

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	27/01/2018 15:19
Date Of Accident	26/01/2018 15:00
Exact Location Of Accident	LOR 7 TOA PAYOH OPEN SPACE CARPARK NEAR BLK 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKZ8208Z
Insured/Policyholder	
Name Of Registered Owner	CHUA CHOON SONG
NRIC No	S6822565E
Email Address	NGAHTEE@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97643973
Alternative Phone No	OFFICE-97643973

Vehicle Particulars

Manufacturer	HONDA
Model	CR-V-2.4 (A)

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 CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5091757224
Cover Note Number	

Driver

Name of Driver	TEO CHENG PENG (ZHANG QINGPING)
NRIC No	S7309823H
Date Of Birth	16/03/1973
Occupation	OUTDOOR
Date Of Driving Pass	03/02/1997
Driving Experience	20 YEARS AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97286626
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	31 BISHAN STREET 11 #25-06
Postcode	579819
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	COLLISION - MAJOR/MINOR RD
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)	2
Passenger 1	NAME: : CHUA CHONG KAI GENDER: : MALE

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 DRIVING VEHICLE A WHICH BELONGS TO MY HUSBAND, CHUA CHOON SONG. I WAS DRIVING STRAIGHT AND WANTED TO EXIT THE CARAPRK AT THE SAID LOCATION. WHILE DRIVING ALONG THE WAY, VEHICLE B SUDDENLY MOVE OUT FROM THE PARKING LOT AND COLLIDED ONTO MY VEHICLE. NO INJURIES WERE INVOLVED. THAT'S ALL

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLP5674X
Vehicle Make/Model/Colour	MAXDA 3
Details Of Properties	
Vehicle Category	PRIVATE HIRE
Name of Driver	TAN YU YANG
NRIC/Passport Number	S9401399B
Contact Number	83997281
Address	BLK 701 CHUA CHU KANG STREET 53 #10-34
Postcode	680701
Insurance Company Name	

Nature Of Damage
No. Of Passenger (Including Driver)

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:

29 JAN 2013


Driver's Signature
(If driver is not the policyholder)
Date & Time:

29 JAN 2013


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.: ANG WEI GUANG
S8410708E

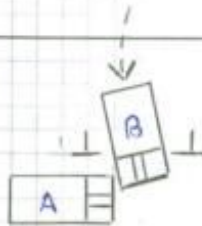
Sketch Plan #2

SKETCH PLAN

D. O. A 26. 01. 2018 , 15: 00 Hrs

Vehicle A - SKZ 8208 Z

Vehicle B - SLP 5674 X



Lor Y Toa Payoh

Open Space Carpark

Near Bldg 3, Kim Keat Court

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving Vehicle A which belongs to my husband, Chua Choon Song. I was driving straight and wanted to exit the carpark at the said location. While driving along the way, Vehicle B suddenly move out from the parking lot and collided onto my vehicle.

No injuries were involved.

That's all

DECLARATION

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

Policyholder's Signature

Date & Time:

29 JAN 2018

Driver's Signature

(If driver is not the policyholder)

Date & Time:

29 JAN 2018

Reporting Centre Personnel's Signature

Name:

ANG WEI GUANG

NRIC/FIN No.:

S8410708E

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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