### 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 witholding 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	22/02/2018 10:08			
Date Of Accident	21/02/2018 18:15			
Exact Location Of Accident	COMMONWEALTH AVENUE WEST TOWARDS CLEMENTI ROAD			
Country/State of Loss	SINGAPORE			
DETAILS OF OWN VEHICLE				
Vehicle Registration Number	SJS4693E			
Insured/Policyholder				
Name Of Registered Owner	GOH LEE SUAN, FIONA			
NRIC No	S7938427E			
Email Address	FIONAGOH7@GMAIL.COM			
Mobile Phone No	(LOCAL) +65-97885416			
Alternative Phone No	OTHERS-97885416			
Vehicle Particulars				
Manufacturer	HONDA			
Model	FIT			
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	S 27941616 SMA			
Cover Note Number				
Driver				

Name of Driver GOH LEE SUAN, FIONA

NRIC No S7938427E Date Of Birth 07/12/1979 Occupation **INDOOR Date Of Driving Pass** 20/11/2003

**Driving Experience** 14 YEARS AND 3 MONTHS

Gender **FEMALE** 

Mobile Number (LOCAL) +65-97885416

Fax Number

OTHERS-97885416 Contact Number

**EMail Address** FIONAGOH7@GMAIL.COM Address BLK 28A DOVER CRESCENT

#09-05 131028

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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 SIDE SWIPE
Weather Conditions CLEAR
Road Surface DRY

#### Other Information

Postcode

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)

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

#### **Details of Police Action**

Was the accident reported to the police?

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 SKF6660T Vehicle Make/Model/Colour B.M.W 523I

**Details Of Properties** 

Vehicle Category PRIVATE CAR
Name of Driver CHUA POH TECK

NRIC/Passport Number S7100627A Contact Number 92991283

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Sketch Plan

#### SKETCH PLAN

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  Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by
  interested parties.
- By the lodgment 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' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - 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:

22 Feb 2018

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

Date & Time:

Reporting Centre Personnel's Signature

NRIC/EIN No -

## **Accident Sketch Plan**

SKETCH PLAN COMMONONW	RALTICE ANDWARE WAS	7 JOHARDS	CHMMM1 ROAD
A) SJS 4693			
B) SKF 6660			
DESCRIBE CIRCUMSTANCES OF	THE ACCIDENT		
Accident Apple place	DI GIL DATA SE SE	1 10 -	(C) (2) 1 V (C) (2)
dights and then when check that the left indeed clear and two	21 Feb 2018 at about 1 the traffic moved, A lo lane is clear before the coars behind we had lane I was trying to	oked at my le anging lane the successfully than	left lane pros
	on my left was clear l	how deathing a	latt old and
and my minor) -	made the lane change	in Ar 4 sun	Condition to land
change , a black Bu	w SKF 6660T rushe	d from behind	are and barded
the front 1884 10/1	er ob my car's bumps	r. I word th	e Car knock My
CAC.	Mat and	[Mm]	ediately
	6660T BMW did no	1 1	all after knocking
my car. In tact, it	picked up spread an	id arouse on	the a few minutes.
	that there was a too	ci-stand near	Shigapor Polytechnic
Chear the actident s	ite) where we rould	Stop to assen	o damage to the
cars. He only stopped h	1	9 signeded him	to stop by flashing my endights
Accident took	lace out the traffic	junction outsid	e along streappe
poly technic at Common	weath Avenue west	Calon to mrt	tracks be below)
and driver of SEF 66 thering right to Clement Road the		Charletti Are	2 (from commonweather Ave 2), deriving the
a few rejectes minutes	after the accident.	D-' 1 1	to be in a hurry
DECLARATION (and Saul  //We declare the foregoing particula	he needed to go soon o	11	ortacks and taking photos or
A vie deciate the foregoing particula	is are true in every respect.	0.00	my car:
live		ner	22/02/2018
Policyholder's Sgnature	Driver's Signature	Reporting Co	entre Personnyl's Signature
Date & Time: 22 Feb 2018	(If driver is not the policyholder) Date & Time:	Name: NRIC/FIN No	Proli anthon



























