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 First Submission 25/07/2023 13:00 (SGT) Reported by **Actual Driver** Date of Accident 24/07/2023 11:10 (SGT) Exact Location of Accident 53 Ubi Ave 1, Singapore 408934 Additional Location Information 53 UBI AVE 1 #03-01 PAYA UBI INDUSTRIAL PARK Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **GBA5613U**

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner **CARWAY LEASING & RENTAL** Company Reg No 53264813K Email Address ANGEL@CARWAY.COM.SG Mobile Phone No (Phone) +65-67440777 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Renault Model Kangoo Variant

Exact purpose for which vehicle was being used at time of accident **Employment** Are you claiming under your own insurance policy for repair to

No - Claiming third party your vehicle? Vehicle Category Private car Transmission Manual CC 1461

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited Policy Number / Cover Note Number 5110754003-04-000003

DRIVER

Name of Driver LIM HOCK SENG NRIC No S0230527E Date Of Birth 15/03/1953 Occupation Outdoor

Date Of Driving Pass 19/01/1972 Driving experience 51 YEARS AND 6 MONTHS Gender Mobile Number (Phone) +65-83831777 Alt. Phone Number Email Address ANGEL@CARWAY.COM.SG Address BLK 118 CORPORATION DRIVE #08-444 Address complement Postcode 610118 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured **Employee** 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 Collided into Parked Vehicle 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 THE SKECTH PLAN ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number

XE5893X

Official Accident report SD0B237P0001

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)	-

escribe Circumstance of the Accident	
On 24TH Jul 2023 at about 1508 Hrs, My vehicle (GBA5613U) was stationary parked at lev	/el
of Block 53 Paya Ubi Industrial Park. A trailer (XE5893X) hit onto the front right side of m	у
rehicle. I did try to stop him but the driver did not response. I want to state that the said	
accident was captured by building CCTV.	
am making a claim against third party.	
	_
	_
	_

Declaration

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

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

A

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

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SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> 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.
- 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.
- 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:

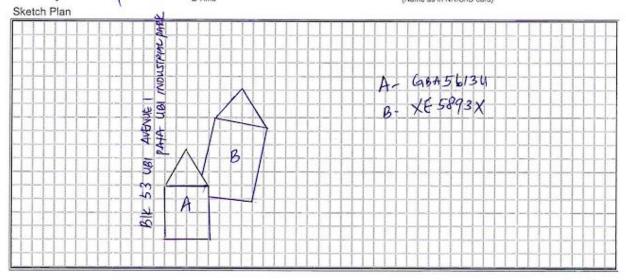
(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

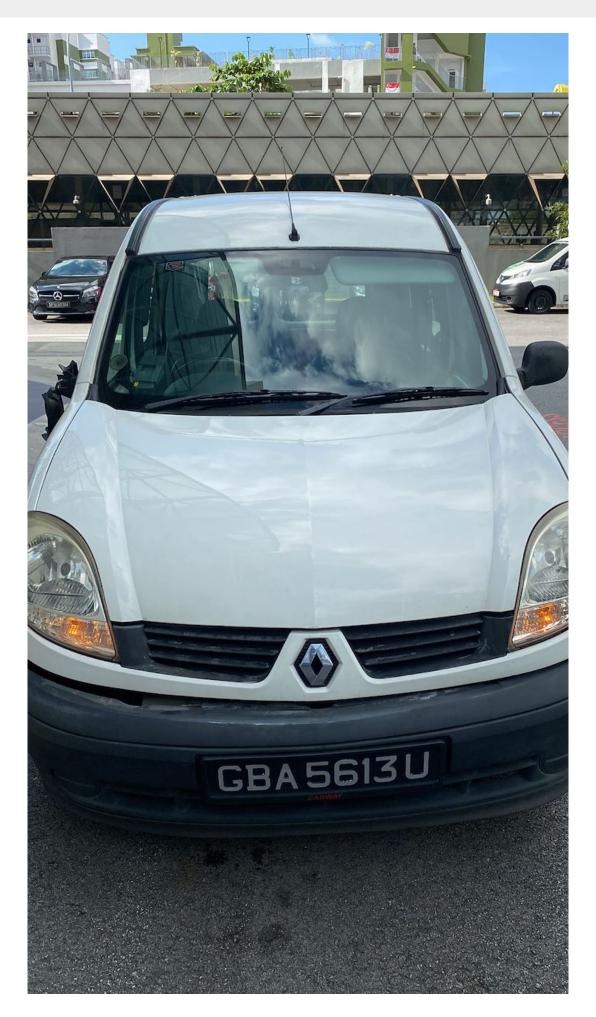
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (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 and providers), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Data & Time

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

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















Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

T/20230724/7079	ili ili

1 of 3

Report No. T/20230724/7079

REPORT	F A TRAFFIC	CACCIDENT				
Date/Time Report Made: 24/07/2023 17:05			Vide Report No.: Station Diary			
Informa	nt's Partic	ulars	AND DESCRIPTION OF THE PARTY OF			
7.7	Informant: CK SENG		Address: 118 CORPORATION	DRIVE #08-444 SINGAPORE 610118		
ID Type / ID No.: NRIC NO / S0230527E			Contact No.: Home/Office:	Mobile: 93558515		
Nationality: SINGAPORE CITIZEN		Email: angel@carway.com.sg				
Sex: Age: Date of Birth: Male 70 15/03/1953			Type of Informant: Driver			
Race: Chinese		Language: English				
Occupation: Operational employee		Driving Licence Information: Class: Date of Expiry:				

General Infor	mation of the Accide	nt		
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 24/07/2023 15:05	Type of Location: Car Park
Location:	*			
UBI AVENUE	:1			
Weather:		Road Surface:		
Clear		Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume:
Type of Collis	sion: sle Against - Parked Vo	ehicle		Anyone conveyed by ambulance: No

Vehicle No.	Type	Make	Model	Color	Conditio	No of
GBA5613U	Van					0
XE5893X	Lorry					0

Details of Person Involved		
Any Pedestrian Involved: No		
No. of Pedestrians Injured: NIL	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/20230724/7079

CONTINUATION OF REPORT

Driver			THE SHAPPING		
Name	LIM HOCK SENG		ID No.	S0230527E	
Related Vehicle	GBA5613U (Van)			Contact N	lo. 93558515
Hospital/Clinic	NIL			Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	19000 000000	Date	NI	L
No. of Days gran	ted Medical Leave	NIL	Degree of	NII	

Brief Details.

On 24TH July 2023 at about 1508 Hrs, My vehicle (GBA5613U) was stationary parked at level 3 of Block 53 Paya Ubi Industrial Park. A trailer (XE5893X) hit onto the front right side of my vehicle. I did try to stop him but the driver did not response. I want to state that the said accident was captured by building CCTV.