

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	27/03/2018 09:49
Date Of Accident	26/03/2018 07:10
Exact Location Of Accident	PUNGGOL RD BLK292 CARPARK ROUNABOUT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	CB6337T
Insured/Policyholder	
Name Of Registered Owner	HH COACH BUS
Co Reg No	52925026L
Email Address	HUPHOECOACH2@HOTMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-96881679

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE 3.0DX A
Exact Purpose for which vehicle was being used at time of accident	WORK
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	BUS

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	DMB1SN1608331802
Cover Note Number	

Driver

Name of Driver	LIM YEW KHIANG
NRIC No	S1627039C
Date Of Birth	11/05/1964
Occupation	OUTDOOR
Date Of Driving Pass	07/02/1985
Driving Experience	33 YEARS AND 1 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-96881679
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLOCK 148 WOODLANDS STREET 13 #11-839
Postcode	730148
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 - HEAD TO REAR
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

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

ON 26/3/2018 AT ABOUT 0710HRS, I WAS DRIVING DOWN THE SLOPE OF THE ROUNDABOUT OF BLOCK 292 CARPARK TO EXIT. ACCIDENTALLY MY VEHICLE A(CB6337T) HIT THE TAXI B(SHD4255P) SLIGHTLY ON REAR LEFT HAND SIDE. NO DAMAGE, NO INJURY FOR BOTH VEHICLES.

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	SHD4255P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	GOH YEOW KHENG (WU YAOQING)
NRIC/Passport Number	S7720143B
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident 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.

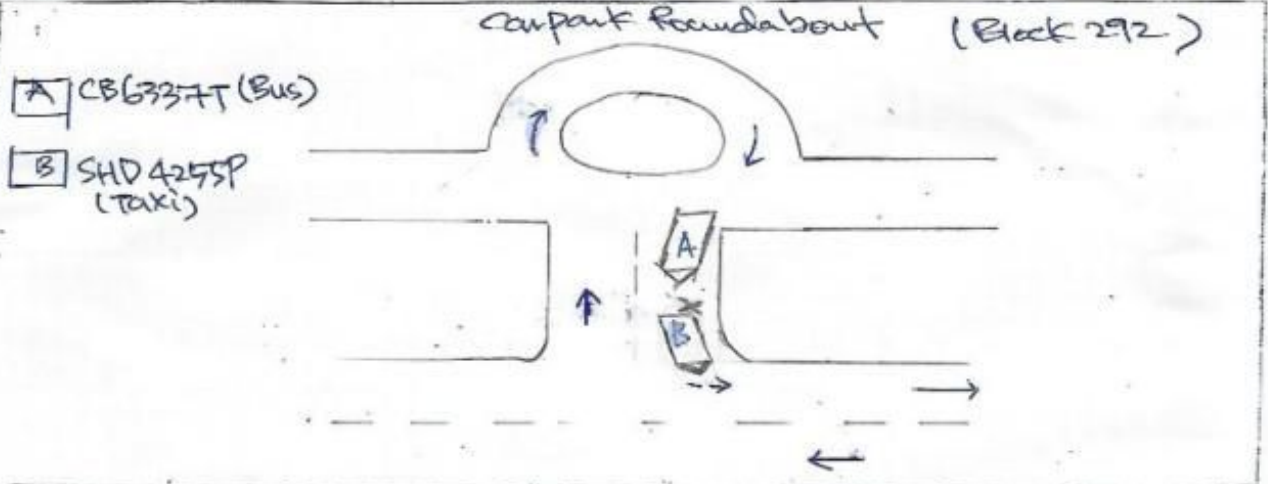

Policyholder's Signature
Date & Time: 26/3/18 16:15hrs


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


Reporting Centre Personnel's Signature
Name: Cassandra
NRIC/FIN No: 63229391W

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 26/3/2018 at about 0710hrs, I was driving down the slope of the roundabout of Block 292 carpark to exit. Accidentally my vehicle A (CB6337T) hit the taxi B (SHD 4255P) slightly on rear left hand side. No damage, no injury for both vehicles.

DECLARATION

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

Policyholder's Signature
Date & Time:



