

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	04/12/2017 16:45
Date Of Accident	04/12/2017 11:20
Exact Location Of Accident	JUNCTION OF YISHUN AVE 1 & YISHUN ST 41
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGV9324H
Insured/Policyholder	
Name Of Registered Owner	JONATHAN JAMES
NRIC No	S8727823I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90237100
Alternative Phone No	OFFICE-90237100

Vehicle Particulars

Manufacturer	SUZUKI
Model	SWIFT 1.3 M
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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	FWD SINGAPORE PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	PNPV2017-00005047
Cover Note Number	N.A

Driver

Name of Driver	WONG WEI LEE, RANDY
NRIC No	S8805721Z
Date Of Birth	20/02/1988
Occupation	INDOOR
Date Of Driving Pass	29/11/2013
Driving Experience	4 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90237100
Fax Number	
Contact Number	
Email Address	MANUTD.RULZ.BIGTIME@GMAIL.COM

Address

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured FRIEND

Vehicle Registration Number of Driver's Own Vehicle -

Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident COLLISION - CROSS JUNCTION

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

I was travelling along YISHUN AVE 1 turning into YISHUN ST 41, my car SGV9324H collided onto a taxi that was coming straight from YISHUN AVE 1 towards SELETAR. No injuries involved. That's 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 SH7837P

Vehicle Make/Model/Colour HYUNDAI SONATA NF 2.0 / BLUE

Details Of Properties NIL

Name of Driver UNKNOWN

NRIC/Passport Number

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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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.
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.

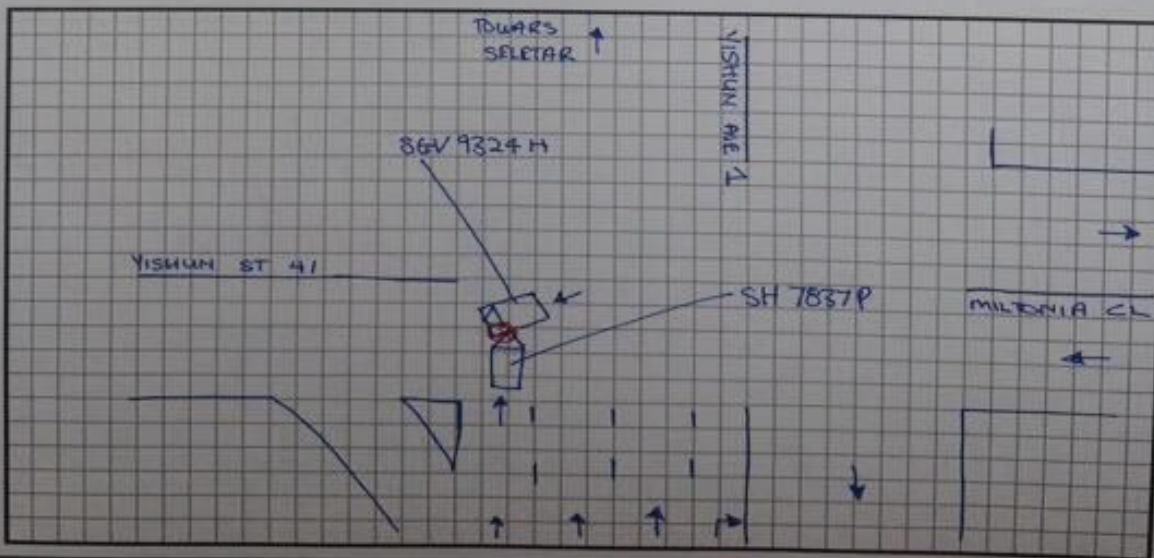
**VERIFIED BY AJAX MARS
REPORTING OFFICER
MOHD FADZLY BIN ISMAIL**

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre
Personnel

Sketch Plan



ACCIDENT STATEMENT (2000 characters)

I was travelling along YISHUN AVE 1 turning into YISHUN ST 41, my car SGV9324H collided onto a taxi that was coming straight from YISHUN AVE 1 towards SELETAR. No injuries involved. That's all

Taxi Voucher No.:

DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -
MOHD FADZLY BIN ISMAIL

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

4 December 2017 12:34 pm

Date/Time:

4 December 2017 12:34 pm

Accident Photo



Accident Photo



Accident Photo



A photograph showing the front-left quarter of a blue Suzuki Swift. The car has a black hood and a black grille with the Suzuki emblem. The license plate is SGV9324H. The car is parked on a paved surface with a yellow curb in the foreground. A timestamp '12:15 DEC/ 4/2017' is visible in the bottom right corner of the image.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo




Driving License

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

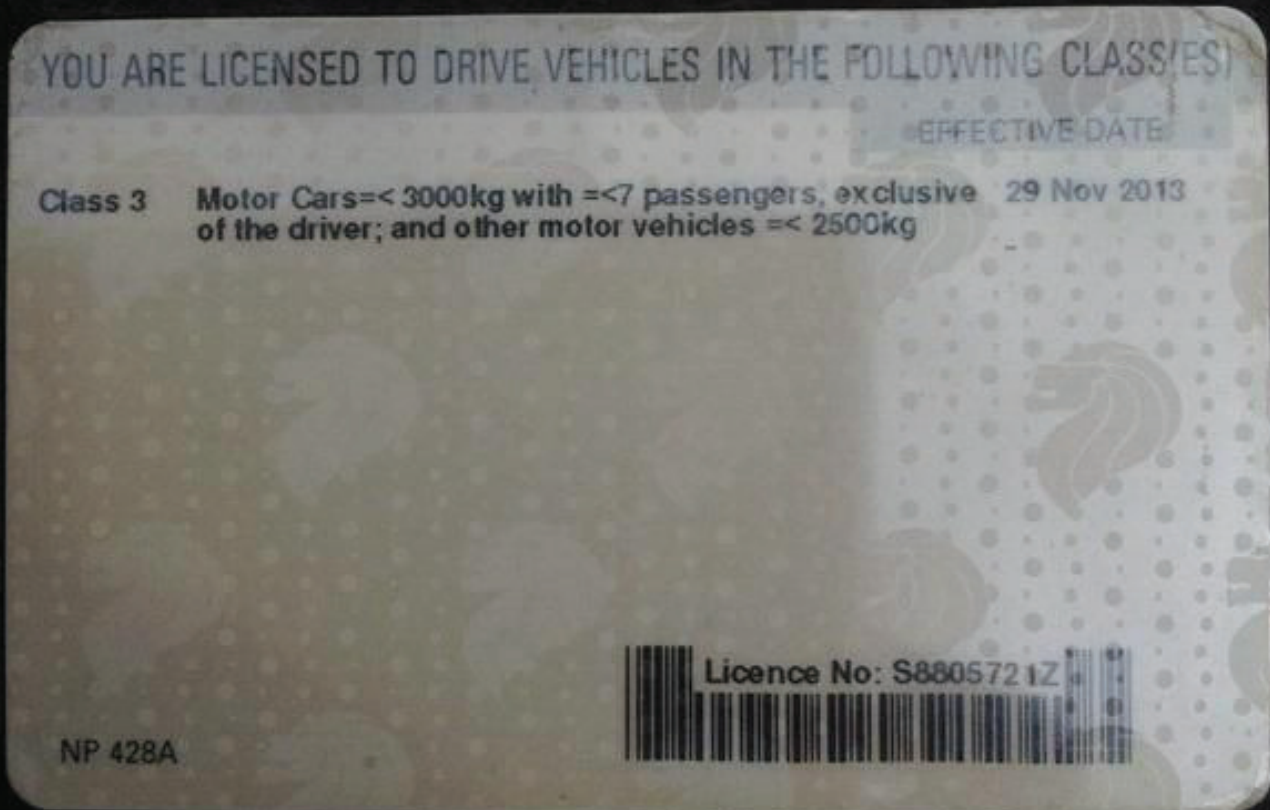
Licence Number: **S8805721Z**
Name: **WONG WEI LEE, RANDY
(WANG WEILI)**

Birth Date: **20 Feb 1988**
Issue Date: **29 Nov 2013**




 **002250815E**

Driving License




Identification Card

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S8805721Z**



Name
WONG WEE LEE, RANDY
(WANG WEILI)
王 偉 立



Race
CHINESE

Date of Birth
20-02-1988

Sex
M

Country of Birth
SINGAPORE

Handwritten green stamp:
ICT
06/11/17
Amangs

Partial ID number visible: 5721Z

Identification Card

