

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 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	18/01/2018 14:10
Date Of Accident	14/01/2018 18:00
Exact Location Of Accident	CARPARK HEATHY NAFA
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLJ9277P
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Insured/Policyholder

Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-83395573
Alternative Phone No	OFFICE-83395573

Vehicle Particulars

Manufacturer	TOYOTA
Model	-
Exact Purpose for which vehicle was being used at time of accident	WORK
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD18V00034/VPZ/R03
Cover Note Number	

Driver

Name of Driver	LIN YING
Passport No/FIN	G3343737X
Date Of Birth	15/01/1976
Occupation	INDOOR
Date Of Driving Pass	15/10/2004
Driving Experience	13 YEARS AND 2 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-83395573
Fax Number	
Contact Number	OTHERS-83395573
Email Address	NOEMAIL

Address	22 ST THOMAS WALK #2402
Postcode	238107
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO PROPERTY
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	YES
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

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

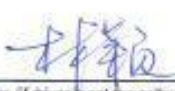
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4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Traffic Police Department for investigation.
6. This report will be forwarded by the insurers to 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.

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' 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.


Policyholder's Signature / Date & Time

* 
Driver's Signature (if driver is not the policyholder) / Date & Time
14 Jan 2018. 8:10PM

Witnessed by Reporting Centre Personnel

Sketch Plan *



Sketch Plan #2

Describe Circumstance of the Accident *

Going inside the carport. Can't see the blind spot
hit the wall at the 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

14 Jan 2018. 8:10 PM

Witnessed by Reporting Centre Personnel

18/1/2018

TRANSLATION

DRIVING LICENCE OF THE PEOPLE'S REPUBLIC OF CHINA

LICENCE No. 420111197601155644

Name	LIN YING	Sex	Female	Nationality	Chinese National
Address	Room 601, Block 47, Huagong Nanxiu Hamlet, No. 381, Wushan Road, Tianhe District, Guangzhou City (Minhang)				

TRAFFIC POLICE CORPS,
PUBLIC SECURITY BUREAU OF
SHANGHAI MUNICIPALITY

Date of Birth

15 January 1976

Date When Licence First Obtained

15 October 2004

Licensed To Drive Vehicles in Code

C1

Valid from

15 October 2010

Valid for

10 years

[Photograph Affixed]

Translated by:



LUKE TEO

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Maxplus Consulting Pte Ltd
www.maxplus.com.sg
Co. Reg. No: 200822017E
HP: 98623043

2 c 1 AN 7017

CODE OF VEHICLES LICENSED TO DRIVE

A1	Large Coaches and A3, B1, B2	C4	Tri-wheel Vehicles
A2	Towing Vehicles and B1, B2	C5	Small-sized Automatic Transmission Cars Designed for Disabled People
A3	Urban Public Transport and C1	D	Ordinary 3-wheel motorcycles and E
B1	Medium Bus and C1, M	E	Ordinary 2-wheel motorcycles and F
B2	Large Trucks and C1, M	F	Light Motorcycles
C1	Small Cars and C2, C3	M	Wheeled Automated Mechanical Vehicle
C2	Small Automatic Cars	N	Trolleybuses
C3	Low-speed Goods Vehicles and C4	P	Tramcars

Except for the Public Security Traffic Control Authority, no other unit or person is allowed to retain this Licence.

Translated by:

JP

LUKE TEO

Certified Translator
Maxplus Consulting Pte Ltd
www.maxplus.com.sg
Co. Reg. No: 200822017E
HP: 98623043

26 JAN 2017

Sketch Plan #5



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

