

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	22/11/2017 11:05
Date Of Accident	21/11/2017 16:00
Exact Location Of Accident	KM 7 JALAN JOHOR BAHRU AYER HITAM
Country/State of Loss	MALAYSIA/JOHOR DARUL TAKZIM
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJN483Y
Insured/Policyholder	
Name Of Registered Owner	PANG KIM HONG
NRIC No	S7026656C
Email Address	PANGKIMHONG@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-94566656
Alternative Phone No	OTHERS-94566656
Vehicle Particulars	
Manufacturer	HONDA
Model	VEZEL
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
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5080374175-01
Cover Note Number	
Driver	
Name of Driver	PANG KIM HONG
NRIC No	S7026656C
Date Of Birth	03/08/1970
Occupation	INDOOR
Date Of Driving Pass	15/12/1993
Driving Experience	23 YEARS AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-94566656
Fax Number	
Contact Number	OTHERS-94566656
Email Address	PANGKIMHONG@YAHOO.COM.SG

Address	25 HAZEL PARK TERRACE #17-02 HAZEL PARK TERRACE CONDOMINIUM
Postcode	678948
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	JHX1868 (PRIVATE CAR)
Was any body injured in the Accident?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	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 [OTHER]	TRAFIK JOHOR BAHRU
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

ON 21/11/2017 AT ABOUT 16:00HR I WAS DRIVING MY CAR SJN483Y FROM SUTERA MALL AND WANTED TO RETURN TO SINGAPORE, UPON REACHING KM 7 JALAN JOHOR BAHRU AYER HITAM, SUDDENLY A MALAYSIAN CAR JHX1868 BANG MY CAR FROM THE REAR AND WE COME DOWN AND EXCHANGE PARTICULARS THAT ALL.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	JHX1868
Vehicle Make/Model/Colour	NISSAN SERENA
Details Of Properties	
Name of Driver	PANG YOKE SEE
NRIC/Passport Number	500829-10-5041
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

Details of Witness

Name	
Phone Number	

Email Address

Sketch Plan

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' 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 may 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature

Date & Time: 22/11/2017

Driver's Signature

(If driver is not the policyholder)

Date & Time:



Reporting Centre Personnel's Signature

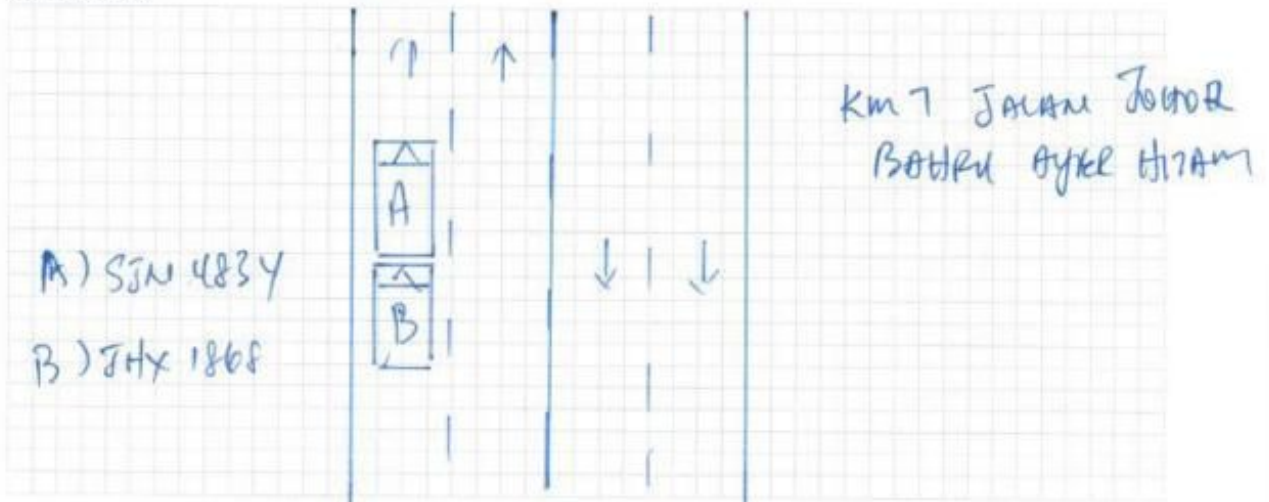
Name:

NRIC/FIN No:

Rashmi Wadhwa

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO JB POLICE REPORT & STATEMENT

DECLARATION

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

[Signature]
Policyholder's Signature

Date & Time: 22/11/2017

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

[Signature] 22/11/17
Reporting Centre Personnel's Signature
Name: Reski Winters
NRIC/FIN No.:

SHR201, Version 1.0, 1/1/17



POLIS DIRAJA MALAYSIA

REPOT POLIS

Balai : TRAFIK JOHOR BAHRU(S) Pegawai Penyiasat : R123364
 Daerah : J/BAHRU SELATAN
 Kontinjen : JOHOR
 No Repot : TRAFIK JOHOR BAHRU(S)/027006/17
 Tarikh : 21/11/2017
 Waktu : 1700 PM
 Bahasa Diterima : B. Malaysia

