

## 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	30/11/2017 15:00
Date Of Accident	30/11/2017 08:25
Exact Location Of Accident	SLE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLN6519R
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#### Insured/Policyholder

Name Of Registered Owner	ANMANI GENERAL CONSTRUCTION PTE LTD
Co Reg No	200813721M
Email Address	CJWANG@ANMANI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-67496521

#### Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL-1.5 X (A)
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	5090870531
Cover Note Number	

#### Driver

Name of Driver	WANG CHENGJIAN
NRIC No	G1154840M
Date Of Birth	01/05/1988
Occupation	OUTDOOR
Date Of Driving Pass	10/02/2015
Driving Experience	2 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81815886
Fax Number	
Contact Number	
EEmail Address	CJWANG@ANMANI.COM.SG

Address	BLK 715 WOODLANDS DRIVE 70 #12-152
Postcode	730715
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	CHAIN COLLISION
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

On 30/11/2017 at about 0825hrs, I was driving along SLE towards Jalan Kayu, the front vehicles came to a stop, I follow suit, suddenly I felt an impact from behind, I realize we were involved the chain collision, the vehicle D (SLL8831K) hit onto vehicle C (SKA5396P), Vehicle C (SKA5396P) forward hit onto Vehicle B (SJM8666P), Vehicle B (SJM8666P), hit onto my vehicle's rear portion. Vehicle A : No passenger on-board. Vehicle B : One passenger on-board Vehicle C: Two passengers on-board Vehicle D : No passenger on-board

#### 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	SJM8666P
Vehicle Make/Model/Colour	VOLKSWAGEN WHITE
Details Of Properties	VEHICLE B
Name of Driver	KHOO QI FONG
NRIC/Passport Number	S8809839J
Contact Number	96666869
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### Details of Witness

Name	
Phone Number	

Email Address

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SKA5396P  
Vehicle Make/Model/Colour BLACK SKODA  
Details Of Properties VEHICLE C  
Name of Driver VINIL KUMAR GOPINA GOPNATHAN NAIR  
NRIC/Passport Number S7060924Z  
Contact Number 97643365  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### Details of Witness

Name  
Phone Number  
Email Address

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SLL8831K  
Vehicle Make/Model/Colour LEXUS IS 250  
Details Of Properties VEHICLE D  
Name of Driver YONG LEE FONG  
NRIC/Passport Number S7027927D  
Contact Number 94870213  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### Details of Witness

Name  
Phone Number  
Email Address

## Accident Sketch Plan Pg. 1

### 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.



Policyholder's Signature

Date & Time:

2011/12/17 15:32



Driver's Signature

(If driver is not the policyholder)

Date & Time:



Reporting Centre Personnel's Signature

Name: Wang cheng Tian

NRIC/FIN No.:

### SKETCH PLAN

**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

As per attachment

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

NRIC/FIN No.:

driver's ic and licence Pg. 1


**EMPLOYMENT PASS**  
Employment of Foreign Manpower Act (Chapter 91A)  
Republic of Singapore

Employer  
**ANMANI GENERAL CONSTRUCTION PTE. LTD.**

Name  
**WANG CHENGJIAN**  
Occupation  
**PROJECT MANAGER**

FIN  
**G1154840M**

Date of Application  
**27-06-2016**  
Date of Issue  
**08-07-2016**  
Date of Expiry  
**07-07-2018**


 **L6986721**


**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Number: **G 115 4840 M**

Name:  
**WANG CHENGJIAN**

Birth Date: **01 May 1988**  
Issue Date: **10 Feb 2015**  
Valid Till **09 Feb 2020**


 **002394970F**



HP: 81815886

**VISIT PASS**  
Immigration Regulations

Name  
**WANG CHENGJIAN**




Date of Birth **01-05-1988** Sex **M** Nationality **CHINESE**

FIN **G1154840M** Date of Issue **08-07-2016** Date of Expiry **07-07-2018**

**MULTIPLE JOURNEY VISA ISSUED**

**YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.**



**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS/ES**

**EFFECTIVE DATE**  
**10 Feb 2015**

**Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg**

NP 428A

 Licence No: **G1154840M**

HP:

Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo

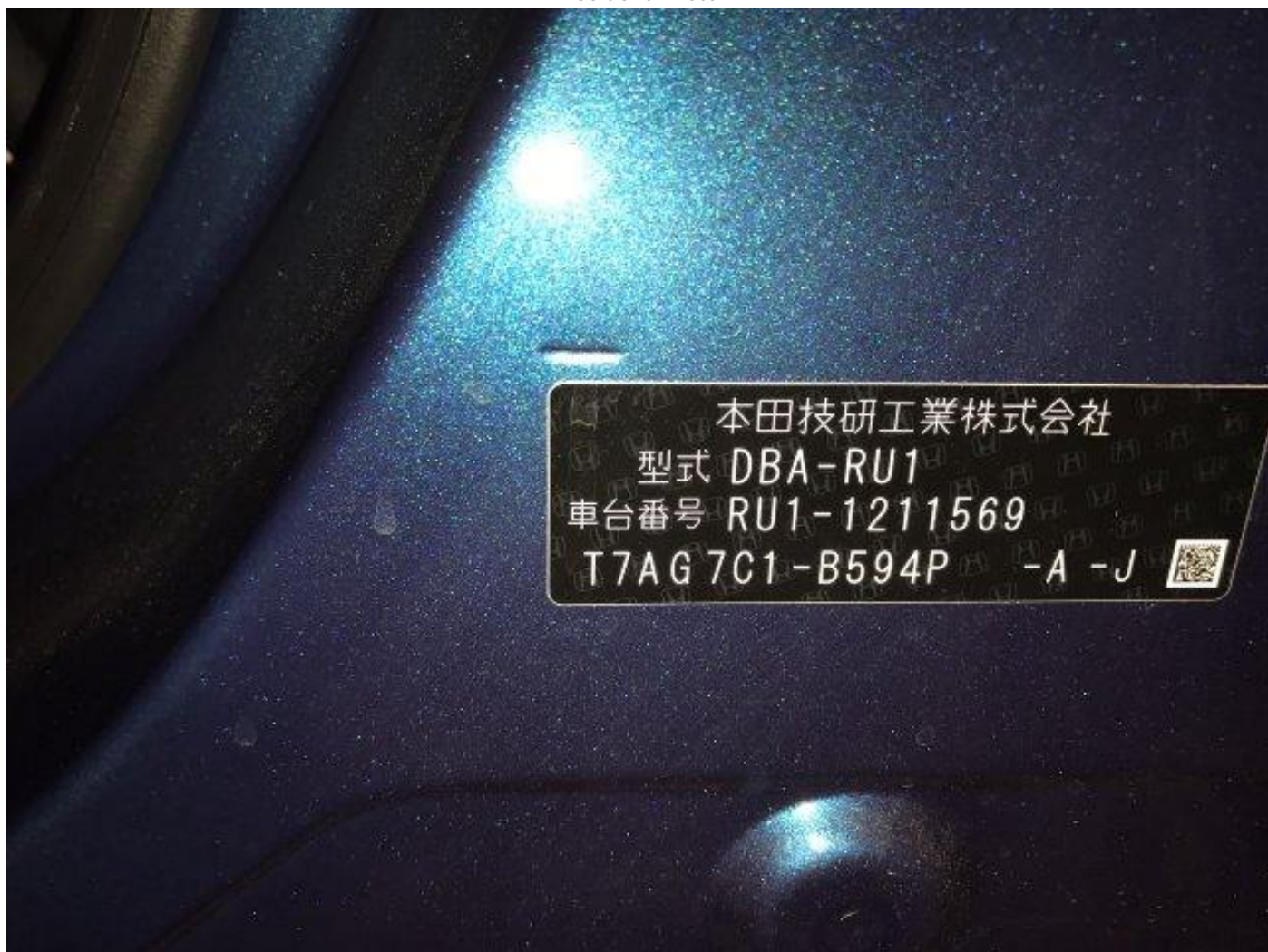




Accident Photo



Accident Photo







science photo







