

## 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	03/05/2018 12:02
Date Of Accident	02/05/2018 18:30
Exact Location Of Accident	BRADDELL ROAD FILTER LANE BEFORE SP CLUB
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKA7722T
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LEE WEE HOWE
NRIC No	S9035521Z
Email Address	WHLLEE.AL@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90677943
Alternative Phone No	OTHERS-91072092

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	ELANTRA
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 58965964 QMY
Cover Note Number	

### Driver

Name of Driver	KHOO WEN XUAN
NRIC No	S9221643H
Date Of Birth	18/06/1992
Occupation	INDOOR
Date Of Driving Pass	03/11/2011
Driving Experience	6 YEARS AND 5 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90677943
Fax Number	
Contact Number	OTHERS-91072092
Email Address	WHLLEE.AL@GMAIL.COM

Address	BLK 329 CLEMENTI AVENUE 2 #05-240
Postcode	120329
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - GIRLFRIEND
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	SLIGHT DRIZZLING
Road Surface	SLIGHTLY WET

#### 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)	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 PLAN

#### 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	SJU1762T
Vehicle Make/Model/Colour	KIA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	YEO CHEE FOONG ,GLENN
NRIC/Passport Number	S8937621A
Contact Number	97599682
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

## Accident Sketch Plan

### SKETCH PLAN


#### IMPORTANT NOTICE

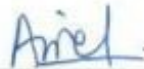
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#### 8. Consent under the Personal Data Protection Act (PDPA)

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.

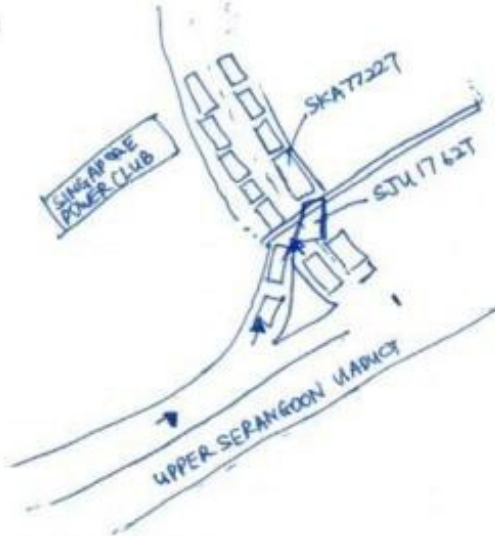
  
Policyholder's Signature  
Date & Time:

  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 3 MAY 2018  
11:58AM

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

# Accident Sketch Plan

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The skies were very clear and <sup>there</sup> ~~it~~ was only a very slight drizzle. Visibility is good.

It was very jam at the time of the accident. I was on the right lane, travelling at less than 10km/h. Many cars were trying to squeeze into the 2 main lanes from the filter lane. Noticed a grey matte Kia behind me that came from the filter lane. The line was barely moving, only a little. Just as I was about to move forward slightly, I have yet to lift my feet off the brake pedal, I heard a bang on the back. I immediately turned on my hazard lights and got down. The driver of the matte grey Kia got off his vehicle as well and immediately apologised to me. After looking at the damages <sup>to my back bumper</sup>, he told me that it isn't a serious issue and told me that I could just get a car paint marker to paint over the damaged areas. I told him that I would get my boyfriend (insured policy holder) to come down. We agreed to settle the issue privately, with a signed written note of both parties. The next day when we went down to Komoco Motors to get an official quote for the repair works, we were told that it requires 2 working days. Proposed to 3rd party vehicle owner to pay for a day of car rental but he was very reluctant and went on to insinuate ~~that~~ that the accident happened because my car rolled back at the time of the accident, which is different from what he initially said.

## 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: 3 MAY 2018  
11:58 AM

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

LETTER

This accident happened on 02/05/2018  
at address & time: Braddell Road, 6.45 PM

Between Driver A & B.

Driver A name & IC: Yeo, Chen Peang Eileen (S8937624)

Driver A vehicle number: STU1762


Driver B name & IC: KHOO WEN YUAN (S92216434)

Driver B vehicle number: SKA 7722T


Both Parties are not injured, no claims and reporting  
shall be made. This will be settled peacefully and


privately by both parties, Bear the full cost of Spraying by  
Agent - known, B14 Driver A (Rear Bumper Bump)

Driver A name and IC: Yeo, Chen Peang Eileen (S8937624)

Driver A Signature: 

Driver B name and IC: KHOO WEN YUAN (S92216434)

Driver B Signature: 

If any witness and IC: See Wee Heng S9255277  
witness signature: 

WAGO

02/05/2018  
Resli witnesses



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



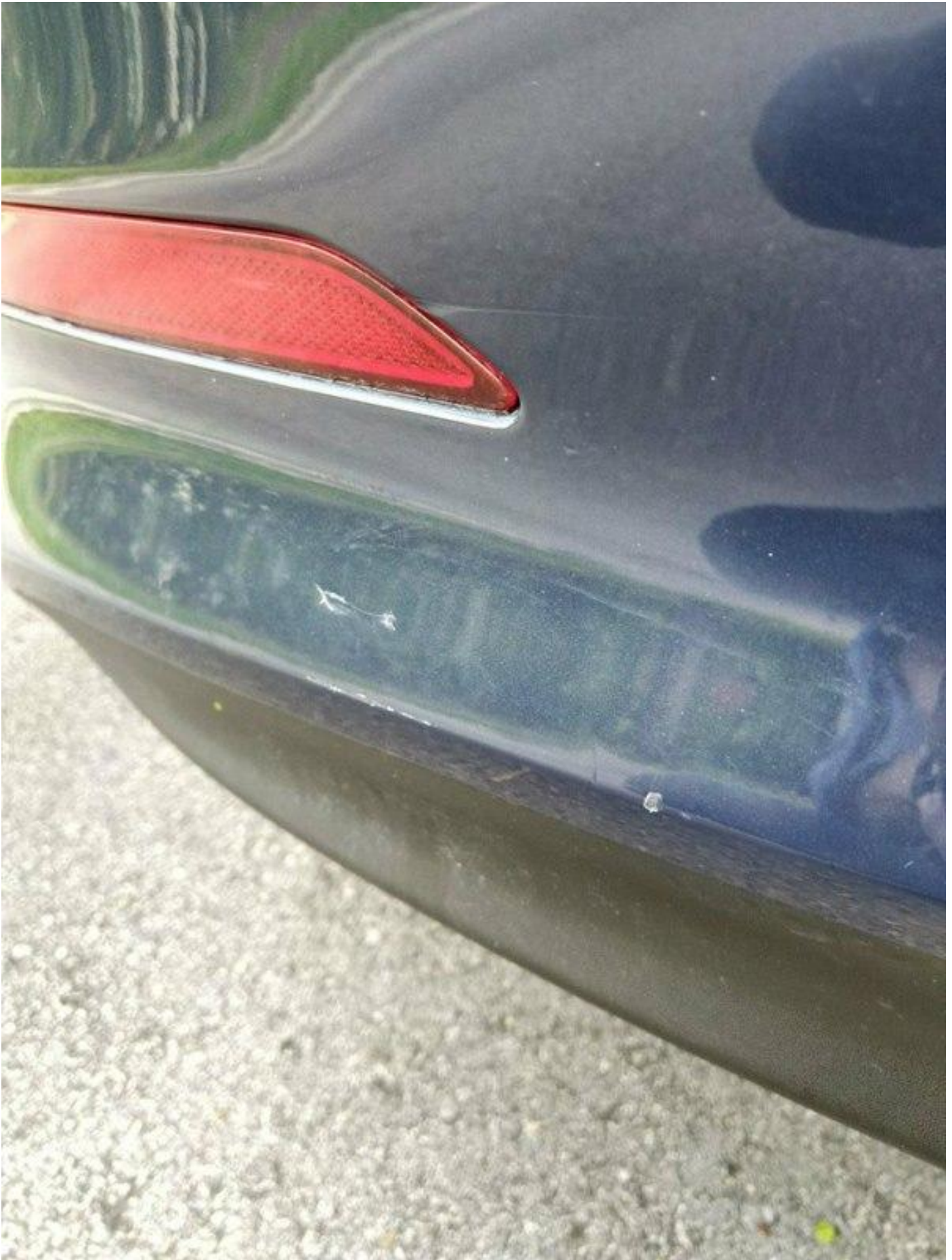


Accident Photo





Accident Photo



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