

## 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 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 ability
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 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 Report	10/10/2015 10:22
Date Of Accident	09/10/2015 14:15
Exact Location Of Accident	TURF CLUB RD > DUNEARN RD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGF4686E
<b>Insured/Policyholder</b>	
Name Of Registered Owner	HSU CHAI HO
NRIC No	S1659214E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93686899
Alternative Phone No	Others-96503001

### Vehicle Particulars

Manufacturer	OPEL
Model	VECTRA-C 2.2
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
If No, Please state action to be taken	Reporting Only
Vehicle Category	Private Car

### Insurance Company

Name of Insurance Company	Direct Asia Insurance (Singapore) Pte Ltd
Type Of Coverage	Comprehensive
Fleet Policy	No
Policy Number	MT/00077003/03
Cover Note Number	

### Driver

Name of Driver	LYNN CHUA LI-MING
NRIC No	S7809269F
Date Of Birth	10/04/1978
Occupation	Indoor
Date Of Driving Pass	14/08/1998
Driving Experience	17 Years And 1 Month
Gender	Female
Mobile Number	(Local) +65-96503001
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	835 BT TIMAH ROAD #03-04
Postcode	279888
Was driver an employee of the Insured's Company	No
If No, Relationship of the Driver with the Insured	Spouse
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	Collision- Head to Rear (Insured Hit TP)
Weather Conditions	Clear
Road Surface	Dry

#### Other Information

Was any foreign vehicle involved in this accident?	No
Was any body injured in the Accident?	No
Was any other material or property damaged?	Yes
Was there any video captured by Car Camera?	No
Number of Passengers (Including Driver)	2

#### Details of Police Action

Was the accident reported to the police?	Yes
If Yes, Please state which Police Station	
Police Station Name	Bukit Batok Neighbourhood Police Centre
Police Station Address	<b>ROAD:</b> 21 Bukit Batok East Ave 4 , <b>POSTCODE:</b> 659840 , <b>COUNTRY:</b> Singapore
Police Station Contact	<b>TEL NO:</b> 1800-6659999 - <b>FAX NO:</b> 66655793
Was notice of intended Prosecution given?	No
If Yes, against whom?	

#### Circumstances of Accident

REFER SKETCH PLAN

Are accident photos available for attachment?	Yes
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#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJR6631B
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	CHRISTINE
NRIC/Passport Number	
Contact Number	98260358
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### Details of Witness

Name	
Phone Number	
Email Address	

## SKETCH PLAN

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### 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' law yers/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' law yers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

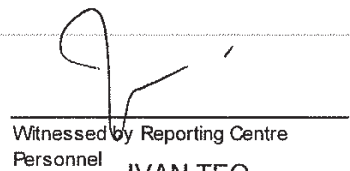
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date & Time



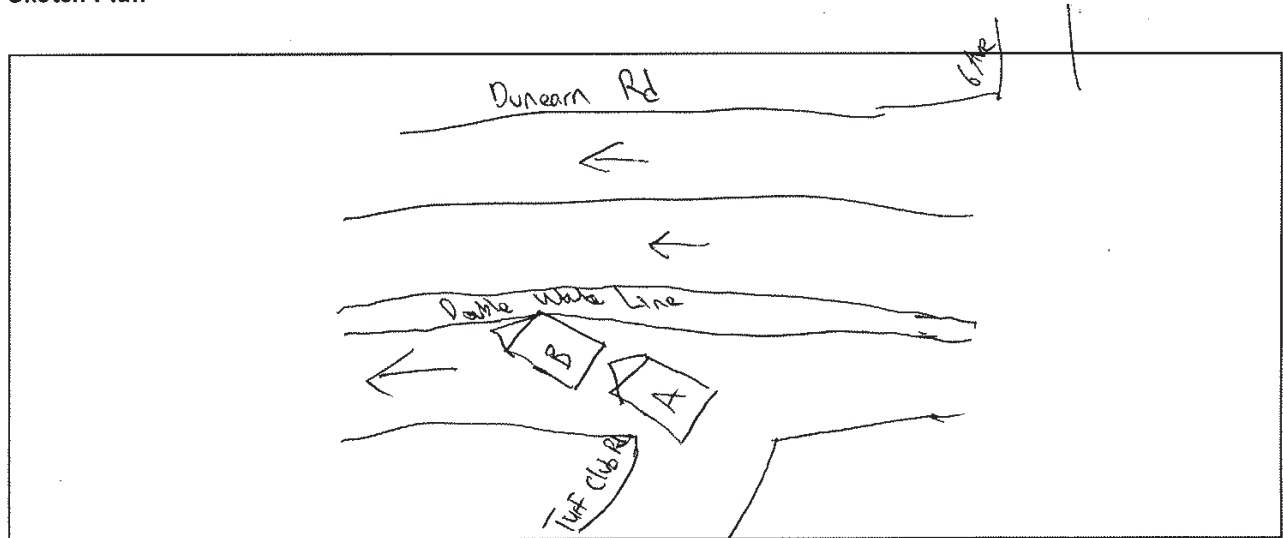
Driver's Signature (If driver is not the policyholder) / Date & Time



Witnessed by Reporting Centre Personnel

IVAN TEO

### Sketch Plan



## Describe Circumstances of the Accident

Vehicle SJR 6631B had turned out onto Duneam Rd and stopped suddenly to check oncoming flow of traffic as she wanted to cross the double white lines and cut across to the far right lane to make a U-turn into 6 Ave. My car was following behind hers, and as the road was clear of oncoming traffic, did not expect her to stop suddenly after moving off.

