

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 willful 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	29/12/2017 12:36
Date Of Accident	29/12/2017 09:00
Exact Location Of Accident	ADAM ROAD TOWARDS QUEENSTOWN
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF7527X
Insured/Policyholder	
Name Of Registered Owner	LIAN HUP MOTOR WORKS
Co Reg No	04594600X
Email Address	YUQUANJOE@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-97362342
Alternative Phone No	OFFICE-97362342

Vehicle Particulars

Manufacturer	NISSAN
Model	NV200
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5088154586
Cover Note Number	

Driver

Name of Driver	QUEK YU QUAN
NRIC No	S9424473J
Date Of Birth	05/07/1994
Occupation	OUTDOOR
Date Of Driving Pass	14/01/2013
Driving Experience	4 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97362342
Fax Number	
Contact Number	OTHERS-97362342
EMail Address	YUQUANJOE@HOTMAIL.COM

Address	BLK 210 PASIR RIS STREET 21 #04-324
Postcode	510210
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	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

PLEASE 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	GY7345U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	ZULKARNAIN BIN AMIN
NRIC/Passport Number	S7614095B
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

VEHICLE NO: _____

DOA: _____

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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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

PLEASE NOTE YOUR INSURER MAY HAVE A **14 DAY-TIMEFRAME** FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY.



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Adam Road		Vehicle A : GBF752TX Vehicle B : GY7345U
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Describe Circumstances of the Accident

I was travelling along Adam Road towards Queenstown on 29/12/17 at about 0900hrs.

The vehicles in front slowed and I followed and almost came to a stop. Suddenly, vehicle B came from behind and hit onto me.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policy holder) / Date & Time

Witnessed by Reporting Centre Personnel

Claim Handling

Accident MT/0975625

Policy No.	5088154585	Vehicle No.	GBF7527X	GST Registration No.	
Policyholder Name	LIAN HUP MOTOR WORKS			Policyholder NRIC	
Product Code	COMMERCIAL VEHICLE INSURANCE	Cover Type	Comprehensive	Loading	
Contact No.(Mobile)	97362342	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	
KFK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	20	Private Hire	No

Accident Details

Report Date	29/12/2017 14:04	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head
Date of Accident	29/12/2017	Time of Accident hh:mm	09:00	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ADAM ROAD TOWARDS QUEENSTOWN				

Benefits

Excess

Own damage Excess	600.00	Additional Excess		Windscreen Excess	
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	No
Modification History			

Policyholder Mailing Address

Address 1	BLK 1010 #01-107	Address 2	BUKIT MERAH LANE 3	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.		Related Policy Number	5061883677-04		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	
Unnamed driver Name	QUEK YU QUAN	Driver NRIC	S94244731	Driving Experience	
Register Date of Driver License	14/01/2013	Driver Age	23	Contact No.(Home)	
Contact No.(Mobile)	97362342	Contact No.(Office)		Address 3	
Address 1	BLK 210 #04-324	Address 2	PASIR RIS STREET 21	Post Code	
Address 4		Address Type	Foreign address		
Unit No.	04-324				
Does he own a Singapore Registered car?	☐ Yes ☒ No	Driver Vehicle No.	GBF7527X	Driver Insurer Company	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	☐ Yes ☒ No
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Modification History

Claim 001 OD-MX **New**

Claim Type *	OD-MX	Insured Name	LIAN HUP MOTOR WORKS	Insured NRIC	
Contact No.(Mobile)		Contact No.(Home)		Contact No.(Office)	
Email Address		OI Vehicle Number	GBF7527X	TP Vehicle Number	
Claim Description	GBF7527X / GY7345U ON 29 Dec 2017				Name of Preferred Workshop
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	GIA report	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	
Date Registered	29/12/2017 14:12	Claim Close Date		Total Loss but Repaired	
Report Taken By	ROSLI WAHAB	Workshop Repairer			

☒ Print AK letter

Save Submit

Attachment

Accident No.	MT/0975625	Claim No.	001
Last Doc. Received	☒ Yes ☐ No	Upload Date	29/12/2017 14:14
Path *		Category *	Confidential
			urgency
			Normal

Browse Clear Please Select

Browse	Clear	Please Select	▼	NIC	▼	Normal
Browse	Clear	Please Select	▼	NIC	▼	Normal
Browse	Clear	Please Select	▼	NIC	▼	Normal
Browse	Clear	Please Select	▼	NIC	▼	Normal
Browse	Clear	Please Select	▼	NIC	▼	Normal

