

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	27/12/2024 17:14 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	27/12/2024 12:07 (SGT)
Exact Location of Accident	Near 375 Commonwealth Ave W, Singapore 149735
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNQ8129E
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHEN JIN WEI
NRIC No	S8728311I
Email Address	JAYJW87@GMAIL.COM
Mobile Phone No	(Phone) +65-98230216
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
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	1496
Vehicle Fuel	-
First Registration Date	-
Chassis no	NRE1610021499
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Policy Number / Cover Note Number	D24MPC0004630

DRIVER

Name of Driver	CHEN JIN WEI
NRIC No	S8728311I
Date Of Birth	12/09/1987
Occupation	Indoor
Driving Pass Date	13/03/2008
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	16 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98230216
Alt. Phone Number	-
Email Address	JAYJW87@GMAIL.COM
Address	APT BLK 131 MARSILING RISE #04-194 S 730131
Address complement	-
Postcode	-
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	Collision - Head to Rear
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
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	UNKNOWN
Gender	Female

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

REFER TO SKETCH PLAN

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	GBM4598Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	REN CHUAN HUA
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	CHEN JIN WEI
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	-
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

SKETCH PLAN

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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)

I understand, acknowledge, agree and consent that:

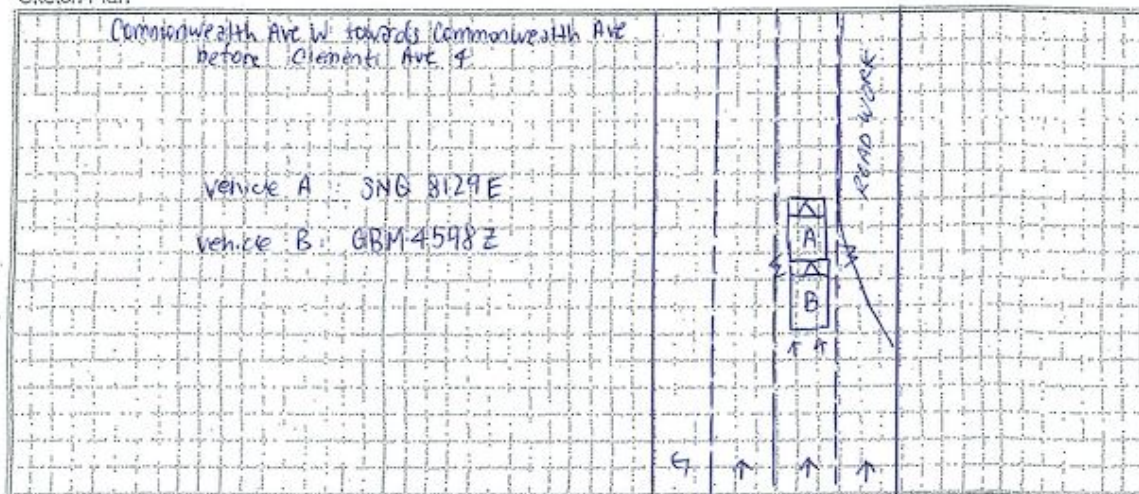
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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



Describe Circumstance of the Accident


As of above date & time, I was driving my vehicle
 (SNQ8129E) along Commonwealth Ave W towards Commonwealth Ave
 on the 2nd from the right lane of a 4 lane Road.
 Before Clementi Ave 4, I slowed down & stopped my vehicle
 due to traffic ahead when suddenly, vehicle B (GBM45982)
 collided onto the rear portion of my vehicle.


Video footage Attached.

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


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















































INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 1987037921; GST Reg. No. M2-0078806-X
 64 Cecil Street | #04 | #05 | #06-02 | 10th Building | Singapore 049711
 Office (65) 63176100 Email insure@iil.com.sg
 Fax (65) 62244174 Website www.iil.com.sg

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1980 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

CERTIFICATE NO.: D24MPC0004630		COVER: COMPREHENSIVE
1. Index Mark and Registration Number of Vehicle	: SNQ8129E	
Chassis No	: NRE1610021499	
2. Name of Policyholder	: CHEN JINWEI	
3. Effective date of Insurance	: 13 Jun 2024	
4. Expiry date of Insurance	: 12 Jun 2025	
5. Persons or Classes of Persons entitled to drive*		
Private Hire Usage : CHEN JINWEI Only		
For Social, Domestic & Leisure purposes only. Any other person who is driving on the Policyholder's order or with his/her permission. Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.		
6. Limitations as to use*		
Use for the carriage of passengers or goods in connection with the Policyholder's business. Use for social, domestic, pleasure purposes and business purposes of the policyholder. Geographical Area: Private Hire Use: within the Republic of Singapore only For Social, Domestic & Leisure purposes only: within the Republic of Singapore and West Malaysia		
The Policy does not cover		
a) Use for racing, pace-making, reliability trial, or speed-testing. b) Use for the carriage of goods other than samples in connection with any trade or business. c) Use for any purpose in connection with the Motor Trade.		
*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.		
Excess Section I : SGD 2,000.00 Excess Section II : SGD 1,500.00 Windscreen Excess: SGD 100.00		
AUTHORISED WORKSHOP PLAN: WARRANTED THAT ALL ACCIDENT REPAIRS INCLUDING WINDSCREEN REPAIR OR REPLACEMENT MUST BE CARRIED OUT AT INDIA INTERNATIONAL INSURANCE PTE LTD AUTHORISED WORKSHOPS ONLY. Geographical Area: Private Hire Use: within the Republic of Singapore only For Social, Domestic & Leisure purposes only: within the Republic of Singapore and West Malaysia		
Hire Purchase Company : United Overseas Bank Limited		
FOR DRIVERS BELOW 21 YEARS OR ABOVE 69 YEARS OF AGE &/OR LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, AN ADDITIONAL EXCESS OF S\$2500/- ON SECTION I & II (SEPARATELY) WILL BE APPLICABLE.		
I/We HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).		
Agent/Broker : B000396/ASSURE (SINGAPORE) PTE LTD Date of Issue : 12/06/2024 12:08:47		For India International Insurance Pte Ltd
		 Nalini Venugopal MD & CEO