

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	02/11/2024 11:20 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	31/10/2024 08:50 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	UPPER THOMSON ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJD1178A
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHONG YEOW HWEE
NRIC No	S7715920G
Email Address	PHYSCHONG@GMAIL.COM
Mobile Phone No	(Phone) +65-91472072
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Harrier
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?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1998
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Direct Asia Insurance (Singapore) Pte Ltd
Policy Number / Cover Note Number	MT/01267324/01

DRIVER

Name of Driver	CHONG YEOW HWEE
NRIC No	S7715920G
Date Of Birth	15/06/1977
Occupation	Outdoor
Driving Pass Date	30/06/2004
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	20 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91472072
Alt. Phone Number	-
Email Address	PHYSCHONG@GMAIL.COM
Address	1 PECK HAY ROAD #07-03
Address complement	-
Postcode	228305
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	Yes
Vehicle Registration Number of Other Vehicle Owned by Driver	FQ157X
Insurance Company of Other Vehicle Owned by Driver	Direct Asia Insurance (Singapore) Pte Ltd

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	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	-
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE KINDLY REFER THE STATEMENT.

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	SKR68E
Vehicle Manufacturer	Toyota

Vehicle Model	Alphard
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	DAPHNE
Contact Number	(Phone) +65-98264149
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

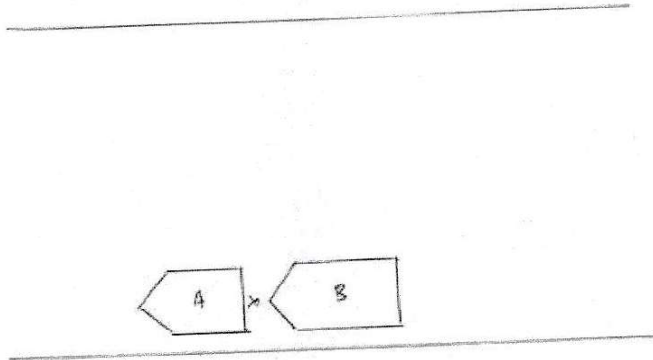
Accident Toolkit

Sketch plan

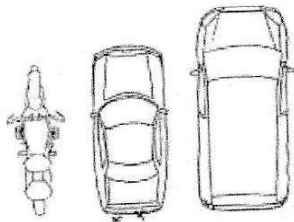
Sketch of accident scene:

Please illustrate the layout of roads with arrows showing the direction and position of vehicles at the time of impact. Also please note the road names, road signs and vehicle registration numbers.

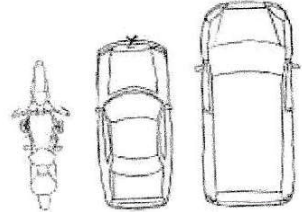
If safe, please take photos or videos from all angles.



Please indicate on vehicle A (your vehicle) and, vehicle B (third party vehicle), the point of impact and area(s) of visible damage with an arrow.



Vehicle A
SJA 11TBA

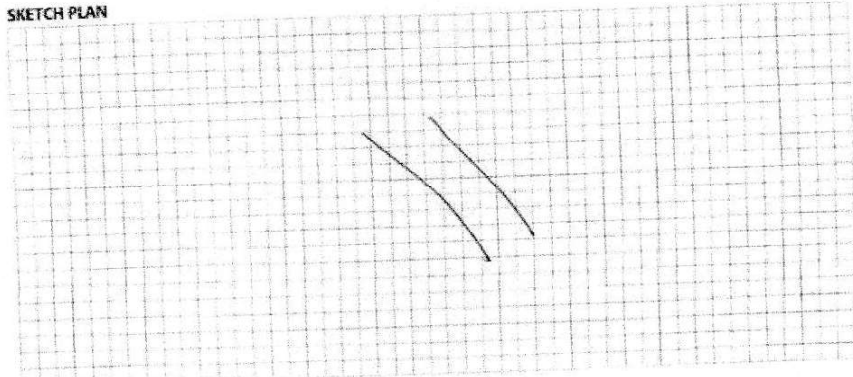


Vehicle B
SKR 68E

direct + *By*
asia ↓ 01/11/2024
insurance 1522

Call us direct
Customer Care
6665 5555
Claims Support 24/7 Hotline
6532 1818
+65 6532 1818 (from overseas)

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My car 85011780 was parked along the road.
It was stationary and while Sk R 6815 was
trying to park her car, her car ramped
directly into the center of my car.

DECLARATION

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

[Signature]
Policyholder's Signature
Date & Time: 04/12/2015 27

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.: