
POKKA
DIRECT LINE:
6841 0055
EMAIL ADDRESS:
RSPU@LKKAUTO.COM

IDAC ACCIDENT STATEMENT

DATE OF ACCIDENT : 17/07/2024	TIME OF ACCIDENT : 10:30
VEHICLE NO : GMB2786	TRANSMISION : AUTO / MANUAL
MAKE & MODEL : KIA 2400 (2401)	LOCATION : BUKIT TIMAH ROAD
EXACT PURPOSE USE DURING ACCIDENT : EMPLOYMENT / PRIVATE USE / PRIVATE HIRE	CLAIM TYPE : OD / THIRD PARTY / REPORTING ONLY
INSURANCE COMPANY : CHINA TAIPING	POLICY NO :
TYPE OF COVERAGE : COMPREHENSIVE / THIRD PARTY / THIRD PARTY & THEFT	VEHICLE TYPE : (SALOON / COUPE/MPV/VAN/LORRY/MOTORCYCLE)
NAME OF OWNER : GOLDTREE FALCON	NRIC : 2007068 28W
ADDRESS : BLK 620 HOUGANG AVE 8 #11-280 (530620)	CONTACT NO :
EMAIL ADDRESS : ANDYNYAM@YAHOO.COM	VIDEO RECORDING : YES / NO
NAME OF DRIVER : AS ABOVE / IF NO : NYAM HOI SHONG	NRIC : S7388171C CONTACT NO : 90085795
DRIVER OWNER RELATIONSHIOP : EMPLOYER	PASSENGER : 0 MALE ( ) FEMALE ( )
DATE OF BIRTH : 05 / 07 / 1973	DRIVING PASSING DATE : 10 / 01 / 1995
OCCUPATION : INDOOR / OUTDOOR	ADDRESS :
ANY INJURIES : NO, IF YES :	POLICE REPORT : NO / IF YES WHERE ?
WEATHER CONDITION : CLEAR / RAINING / OTHERS	ROAD SURFACE : DRY / WET / OTHERS
VEHICLE B REG NO : SLH 3658Z DRIVER NAME : NRIC : CONTACT : 97553735	VEHICLE C REG NO : DRIVER NAME : NRIC : CONTACT :
VEHICLE D REG NO : DRIVER NAME : NRIC : CONTACT :	ANY WITNESS ? NO, IF YES : NAME : CONTACT :
WAS NOTICE OF PROSECUTION GIVEN? (YES / NO) IF YES, AGAINST WHOM :	WERE SEAT BELTS WORN ? : YES / NO WERE INJURY CONVEYED BY AMBULANCE : YES / NO

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 Authorised 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. The 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.
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.

GOLDTECH AIRCON
UEN: 200704828W

Policyholder's Signature / Date & Time

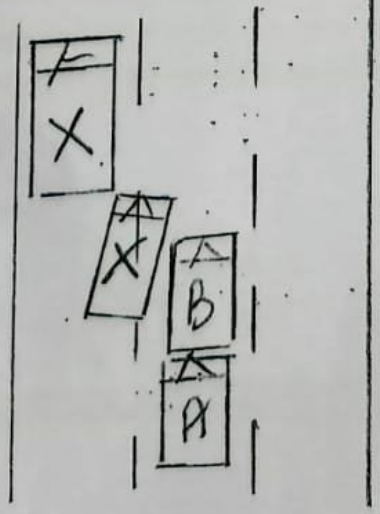
18/07/2024

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

Witnessed by Reporting Centre Personnel

Sketch Plan

BUKIT TIMAH ROAD



A) GBB 278G

B) SLH 3658Z

Describe Circumstances of the Accident

ON 12/07/2024 AT ABOUT 16:30 HRS I WAS AT BUKIT TIMAH ROAD. TRAVELLING ON CTE LANE OF 3 LANE ROAD. ON THE LEFT LOT B BUS & CAR SUKKUK TO THE CTE LANE & THE CAR SLH 3658Z WAS INFRONT OF ME FROM BRAKE & I COULD NOT BRAKE ON TIME & BUMP INTO THE BACK OF THE VAN.

Declaration

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

GOLDTECH AIRCON
UEN: 200704828W

18/07/2024

Policyholder's Signature / Date & Time	Driver's Signature (if driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel