

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	02/04/2018 11:36
Date Of Accident	02/04/2018 07:50
Exact Location Of Accident	ALONG MULBERRY AVE JUNCTION OF JALAN WANGI
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJZ5255T
Insured/Policyholder	
Name Of Registered Owner	HU HUIXIN
NRIC No	S8328370Z
Email Address	XENNITHUS@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98221908
Alternative Phone No	OFFICE-98221908

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	C180-1.6 CGI (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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SI17V13539/ VPC / R03
Cover Note Number	

Driver

Name of Driver	HU HUIXIN
NRIC No	S8328370Z
Date Of Birth	19/08/1983
Occupation	INDOOR
Date Of Driving Pass	15/05/2002
Driving Experience	15 YEARS AND 10 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98221908
Fax Number	
Contact Number	OFFICE-98221908
Email Address	XENNITHUS@GMAIL.COM

Address	22 CHEMPAKA AVENUE SINGAPORE 349635
Postcode	
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	SIDE SWIPE
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)	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

GBH 1958 P WAS STATIONARY PARKED ALONG MULBERRY AVE. MY CAR SJZ 5255 T HAD TO TURN RIGHT FROM THE RIGHT SIDE OF GBH 1958 P AT LOW SPEED. SUDDENLY CAR GBH 1958 P DID NOT SIGNAL AND STARTED MOVING AND TURNED RIGHT. I STOPPED MY CAR WHEN I SAW THE OTHER CAR MOVING OFF. IT COLLIDED INTO MY CAR ON THE CAR LEFT SIDE. AT THE MATERIAL DATE AND TIME DRIVER OF GBH 1958 P WAS HOLDING ONTO A PHONE WITH HIS RIGHT HAND DURING THE COLLISION. NOBODY INJURY. THAT'S ALL

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	
Vehicle Make/Model/Colour	GBH1958P
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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:

02 APR 2018
10.00am

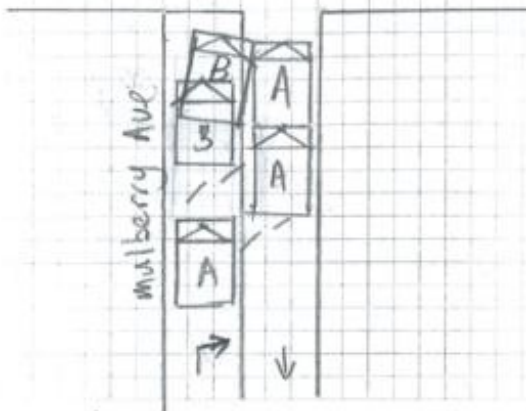
Driver's Signature
(If driver is not the policyholder)
Date & Time:


Reporting Centre Personnel's Signature
Name: Venus Lee
NRIC/FIN No.: S7988991A

Accident Sketch Plan

SKETCH PLAN

Isain Wangi



02.04.2018 @ 7.50am

A SJZ 5255 T

B GBH 1958 P

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

GBH 1958 P was stationary parked along mulberry Ave. my car
 at low speed
 SJZ 5255 T had to turn right from the right side of GBH 1958 P
 suddenly
 Car GBH 1958 P did not signal and started moving and turned
 I stopped my car when I saw the other car moving off.
 right. It collided into my car on the car left side. At the material
 date and time driver of GBH 1958 P was holding on to a phone
 with his right hand during the collision. Nobody injury. That's all.

DECLARATION

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

Policyholder's Signature

Date & Time: 02 APR 2018
 @ 1042

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: Venus Lee

NRIC/FIN No.: S7988991A

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MLTM18D43359 Vehicle Registration No: PJZ 52557
Name(as shown in NRIC) : Hu Hui Xin NRIC/FIN/Passport No : S89283702
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : 22 CHEMPAKA AVENUE Singapore(349635)
Contact (Tel) : 98221908 Mobile No. : 98221908
Email Address : XENNITHUS@gmail.com
Date of Accident : 02.04.2018 Time of Accident : 07:50am
Place of Accident : Along Mulberry Ave Junction of Jalan Wangi
Insurance Company: Liberty Insurance Pte Ltd

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

① I wish to amended my statement.


Policyholder / Driver's Signature
Date: 03 APR 2018


Reporting Centre Personnel's Signature
Name: Venus Lee
NRIC/FIN No.: S488991A
Date: 03 APR 2018