

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	14/12/2017 10:27
Date Of Accident	11/12/2017 20:00
Exact Location Of Accident	MARINA LINK TWDS MARINA COSTAL ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGC5817D
Insured/Policyholder	
Name Of Registered Owner	CHOY MUN SING ALVIN
NRIC No	S7535219J
Email Address	WEIAL04@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-81982211
Alternative Phone No	OTHERS-81982211

Vehicle Particulars

Manufacturer	HONDA
Model	-
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D 27234955 QMY
Cover Note Number	

Driver

Name of Driver	TAN WEI WEI (CHEN WEIWEI)
NRIC No	S7535219J
Date Of Birth	22/11/1975
Occupation	INDOOR
Date Of Driving Pass	24/08/1994
Driving Experience	23 YEARS AND 3 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-81982211
Fax Number	
Contact Number	OTHERS-81982211
Email Address	WEIAL04@YAHOO.COM.SG

Address	-
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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	RAINING
Road Surface	WET

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

PLS REFER TO THE ATTACHED STATEMENT.

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	SHC3407E
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

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.

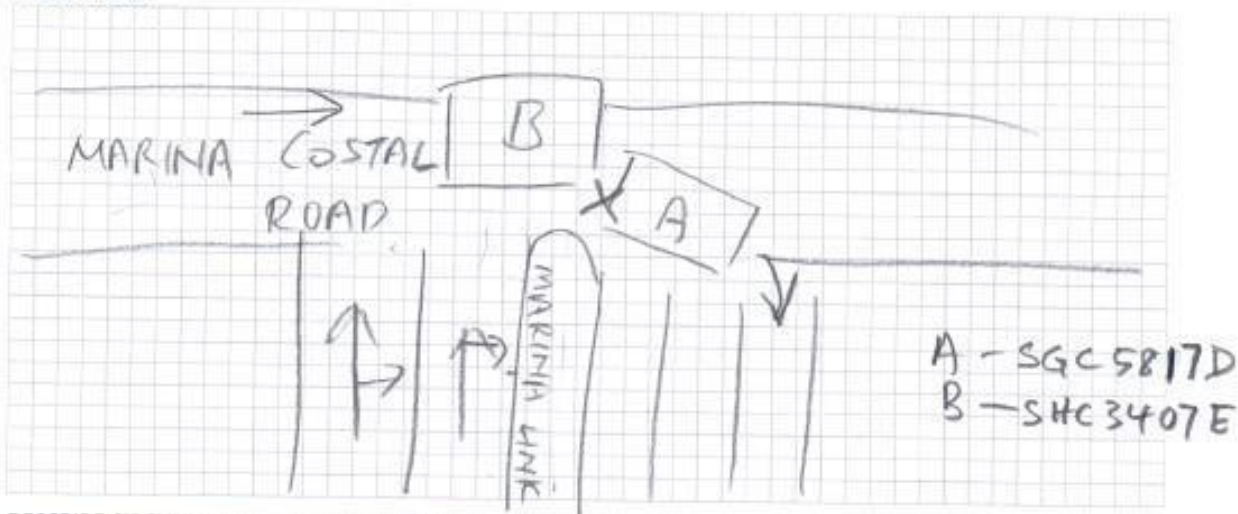
Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 12/12/17 6:16:40

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

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Vehicle A was exit from MCE Central Boulevard
do left turn to Marina Link. Vehicle B turning right
to ~~Marina Coastal Road~~ ~~Koctor Road~~ banged into ~~the~~ ^{my} vehicle A's right
side.

DECLARATION

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

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)

Date & Time: 17/12/17 @ 1640L-

Reporting Centre Personnel's Signature

Name: _____

NRSC/FIN No.:

To Whom It May Concern

Letter of Authorisation

I, Choy Mun Sing, Alvin (NRIC S7330622A)
confirm that I am the owner of vehicle with
registration no. SGC5817D. I, hereby, authorize
Tan Wei Wei (NRIC S7535219J) to act on my
behalf as appropriate.

Yours,



Alvin Choy.



(21 DEC 2017)

ADVICE TO IDENTITY CARD (IC) HOLDER WHO HAS REPORTED LOSS IC

You have reported the loss of your identity card (IC) to our office. If you subsequently recover your IC, you are advised to bring it back to us by **21 DEC 2017** (Mon – Fri: 8.00am to 4.30pm; Sat: 8.00am to 12.30pm) for the facility of the refund of your IC replacement fee. Please come in person to ICA with the following documents:

☒ Original IC which was recovered

IC COLLECTION SLIP



NRIC No: S7535219J (PINK IC)

FEE: \$60.00

NAME: TAN WEI WEI

COLLECTION COLUMN: Please obtain a queue ticket from the Self Service Ticketing Kiosk.

COLLECTION DATE: 05/01/2018

DATE OF ISSUE: 05/12/2017

REGISTRATION OFFICER: THIRUGARANY D/O
ODAIAPPAN

SIGNATURE/PRINT OF REGISTRANT

COLLECTION HOURS: 8.00 am - 4.30 pm (Mon-Fri)
8.00 am - 12.30 pm (Sat)

Your IC will be destroyed if you do not collect it within 30 days from the collection date and you will have to pay the fee for a new IC. You may also collect it from the Self Service Ticketing Kiosk. Please inform the police to verify the holder's IC and the collection slip must be completed on the reverse side of the collection slip. Proxy collection is not allowed for Singapore and Copies.

Sketch Plan #5



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