Butir-butir Penerima Repot

Nama : MOHD NOOR B MAHMUD No Personel : R146206 Pangkat : KPL
 Butir-butir Jurubahasa (Jika Ada)
 Nama : --- No K/P (Baru) : --- No Polis/Tentera: ---
 No Paspot: --- Bahasa Asal : ---
 Alamat: ---

Butir-butir Pengadu

Nama : PAMG KIM HONG
 No K/P (Baru) : --- No Polis/Tentera : --- No Paspot : E6610161B
 No Sijil Beranak : ---
 Jantina : Lelaki Tarikh Lahir : 03/08/1970 Umur : 47 tahun 3 bulan
 Keturunan : Cina Warganegara : Singapore
 Pekerjaan : SWASTA
 Alamat Tempat Tinggal : 25 HAZEL PARK TERRACE#17-02 HAZEL PARK CONDOMINIUM SINGAPORE, 678948
 Alamat Ibu/Bapa : ---
 Alamat Pejabat : ---
 No Tel (Rumah) : --- No Tel (Pejabat) : --- No Tel (HP) : 012-7211417
 Emel : ---

Pengadu Menyatakan:-

PADA 21/11/2017 JAM LEBIH KURANG 1600 HRS SAYA MEMANDU M/KAR SJN483Y DARI SUTERA MALL HENDAK KE SINGAPURA TIBA DI KM 7 JALAN JOHOR BAHRU AIR HITAM SAYA BERJALAN LURUS. TIBA-TIBA DATANG SEBUAH M/KAR JHX1868 DARI BELAKANG TELAH TERLANGGAR M/KAR SAYA. KEROSAKAN M/KAR SAYA DI BAHAGIAN BELAKANG BONET,LAMPU KANAN,BUMPER,SENSOR,PANEL,EKZOS,COVER LAIN-LAIN KEROSAKAN BELUM PASTI SEKIAN LAPURAN SAYA.

Tandatangan Pengadu:

Tandatangan Jurubahasa(Jika ada) :

Tandatangan Penerima Repot:

