

# 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 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. 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	24/06/2024 11:34 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	22/06/2024 17:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ALONG BKE
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGT1298M
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### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LYNDA LEE PUAY HOON
NRIC No	SXXXX457D
Email Address	POCAJAYDAS@GMAIL.COM
Mobile Phone No	(Phone) +65-97975614
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Qashqai
Variant	-
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 your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1200

### INSURANCE COMPANY

Name of Insurance Company	Auto & General Insurance (Singapore) Pte. Limited.
Policy Number / Cover Note Number	P11015974R00

### DRIVER

Name of Driver	NG WEI KENG
NRIC No	SXXXX814D
Date Of Birth	04/06/1978
Occupation	Indoor

Driving Pass Date	10/11/2005
Driving experience	18 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96963063
Alt. Phone Number	-
Email Address	KENGSTAR78@HOTMAIL.COM
Address	BLK 106 BISHAN STREET 12 #09-218
Address complement	-
Postcode	570106
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	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)	4
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	-

PASSENGER 1

Name	LYNDA LEE PUAY HOON
Gender	Female

PASSENGER 2

Name	JAYDA NG
Gender	Female

PASSENGER 3

Name	JAYVIER NG
Gender	Male

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?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO THE SKETCH PLAN AND POLICE REPORT

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	FBK7875P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
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)	-

Budget Direct  
Vehicle: SCOT 1298B  
24/06/2024

SKETCH PLAN

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3. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

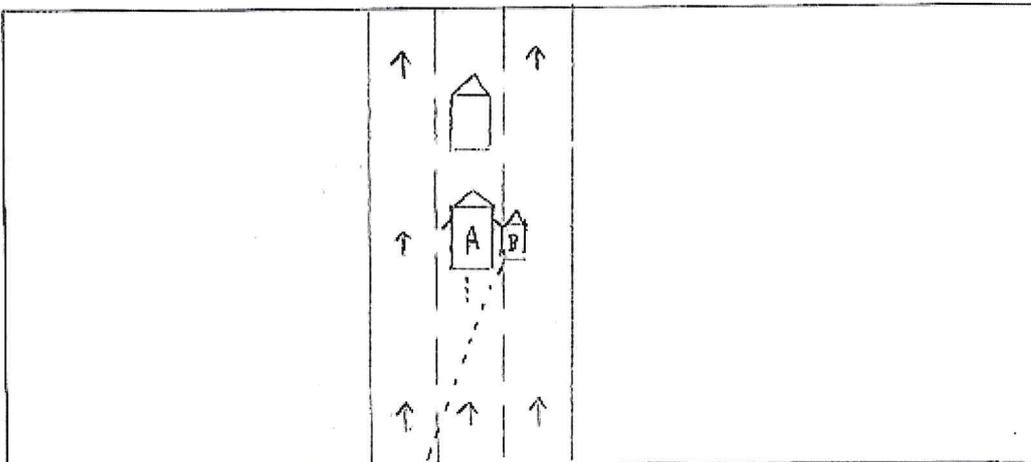
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

*Wong* 24/06/2024  
Policyholder's Signature / Date & Time

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

*[Signature]* 24/06/2024  
Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Sketch Plan



Describe Circumstance of the Accident:

Date of Accident: 22/06/2024 Time: 17:30 Hrs Location: along BKE

My Vehicle A: SGT 1288 m Vehicle B: FBK 7875 K Vehicle C:

Refer to police report

Claim OD/TP at Ah Lim Motor  Claim OD/TP at other workshop  Reporting Only

Remarks: Please forward a copy of my ofile accident Report to:

My Workshop:

Workshop Email Address:

Note: Please take note that your insurer have a 14 days timeframe for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information

Declaration

(We declare the foregoing particulars are true in every respect)

My: 24/6/24 [Signature]

Policyholder's Signature / Date & Time

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

[Stamp] [Signature] 24/06/2024

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



# Find insurer

Vehicle reg. no.

FBK7875P

Date of Accident

22/06/2024 

Reset

## TP Insurer Enquiry

Insurance ..... **Auto & General Insurance (Sin...**

Period of Insurance ..... **25/01/2024 - 24/01/2025**

Requested By ..... **ANG SIOK CHIN, YVONNE (JOO...**

Requested Date ..... **24/06/2024 15:51**

### Payment details

Request Amount: **S\$2**

GST Amount: **S\$0.18**

Total Amount Due (GST Inclusive): **S\$2.18**

### General Insurance Association

Records Management Centre

GST Registration No: **M400017735**

