

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	17/08/2018 14:08
Date Of Accident	01/02/2018 11:45
Exact Location Of Accident	CARPARK AT SUNGEI KADUT FOOD CENTRAL
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBA889Z
Insured/Policyholder	
Name Of Registered Owner	KWONG ANN ALUMINIUM PTE LTD
Co Reg No	198801736H
Email Address	KWONGANN.ALUM@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-90099810

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	
Cover Note Number	

Driver

Name of Driver	WONG FOO HONG
NRIC No	S0132349J
Date Of Birth	27/03/1952
Occupation	OUTDOOR
Date Of Driving Pass	19/06/1973
Driving Experience	44 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90099810
Fax Number	
Contact Number	
EEmail Address	KWONGANN.ALUM@HOTMAIL.COM

Address	BLK 147 RIVERVALE CRESCENT #11-26
Postcode	540147
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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)	3
Passenger 1	NAME: : KOH KIM HOE GENDER: : MALE
Passenger 2	NAME: : YEE KOON LENG 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

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	SHC831H
Vehicle Make/Model/Colour	MERCEDES-BENZ
Details Of Properties	C/O CITYCAB PTE LTD
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

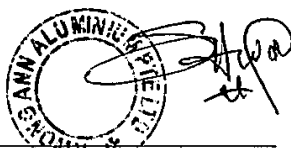
SKETCH PLAN

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8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

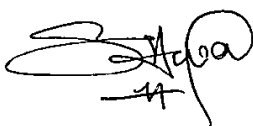
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

17 AUG 2018

14:08 hrs



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

Date & Time:

17 AUG 2018

14:08 hrs

Reporting Centre Personnel's Signature

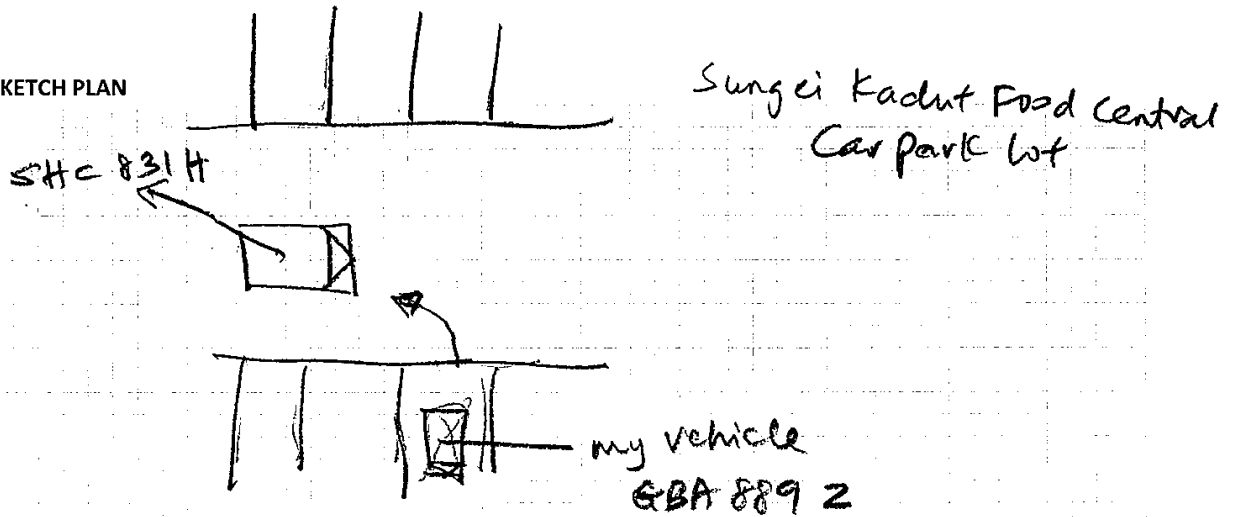
Name:

Poh Kwee Choo

NRIC/FIN No.:

S6840583A

SKETCH PLAN

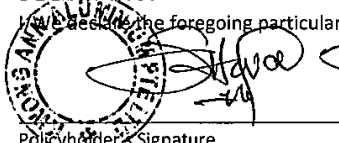


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

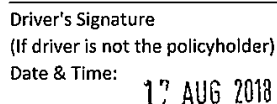
The incident happened on 01/02/2018 around 11:45pm.
 I was reversing my vehicle out from carpark lot.
 I didn't know the vehicle SHC831H was waiting at
 that time. because I have checked my rear mirror, there
 wasn't any vehicle that why I want to reverse out
 slowly from the car park lot. Then, my vehicle hit onto
 his front portion. During that time, the vehicle
 SHC 831 H didn't want me to stop.

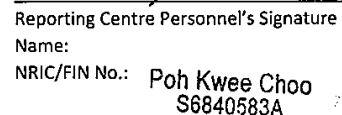
DECLARATION

I have declared the foregoing particulars are true in every respect.


 Policyholder's Signature

Date & Time: 17 AUG 2018


 Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 17 AUG 2018


 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.: Poh Kwee Choo
 S6840583A

DRIVER'S NRIC & DRIVING LICENCE Pg. 1


REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0132349J




Name
WONG FOO HONG
黄富康
Race
CHINESE
Date of Birth
27-03-1952
Sex
M
Country of Birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S0132349J
Name:
WONG FOO HONG
Birth Date: 27 Mar 1952
Issue Date: 29 Nov 2003



NRIC No. S0132349J




Blood Group O+ Date of Issue 03-05-1994

Address
APT BLK 147 RIVERVALE CRESCENT #11-26
SINGAPORE 540147
No: S0132349J Date: 03-03-1999 No: 2862071

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

	PASS DATE
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	19 Jun 1973

NP 428A



Licence No: S0132349J

Scene Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



CHASSIS NUMBER

