

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	04/04/2018 17:31
Date Of Accident	04/04/2018 08:50
Exact Location Of Accident	WAYANG SATU FLYOVER (AFTER ERP GANTRY)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGZ1749Y
Insured/Policyholder	
Name Of Registered Owner	CHUA GEK TIAN
NRIC No	S1405411A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98373770
Alternative Phone No	OFFICE-98373770

Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS-1.5 E (A)
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5032318910-09
Cover Note Number	

Driver

Name of Driver	RENNIE TOH QIAN YU
NRIC No	S9609488D
Date Of Birth	12/03/1996
Occupation	INDOOR
Date Of Driving Pass	22/01/2015
Driving Experience	3 YEARS AND 2 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98373770
Fax Number	
Contact Number	
Email Address	RENNIETOH1996@GMAIL.COM

Address	53 HUME AVENUE #09-03
Postcode	598751
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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	5
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)	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

ACCORDING TO VEHICLE D (SGN6948U), VEHICLE E (UNKNOWN) HAD JAMMED HIS BRAKE PRETTY HARD, WHICH CAUSED HER TO BRAKE HARD AND CAME TO A STOP. AFTER SEEING THE FRONT SITUATION, I STARTED TO BRAKE AND CAME TO A STOP. AFTERWHICH, I SAW VEHICLE B (SLF2382K) THROUGH MY REAR MIRROR THAT HE HAD SWIRLED. BUT EVENTUALLY CAME TO A STOP. HOWEVER, VEHICLE C (SFT582K) HAD SMASHED INTO MY CAR (SGZ1749Y) AND SO THE FORCE HAD PUSHED MY CAR FORWARD AND KNOCKED INTO VEHICLE D.

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	SLF2382K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	DAMON SEOW WEI CONG
NRIC/Passport Number	S8209925E
Contact Number	98369829
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SFT582K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	YVONNE GOH PEI YI
NRIC/Passport Number	S8221788F
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SGN6948U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	AUDREY CHAN
NRIC/Passport Number	S9715995E
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number	UNKNOWN
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

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:

Ramfay
Driver's Signature
(If driver is not the policyholder)
Date & Time: 04/04/2018, 4:24 PM


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

Sketch Plan Pg. 2

SKETCH PLAN

WAYANG SATU FLYOVER (AFTER ERP GANTRY)

A: SGZ1749Y

B: SLF 2382K

C: SFTS82K

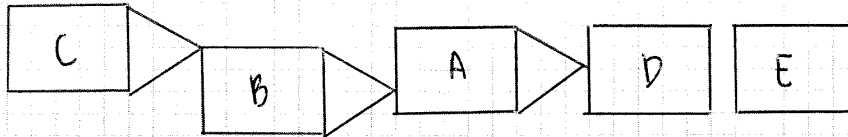
D: SGN 6948U

E: UNKNOWN

3RD LANE

2ND LANE

1st LANE



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ACCORDING TO SGN 6948U (2ND CAR), THE UNKNOWN (1ST CAR) HAD JAMMED HIS BRAKE
PRETTY HARD, WHICH CAUSED HER TO BRAKE HARD AND CAME TO A STOP. AFTER SEEING THE
THE FRONT SITUATION, I STARTED TO BRAKE AND CAME TO A STOP. AFTERWHICH, I SAW
THE SLF 2382K (4TH CAR) THROUGH MY REAR MIRROR THAT HE HAD SWIRLED. BUT EVENTUALLY
CAME TO A STOP. HOWEVER, THE SFTS82K (5TH CAR) HAD SMASHED RIGHT INTO THE 4TH CAR,
THIS CAUSED A CHAIN COLLISION. THUS, THE 4TH CAR HAD SMASHED INTO MY CAR (3RD CAR)
AND SO THE FORCE HAD PUSHED MY CAR FORWARD AND KNOCKED INTO THE 2ND CAR.

DECLARATION

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

Policyholder's Signature

Date & Time:

Driver's Signature

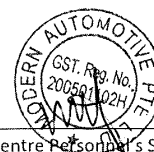
(If driver is not the policyholder)

Date & Time: 31/04/2018, 4:24 PM

Reporting Centre Person's Signature

Name:

NRIC/FIN No.:



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

