

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	20/03/2018 10:53
Date Of Accident	22/08/2017 10:15
Exact Location Of Accident	AT 160 SIN MING DR,SIN MING AUTOCITY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YN88C
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Insured/Policyholder

Name Of Registered Owner	TROPIC PLANNERS & LANDSCAPE PTE LTD
Co Reg No	200210768H
Email Address	KAYCHAICHUAN@TROPICPLANNERS.COM.SG
Mobile Phone No	(LOCAL) +65-96960795
Alternative Phone No	OFFICE-96960795

Vehicle Particulars

Manufacturer	ISUZU
Model	LORRY
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5083849213
Cover Note Number	

Driver

Name of Driver	SUM CHEE CHONG
NRIC No	S0158630J
Date Of Birth	26/10/1953
Occupation	OUTDOOR
Date Of Driving Pass	07/01/1980
Driving Experience	37 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96960795
Fax Number	
Contact Number	OTHERS-96960795
EEmail Address	KAYCHAICHUAN@TROPICPLANNERS.COM.SG

Address	64 TOH YI DRIVE
Postcode	596539
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	NO 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	1
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.	NO
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

PLEASE REFER TO SKETCH AND ATTACHMENT

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

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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:

San An Chong

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

20/03/2018
[Signature]
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 02/09/2017 AT 13:04HRS I CAME TO TOAC BUT I
 MISSED A MAKE AN ACCIDENT REPORT & ON 09/03/2018
 MY COMPANY RECEIVED A LETTER SAYING THAT I HAD
 ANOTHER ACCIDENT ON THE SAME DATE & TIME
 WHICH I DID NOT NOTICE FIRST REPORT IS ABOUT THE
 CAR PARK BARRIER & NOW THE CARPARK BARRIER
 THAT ACH

DECLARATION

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



Policyholder's Signature
 Date & Time:

Sam Chai Choy

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

20/03/2018

Reporting Centre Personnel's Signature

Name:
 NRIC/FIN No.:

Paul Loh

Sketch Plan #3



rsbm

From: Thiri <thiri@tropicplanners.com.sg>
Sent: Monday, 19 March, 2018 12:34 PM
To: rsbm
Subject: Re: email address

Dear Rosli,

I have attached a portion of the email that I have received to indicate that an additional report is required.
Regards,
Thiri

Hi Kay,

Your email has been noted.

The above accident report is for the barrier.

The letter dated 09 Mar 2018 is for claim no.: MT/0983978

This is for another accident and an antenna was damage.

Please get driver to file another report for antenna.

We are not able to investigate this claim as you've not reported the accident.

It is a regulation by the General Insurance Association that all accidents must be reported within 24hrs or by the next working day. The same is also stated in the Terms & Conditions of your policy.

You can make a report at any of our Accident Reporting Centres, which can be found in this link -

<http://www.income.com.sg/claims/motor-insurance/motor-claim>

Do note that the driver and the said vehicle must be present for the reporting.

Kindly report the accident by 23 March 2018.

Regards,

Deborah Loo

Executive

Motor Insurance

www.income.com.sg

Sent from my iPhone

On 19 Mar 2018, at 12:22 PM, rsbm <rsbm@lkkauto.com> wrote:

Hi

Thanks & Best Regards,

ROSLI WAHAB

NACS Bukit Merah

Tel: 6898 0055

Fax: 6271 8802

Email: rsbm@lkkauto.com

Accident Photo



Accident Photo



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