Attachment List

Attachment	Uploaded By/Date	Category	?	Urgency	De
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 29 Dec 2017 14:14	Photos		Normal	Photos
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 29 Dec 2017 14:14	Photos		Normal	Photos
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 29 Dec 2017 14:13	Photos		Normal	Photos
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 29 Dec 2017 14:13	Photos		Normal	Photos
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 29 Dec 2017 14:13	Photos		Normal	Photos
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 29 Dec 2017 14:12	Photos		Normal	Photos
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 29 Dec 2017 14:12	Photos		Normal	Photos
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 29 Dec 2017 14:12	Photos		Normal	Photos
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 29 Dec 2017 14:11	Photos		Normal	Photos
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 29 Dec 2017 14:11	Photos		Normal	Photos
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 29 Dec 2017 14:11	Photos		Normal	Photos
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 29 Dec 2017 14:11	Photos		Normal	Photos
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 29 Dec 2017 14:09	SAS		Normal	SAS
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 29 Dec 2017 14:06	NRIC/ Driving License		Normal	NRIC/ Driving

Video List

Uploaded By/Date	Fulder Date	File Name	?	Source
		Display in New Window	Scan and uploading	

Personal Particulars

Date of Accident: 29 / 12 / 2017 (dd/mm/yy)

Time of Accident: 09 : 00 (24 Hrs)

Vehicle No.: GBF7527X Vehicle Make / Model: Nissan NV200 (1597cc)

Exact location of Accident: Adam Road towards Queenstown

Owner's Name / IC No.: Lian Hup Motor Works / 04594600X

Driver's Name / IC No.: Quek Yu Quan / 89424473J

Driver's Contact No.: 91362342 Insurance Company & Policy No.: NTUC Income

Driver's E-mail address: hancarrepairs@gmail.com / yuquanjoe@hotmail.com

Relationship between Owner & Driver: Spouse / Children / Friend / Parents / Others specify: _____

What do you wish to claim? (Please circle one only)

(1) Own Insurance / (2) Other Vehicle (The one you want to claim against) / (3) Reporting (For Record Purpose)

Exact purpose for which the vehicle was being used at time of accident? (Please circle one only)

Private use / Work purpose

Weather condition & Road conditions?

Clear & Dry / Raining & Wet / After-Rain & Wet / Drizzling & Wet

Occupation

Indoor / Outdoor

Any Injuries? (MC of 3 days or more, police report is required)

Yes / No If Yes, which police station? _____

The Other Party (Vehicle B) Details:

57614095B

Driver's Name / IC No.: Zulkarnain Bin Amin Vehicle No.: GY7345U

Insurance Company: _____ Driver's Contact No: _____

(If more than 2 vehicles involved, please indicate the other party vehicle numbers below)

Other (Vehicle C) Involved: _____

Independent Witness (If Any): _____ Contact No: _____

Preferred workshop Name (If Any): _____ Contact No: _____

*If no proper documents are produced, IDAC should not file the report. Information will be discarded after one week.

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9424473J



Name

QUEK YU QUAN

郭育全

Race

CHINESE

Date of birth

05-07-1994

Sex

M

Country of birth

SINGAPORE

S9424473J

REPUBLIC OF SINGAPORE DRIVING LICENCE

S9424473J

QUEK YU QUAN

Birth Date 05 Jul 1994

Issue Date 14 Jan 2013



002141510H

Company address: 1010 Bukit Merah Lane 3
#01-107
Alexandra Village Ind'l Est
Singapore 159124

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

EFFECTIVE DATE

Class 3 Motor Cars < 3000kg with < 7 passengers, exclusive of the driver; and other motor vehicles < 2500kg 14 Jan 2013



Licence No: S9424473J

NP 426A



Licence No: S9424473J



Date of issue

20-05-2009

Address

APT BLK 210 PASIR RIS STREET 21
#04-324
SINGAPORE 510210

4406638

eBaoTech

General Claim

Hello, NAC_BUKIT_MERAH_800676

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No:		Date of Accident:	29/12/2017 12:35						
Vehicle No. (For Motor):	GBF7527X								
Search									
Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
☐	5088154586	LIAN HUP MOTOR WORKS	04584600X	GCV	Comprehensive	GBF7527X	GBF7527X	28/02/2017	27/02/2018
Continue									