SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number

EMail Address

- 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	04/12/2017 13:09
Date Of Accident	02/12/2017 15:25
Exact Location Of Accident	GANGES AVE & INDUS RD TOWARDS LOWER DELTA RD
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLM46H
Insured/Policyholder	
Name Of Registered Owner	SKYWAY MOTOR PTE LTD
Co Reg No	199904194N
Email Address	PEILIN@SKYWAY.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-63336333
Vehicle Particulars	
Manufacturer	HONDA
Model	VEZEL HYBRID 1.5X AUTO
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	A 28795104 MCX
Cover Note Number	
Driver	
Name of Driver	LIM LENG LENG
NRIC No	S7114022I
Date Of Birth	18/04/1971
Occupation	OUTDOOR
Date Of Driving Pass	25/02/2000
Driving Experience	17 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-94875063
Fax Number	

NOEMAIL

Address BLK 845 JURONG WEST STREET 81

#09-229

Postcode S640845

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OT

Vehicle Registration Number of Driver's Own

Vehicle

OTHER - HIRER

Insurance Company of Driver's Own Vehicle

2

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)

3

NO

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name BUKIT MERAH WEST NPC

Police Station Address ROAD: 500 BUKIT MERAH VIEW #01-01, POSTCODE: 159682,

COUNTRY: SINGAPORE

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO THE ATTACHED 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 SHA8280E

Vehicle Make/Model/Colour COMFORT YELLOW TAXI

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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- 7. 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

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Policyholder's Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time: 4 Dec 2017

Name: NRIC/FIN No.

Reporting Centre Rersonner's Signature

Sketch Plan #2 Pg. 1

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	Ganges Ave	
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NRIC/FIN No.:

Annex D

NOTICE OF COMPLIANCE

This is to confirm that Lim Leng Leng, NRIC: S7114022I, HP: 94875063 has reported to the police a non-injury traffic accident which occurred before junction of Ganges Avenue and Indus Road towards Lower Delta Road on the 02/12/2017 at 1525hrs involving the following vehicles: SLM46H, Honda Vezel, black colour and SHA8280E, Hyundai i40, yellow colour.

1) Complainant Vehicle - SLM46H, one black colour Honda Vezel 2) Other party Vehicle - SHA8280E, one yellow colour Hyundai i40 taxi (Chin Shen Tat, HP: 92397585)

On the above mentioned date, time and place, I was driving my car, registration no. SLM46H along Ganges Avenue on the centre lane of a three lane road.

I then stopped before the junction of Ganges Avenue and Indus Road heading towards Lower Delta Road as the traffic light was red and the cars in front of me had stopped. Suddenly, one taxi, SHA8280E, hit onto the rear of my vehicle when I had stopped my car. I then stopped and got out of my vehicle to check on the damage. We then took some photos of our car damage and decided to make claims from our respective insurance. The taxi driver then provided me with his particulars and contact number. There was no one injured during the incident and no government property was damaged.

If this accident was reported to the Police within 24 hours of its occurrence, then He / She had therefore complied with Sec 84 (2) of the road Traffic Act, Cap 276.

Date: S / D Ref:

02/12/2017

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Police Post / Unit:

Name of issuing officer: SGT(2) T140174 Jeremy Tan Bukit Merah West NPC / D Div

Bukit Merah West

Neighbourhood Police Centre

No 500 Bukit Merah View #01-61

Singapore 159682 Tel: 1800-3779093

Original - to be issued to informant Duplicate - to be retained at police post or unit