

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 21/11/2017 17:14
Date Of Accident 21/11/2017 08:55
Exact Location Of Accident ALG IRWELL BANK RD TOWARDS KIM SENG ROAD
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKR5074D
Insured/Policyholder
Name Of Registered Owner MIRANDAH DENISE ANNE
NRIC No S8022877E
Email Address DENISE.MIRANDAH@GMAIL.COM
Mobile Phone No (LOCAL) +65-91990926
Alternative Phone No OFFICE-91990926

Vehicle Particulars

Manufacturer VOLKSWAGEN
Model SHARAN NF 2.0 TSI (DSG6)+EQP
Exact Purpose for which vehicle was being used at time of accident PRIVATE
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 MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number A 80425647 AVW
Cover Note Number

Driver

Name of Driver MIRANDAH DENISE ANNE
NRIC No S8022877E
Date Of Birth 01/08/1980
Occupation INDOOR
Date Of Driving Pass 04/01/2007
Driving Experience 10 YEARS AND 10 MONTHS
Gender FEMALE
Mobile Number (LOCAL) +65-91990926
Fax Number
Contact Number OFFICE-91990926
Email Address DENISE.MIRANDAH@GMAIL.COM

Address	12 CUSCADEN WALK #08-01
Postcode	249694
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	SIDE SWIPE
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
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

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	SKR2951S
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	MR WEE SWEE BENG ANDDREW
NRIC/Passport Number	S1381309D
Contact Number	96662847
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' 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.
- (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.

[Signature]

Policyholder's Signature
Date & Time: 21/11/2017

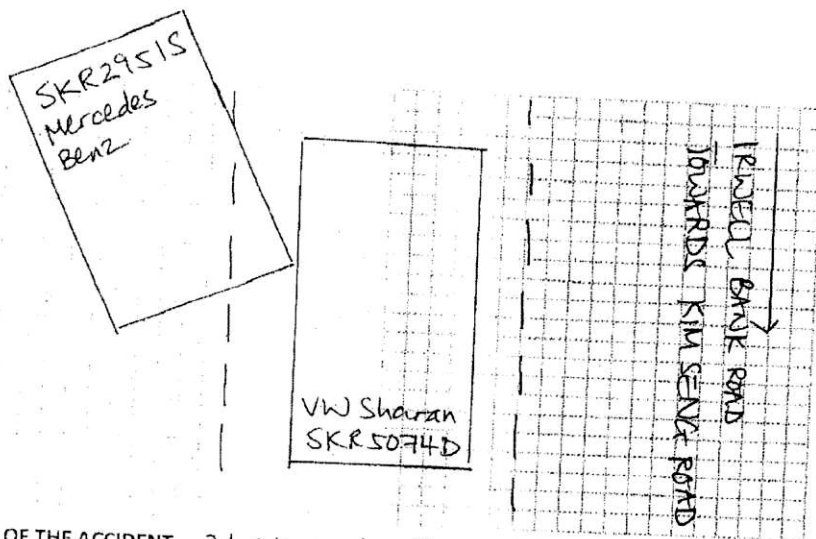
[Signature]

Driver's Signature
(If driver is not the policyholder)
Date & Time: 21/11/2017

[Signature]

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT 21 November 2017, 8.55am

I had just dropped my sons off at school, which is located at 1 One Tree Hill. I proceeded along Grange Road and made a right turn at Irwell Bank Road. I was observing lane discipline strictly at all times. I proceeded along Irwell Bank Road. I am very familiar with this road as I travel on it almost everyday because I ~~live~~ live in this area. I am well aware of the construction in the area, so I take extra care to observe lane discipline. At about 8.55am or thereabouts, ~~when I was driving along Irwell Bank Road~~ I was jolted by an impact to the right side of ~~my~~ car. I came to a stop as soon as I could. The impact made a loud sound. I alighted the car to see what had caused the impact. It was a Mercedes Benz ~~SKR~~ SKR 2951S. ~~He~~ The driver seemed to have swerved into my lane from the neighbouring lane to my right. The owner of SKR 2951S also alighted his car and ~~we~~ he apologised. We took some photos. We moved our cars to the roadside. We exchanged particulars*. He then met me at the VW Service Centre at 4pm, where he apologised again. *His particulars are Name: Wee Snee Beng Andrew NRIC: S1381309D Handphone: 96662847

DECLARATION

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

Policyholder's Signature: *Denise Mandell*
 Date & Time: 4pm 21/11/2017

Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 4pm 21/11/2017

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