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

Reporting Centre Personnel's Signature
Name: Cassandra
NRIC/FIN No.: 63229391W



Identification Card

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1627039C



Name
LIM YEW KHIANG



林友娟

Race
CHINESE

Date of Birth
11-05-1964

Sex
F

Country of Birth
SINGAPORE

S1627039C

Identification Card

3023031



NRIC No S1627039C

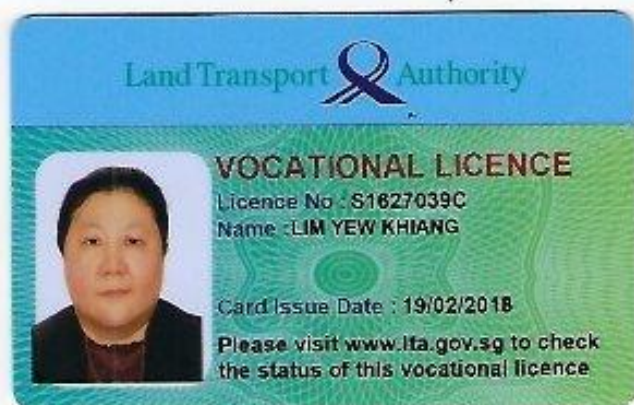


Blood Group A+ Date of issue 04-05-1998

Address
APT BLK 148 WOODLANDS STREET 13 #11-839
SINGAPORE 730148

NRIC No: S1627039C Date: 31-03-2004 No: 4878684

Driving License



Driving License

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
13	PRIVATE HIRE CAR VL	19/02/2018
03	BUS VL	08/12/1997
04	BUS ATTENDANT	08/12/1997

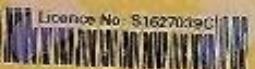


YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(S)

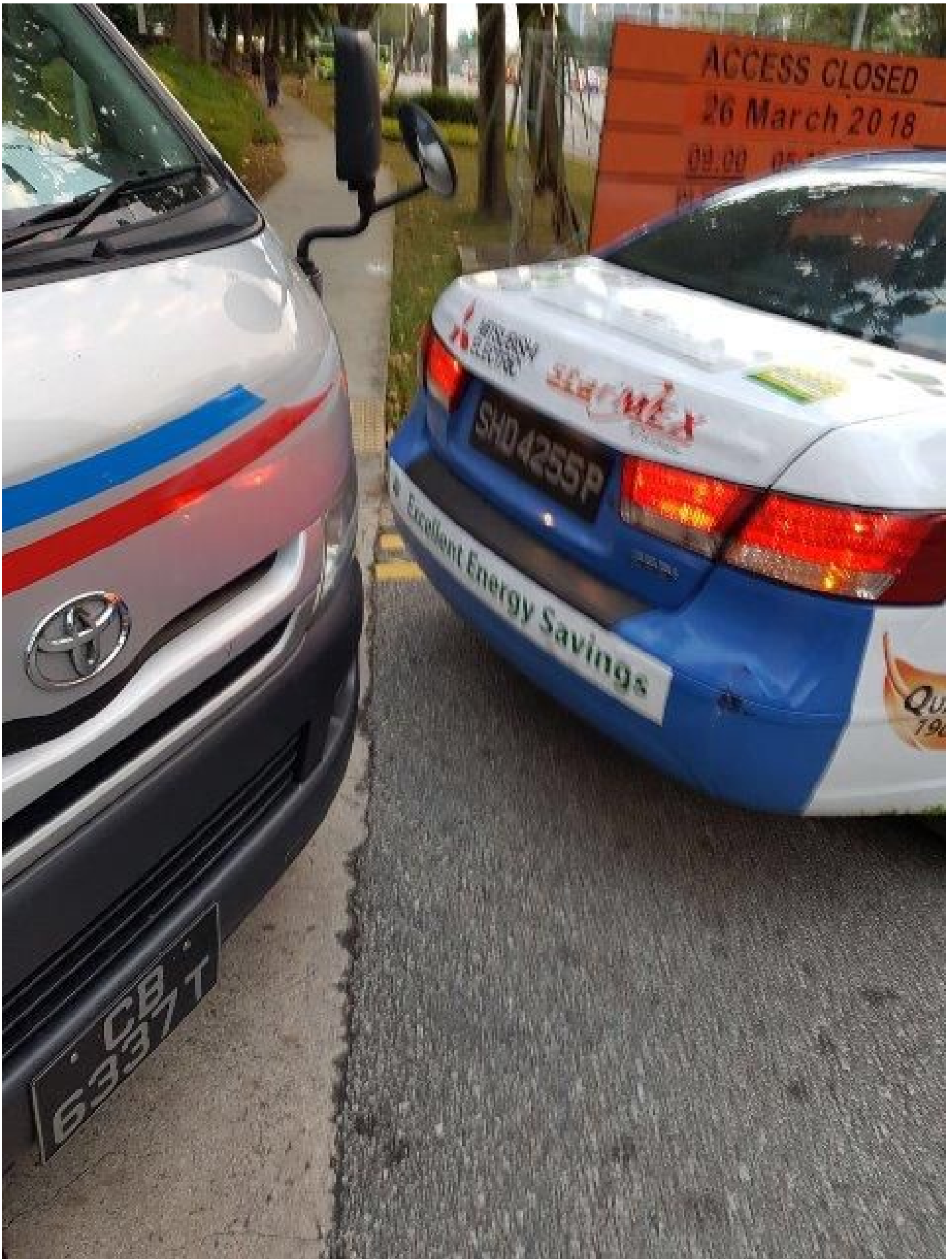
Class	Description	PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	07 Feb 1986

NP 427A

License No: S1627039C



Scene Photo



Scene Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