ID Pencetak | Tarikh @ Masa Cetak : R146206 | 21/11/2017 05:10:21 PM

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



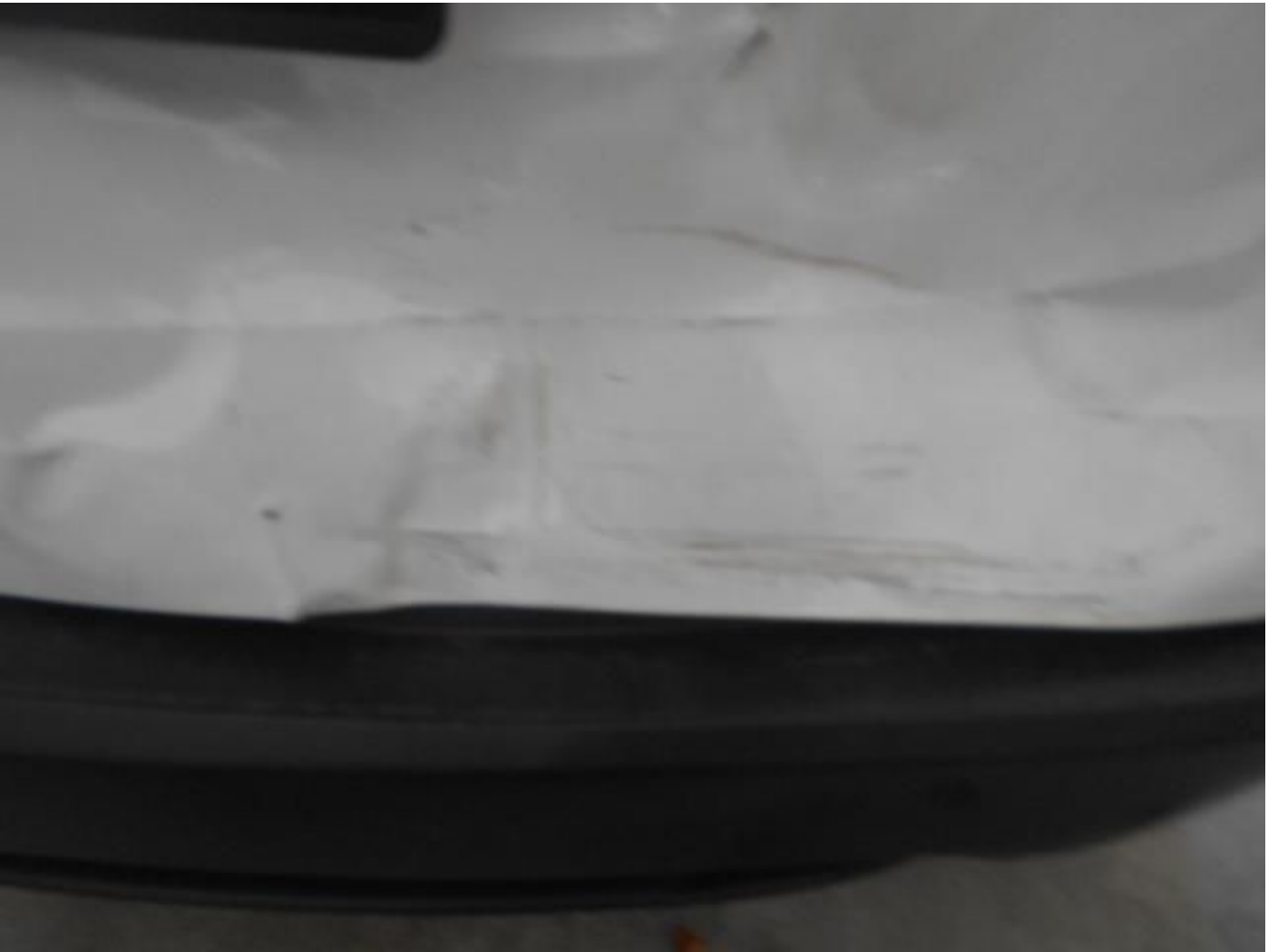
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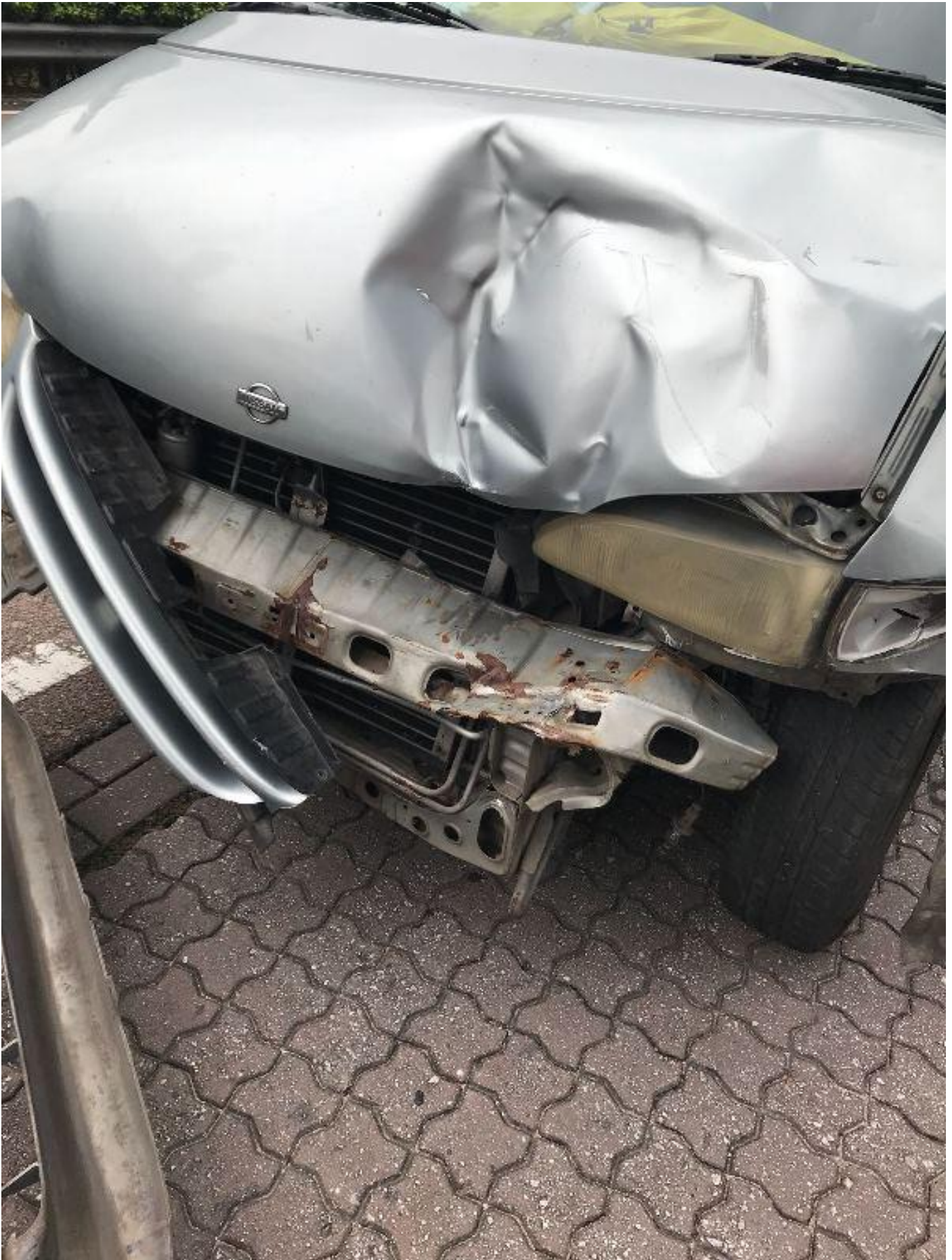


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