

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	08/05/2018 16:43
Date Of Accident	07/04/2018 02:05
Exact Location Of Accident	ENG NEO AVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKH6702X
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Insured/Policyholder

Name Of Registered Owner	ROSET LIMOUSINE SERVICES PTE LTD
Co Reg No	200706722Z
Email Address	KHIERTHII@ROSETAUTOCARE.COM
Mobile Phone No	(LOCAL) +65-81301183
Alternative Phone No	OFFICE-67471188

Vehicle Particulars

Manufacturer	TOYOTA
Model	CAMRY 2.4 AUTO ABS AIRBAG
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	REPORTING ONLY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	DMCFHQ17-000185
Cover Note Number	

Driver

Name of Driver	MOK SHAO XIAN
NRIC No	S8616424H
Date Of Birth	31/05/1986
Occupation	INDOOR
Date Of Driving Pass	22/05/2012
Driving Experience	5 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96781872
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	472 SEGAR ROAD #09-262
Postcode	670472
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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	
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
Passenger 1	NAME: : NA GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JURONG POLICE DIVISIONAL HQ ('J' DIVISION)
Police Station Address	ROAD: NO. 2 JURONG WEST AVENUE 5 , POSTCODE: 649482 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7910000 - FAX NO: 68965649
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO 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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJR6978B
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)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SFU903M
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

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7. 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:
 - (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:

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



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

SKETCH PLAN

C - ~~SFU~~ Woong Pui Yim (SFU 903M)
B - Chan Nai Tiang (SJR 6978B)
A - Mok Shao Xian (SFU 6702x)

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to police report.

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)

Reporting Centre Personnel's Signature
Name:



1 of 2

Report No. J/20180407/7015

Date/Time Report Made 07/04/2018 19:52	Vide Report No.	Station Diary No.		
Name Of Informant MOK SHAO XIAN	Address APT BLK 472 SEGAR ROAD #09-262 SINGAPORE 670472			
ID Type / ID No. NRIC NO / S8616424H	Contact No. Home/Office: Mobile: 96781827			
Nationality SINGAPORE CITIZEN	Email Address mokshaioxian@gmail.com			
Occupation ASSISTANT ENGINEER	Sex Male	Age 31	Date of Birth 31/05/1986	Race Chinese
Institution/School Name	Language English			
Date/Time Of Incident 07/04/2018 14:08 - 07/04/2018 14:17	Location Of Incident ENG NEO AVENUE			

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 07/04/2018 19:52
Officer In-Charge Of Case:	Classification Of Case:

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**SINGAPORE
POLICE FORCE**



J/20180407/7015

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20180407/7015

however due to poor judgement and lack of concentration, I accidentally hit the car in front of me (car plate no. SJR6978B belongs to Chan Nai Tiong). Due to the impact, Mr Chan's car hit another car in front (car plate no. SFU903M belongs to Woong Duey Lian). The passenger in my car is fine and no injuries.

Pictures of the damages were taken and I inform Chan Nai Tiong and Woong Duay Lian to make an insurance and police report. I have reported my car accident to Tribecar and will do accident reporting as soon as possible.

I have informed two drivers that it is my mistake due to carelessness.

This is all i have to report.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 07/04/2018 19:52
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8616424H



Name
MOK SHAO XIAN
莫少贤

Race
CHINESE

Date of birth
31-05-1986

Country/Place of birth
SINGAPORE

Sex
M



5616424H

REPUBLIC OF SINGAPORE DRIVING LICENCE


Licence Number: S8616424H
Name
MOK SHAO XIAN

Birth Date: 31 May 1986
Issue Date: 22 May 2012




002070402D

5606367



NRIC No. S8616424H



Date of issue
31-05-2016

Address
APT BLK 472 SEGAR ROAD
#09-262
SINGAPORE 670472


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

EFFECTIVE DATE
22 May 2012

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg

NP 428A

Licence No: S8616424H



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