I had noticed that there was pre-existing damage on 3<sup>rd</sup> party's boot, ~~and that my vehicle had only scratches~~ and <sup>now damaged</sup> paint work on side of bumper. ~~scraped off~~ and front

## Declaration

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

IVAN TEO

Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo



GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE  
138 Robinson Road #07-09  
The Corporate Office  
Singapore 068906  
Phone: +65 6224 0010 Fax: +65 6224 0030  
Operating Hours: Monday to Friday 9am to 5pm

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS

Original Report No : ..... Vehicle Registration No : SGF4686E  
Name(as shown in NRIC) : LYNN CHUA LI-MING  
(\*Vehicle Driver/Vehicle Owner) (\*)Please delete as appropriate  
NRIC/Passport No : S7809269F  
Address : 835 BUKIT TIMAH RD #03-04, ROYALUE S(270888)  
Contact (Tel) : ..... (H/P) : 96503001  
(EMail) : .....  
Date Of Accident : 09/10/2015 Time Of Accident : 14:15  
Place Of Accident : TURF CLUB RD > DUNEARN RD  
Insurance Company : Direct Asia Insurance (Singapore) Pte Ltd

(B) ADDITIONAL INFORMATION / AMENDMENTS

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:-

ADD POLICE REPORT

ACCIDENT VIDEO OVERWRITTEN

SIGNATURE OF VEHICLE OWNER/DRIVER

DATE: 12/10/2015

**POLICE REPORT (NP299)**

Police Station Of Origin  
Bukit Batok N.P.C  
21 Bukit Batok East Avenue 4 SINGAPORE  
659840  
Tel No: 1800-6659999



J/20151011/2141

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Report No. J/20151011/2141

Date/Time Report Made 11/10/2015 20:37	Vide Report No.	Station Diary No. 56
Name Of Informant LYNN CHUA LI-MING	Address 835 BUKIT TIMAH ROAD #03-04 SINGAPORE 279888	
ID Type / ID No. NRIC NO / S7809269F	Contact No. Home/Office Mobile 96503001	
Nationality SINGAPORE CITIZEN	Email Address	
Occupation HOME MAKER	Sex Female	Age 37
Institution/School Name	Date of Birth 10/04/1978	Race Chinese
Date/Time Of Incident 09/10/2015 14:15	Location Of Incident DUNEARN ROAD SINGAPORE TURF CLUB ROAD EXITING TO DUNEARN ROAD JUNCTION	

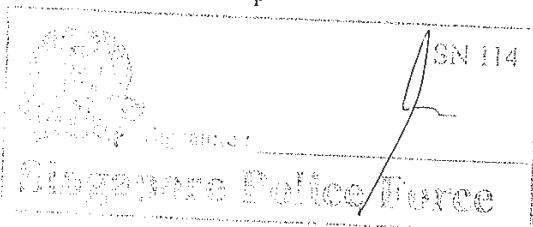
**Brief details.**

On 09/10/2015 at about 1415hrs, I was driving my black Opel Vectra 2.2 with car registration number V1) SGF4686E along Turf Club Road and going to enter into a 4-lanes Duncarn Road from a slip road. There was one black Honda Civic with car registration number V2) SJR6631B right in front of me. V2 was entering into Duncarn Road as well and V2 suddenly jammed brake while exiting Turf Club road. I could not brake in time and resulted in hitting onto V2 on the rear bumper. The impact was very low and only resulted in a minor dent on V2 rear bumper, while V1 dent on the front bumper was negligible.

While taking photos of the accident which I have submitted to my insurance company; Ethoz/Direct Asia, I noticed that V2 has many existing major dents on V2 rear boot and V2 bumper was also full of scratches and cracks. V2's owner namely; A1) Christine, HP: 98260358, acknowledged that these dents and scratches were inflicted in the past

Signature Of Officer Recording The Report: J / Tan Wei Kang	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 11/10/2015 20:37
Officer In-Charge Of Case: J / Jurong Police Divisional Investigation Branch / Quack Kai Kiat Raymond Contact No.: 67910000	Classification Of Case:

Authentication Stamp



POLICE REPORT (NP299)



J/20151011/2141

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## CONTINUATION OF REPORT

Report No. J/20151011/2141

and not this incident. As the damage was very minor, A1 and I agreed to settle this accident privately. A1 agreed she would send V2 to A1's workshop namely; EM1 Auto, to repair the damages which would cost SGD\$200 to 300, and then send the bill payment to me. However, A1's workshop called me on the same day on late afternoon, to inform me to make my insurance report as the claim fee will amount to SGD\$3000. The workshop claimed that the entire boot of V2 need to be repair and the rear boot need to be replaced. I explained to the workshop that this is not caused by this accident but they did not take my words, and persuade me to make my insurance report and claim against my insurance company.

I tried calling A1, but to no avail.

This is the first time of such incident which happened. I am lodging this report for my record purposes and for my own insurance company to investigate.

Signature Of Officer Recording The Report:

J / Tan Wei Kang

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

J / Jurong Police Divisional Investigation Branch /  
Quek Kai Kiat Raymond  
Contact No.: 67910000

Signature Of Informant:

Date/Time:

11/10/2015 20:37

Classification Of Case:

Authentication Stamp

