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 witholding 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

atoresaid.	
	ACCIDENT STATEMENT
Date Of Report	27/11/2017 13:13
Date Of Accident	26/11/2017 19:30
Exact Location Of Accident	AYE TWDS TUAS B4 CLEMENTI RD EXIT AFTER BUONA VIST
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJC8605T
Insured/Policyholder	

Name Of Registered Owner ANG ZHEN WEI S8405263I NRIC No

Email Address ANG.ZHEN.WEI@GMAIL.COM

Mobile Phone No (LOCAL) +65-94528711 Alternative Phone No **OTHERS-NOPHONE**

Vehicle Particulars

Manufacturer **NISSAN**

LATIO 1.5 4A/T SPORT BASE ABS AIRBAG Model

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?

If No, Please state action to be taken THIRD PARTY Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company ERGO INSURANCE PTE. LTD.

Type Of Coverage **COMPREHENSIVE**

Fleet Policy NO

Policy Number DMPC16S019215

Cover Note Number

Driver

Name of Driver ANG ZHEN WEI NRIC No S84052631 Date Of Birth 22/02/1984 **OUTDOOR** Occupation **Date Of Driving Pass** 21/10/2003

14 YEARS AND 1 MONTH **Driving Experience**

Gender MALE

Mobile Number (LOCAL) +65-94528711

Fax Number

Contact Number OTHERS-NOPHONE

EMail Address ANG.ZHEN.WEI@GMAIL.COM Address BLK 469 CHOA CHU KANG AVE 3 #08-107

Postcode 68046

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? 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.

Number of Passengers (Including Driver) 2

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

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? NO
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKL4712J

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

Sketch Plan Pg. 1

SKETCH PLAN

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- 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.
- By the lodgment 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.
- (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.

SIN MING PRODUCTION

Policyholder's Signature

Date & Time: 27NOV 2017

9:35 AM

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

GIARMC SketchPlanForm V3

Sketch Plan #2 Pg. 1

ETCH PLAN		
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CLARATION		IO SER
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in the later to Cinner to the	Driver's Cignature	Reporting Centre Personnel's Signature
icyholder's Signature te & Time: 27Nov2017	Driver's Signature (If driver is not the policyholder)	Name:
9:34am	Date & Time:	NRIC/FIN No.:

Page 4 of 11

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$84052631





ANG ZHEN WEI (HONG ZHENWEI)

振威

Race CHINESE

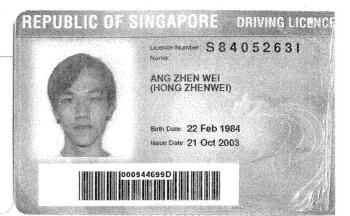
Date of birth

SINGAPORE

22-02-1984 Country/Place of birth

M

584**0526**31



5292633



NRIC No. S84052631

Date of issue 09-04-2014

APT BLK 469 CHOA CHU KANG AVENUE 3 #08-107 SINGAPORE 680469

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Motor cars =< 3000 kg with =< 7 massengers exclusive of the driver; and motor tractors/whichs >< 2 500 kg. Heavy motor cars and motor tractors > 2500 kg. Motor vehicles > 7250 kg not constructed to carry any load.

03 Jul 2014 13 Jan 2017

PASS DATE

S84052631

S / No.9000255708

NP 428A

Licence No: \$84052631







