident and he drove off. No one was injured during this incident.





Police Station Of Origin: Tampines N.P.C 6 Tampines Avenue 4 SINGAPORE 529682 Tel No: 1800-5871999

3 of 3 Report No. T/20230621/2101

CONTINUATION OF REPORT

Signature of Officer Recording The Report: G / SI AZFARULLAH BIN ABDUL AZIZ	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 21/06/2023 18:21
Officer In Charge Of Case: TP / HRT / STAFF SGT SUFIYAN BIN KHAIRI	Classification Of Case:
Contact No.: 65476148 NP168	