

## 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	14/02/2018 14:43
Date Of Accident	14/02/2018 09:20
Exact Location Of Accident	X JUNCTION OF MERINA BOULEVARD AND SHEARES AVE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKT1098B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN YEW HOCK
NRIC No	S1030303F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-82180671
Alternative Phone No	OFFICE-82180671

### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	A180-1.7 (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	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA290745
Cover Note Number	

### Driver

Name of Driver	TAN YONGQIANG ANDY
NRIC No	S8242334F
Date Of Birth	14/12/1982
Occupation	INDOOR
Date Of Driving Pass	13/08/2001
Driving Experience	16 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92772179
Fax Number	
Contact Number	
Email Address	GAULTAN@HOTMAIL.COM

Address	BLK 275 TAMPINES ST. 22#10-70
Postcode	520275
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	PARENT
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	CHAIN COLLISION
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)	2
Passenger 1	NAME: : TAN YEW HOCK 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

REFER TO ATTACHED

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	NOT SUBMITTED
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC8689A
Vehicle Make/Model/Colour	COMFORT TAXI
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	YEO YEOK CHEE
NRIC/Passport Number	S1109015Z
Contact Number	97557567
Address	BLK257 KIM KEAT AVE#06-56
Postcode	310257
Insurance Company Name	MS FIRST CAPITAL INSURANCE LTD
Nature Of Damage	

No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJG6641E
Vehicle Make/Model/Colour	TOYOTA BLUE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TERENCE SAMMY SOON
NRIC/Passport Number	S6878992C
Contact Number	98320962
Address	BLK282 TAMPINES ST 22#06-294
Postcode	520282
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, managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, *etc.*
  - (ii) for complying with requirements under any regulations, laws or court orders.

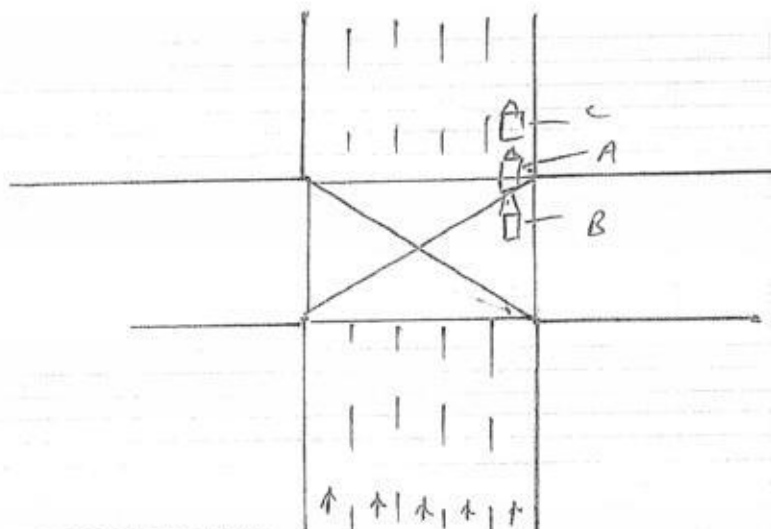
Policyholder's Signature  
Date & Time

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

Reporting Centre Person.  
Name:  
NRIC/FIN No.:

# Sketch Plan Pg. 2

SKETCH PLAN



A: SKT 1098 B  
B: SHC 8689 A  
C: SJG 6641 E

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving with a safe distance from the car in front of me (SJG 6641 E) and crossed the traffic junction with green light. Halfway across the junction, the front car stopped and I stopped too. Taxi behind did not stop and drove straight into my rear at speed causing my car to lurch forward and hit the car in front.

## DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

*[Signature]*  
14/02/18 11:00am

Policyholder's Signature  
Date & Time

*[Signature]*  
14/02/18 11:00am

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

*[Signature]* 14/2/18  
Reporting Centre Person  
Name:  
NRIC/FIN No.: