



## 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 14:24
Date Of Accident	08/05/2018 07:50
Exact Location Of Accident	SLIP RD AT COMMONWEALTH AVE WEST TO CLEMENTI AVE 4
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFF3201P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SEET LIN TZE(XUE LINGZHI)
NRIC No	S7347508B
Email Address	SEETLT@YAHOO.COM
Mobile Phone No	(LOCAL) +65-96286718
Alternative Phone No	OTHERS-96286718

### Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH-1.8 (A)
Exact Purpose for which vehicle was being used at time of accident	ON THE WAY TO WORK
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	5039896613-08
Cover Note Number	

### Driver

Name of Driver	SEET LIN TZE(XUE LINGZHI)
NRIC No	S7347508B
Date Of Birth	12/12/1973
Occupation	INDOOR
Date Of Driving Pass	30/11/1992
Driving Experience	25 YEARS AND 5 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96286718
Fax Number	
Contact Number	OTHERS-96286718
Email Address	SEETLT@YAHOO.COM



Address	121 HILLCREST ROAD
Postcode	288990
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)	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	SKD5918T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	DELSON
NRIC/Passport Number	
Contact Number	98232317
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

## SKETCH PLAN

### IMPORTANT NOTICE

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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: 8/5/18  
12pm

Driver's Signature

(If driver is not the policyholder)  
Date & Time:

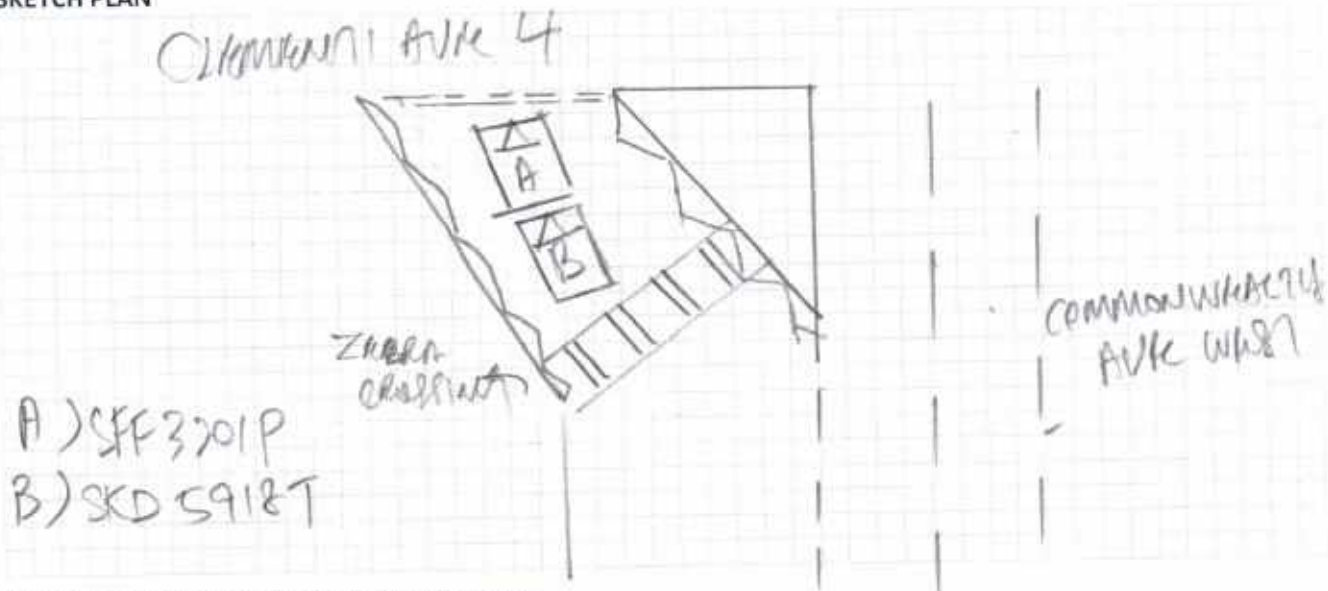
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

08/05/2018  
[Signature]

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was filtering out of slip road from Commonwealth Avenue West into Clementi Ave 4 when I heard a bang at the back of my car.

I pulled over to the side and saw a sedan car SKD5918T ~~hit~~ behind my car. That car had damage to his front bumper & left headlight. The driver Mr Nelson confirmed he was the driver who hit my car.

## DECLARATION

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

*Seong Joo Lee*

Policyholder's Signature

Date & Time: 8/5/18 12pm

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

*Resal*  
8/5/2018  
*Resal*



## Claim Handling

Accident MT/0993480

Policy No.	5039896613-08	Vehicle No.	SFF3201P	GST Registration No.	
Policyholder Name	SEET LIN TZE(XUE LINGZHI)			Policyholder NRIC	S73475088
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivO CLASSIC	Loading	0
Contact No.(Mobile)	96286718	Contact No.(Office)		Contact No.(Home)	
Email Address	seetr@yahoo.com	Special Remark		eCode	No
RTK	+ No Yes	TCA	+ No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	88	Private Hire	No

## Accident Details

Report Date	06/05/2018 15:09	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	06/05/2018	Time of Accident hh:mm	07:50	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	SLIP RD AT COMMONWEALTH AVE WEST TO CLEMENTI AVE 4				

## Benefit

## Excess

Own Damage Excess	500.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	500.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

## GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

## Policyholder Mailing Address

Address 1	121 HILLCREST ROAD	Address 2	SINGAPORE 288990	Address 3	
Address 4		Address Type	Singapore address	Post Code	288990
Unit No.		Related Policy Number	5039896613-08		

## OI Driver Info

Driver Name	SEET LIN TZE(XUE LINGZHI)	Driver Type	Main Driver	Driver DOB	42/12/1973
Unnamed driver Name		Driver NRIC	S73475088	Driving Experience	18
Register Date of Driver License	01/01/2000	Driver Age	44	Contact No.(Home)	
Contact No.(Mobile)		Contact No.(Office)		Address 1	
Address 1	121 HILLCREST ROAD	Address 2	SINGAPORE 288990	Address 3	
Address 4		Address Type	Singapore address	Post Code	288990
Unit No.					
Does he own a Singapore Registered car?	Yes + No	Driver Vehicle No.	SFF3201P	Driver Insurer Company	NTUC

## Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes + No
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## Modification History

Claim 001 New

Claim Type *	OD-MX	Insured Name	SEET LIN TZE(XUE LINGZHI)	Insured NRIC	S73475088
Contact No.(Mobile)	96286718	Contact No.(Home)	9663555	Contact No.(Office)	
Email Address	seetr@yahoo.com	OT Vehicle Number	SFF3201P	TP Vehicle Number	S6D5918T
Claim Description	SFF3201P / SKD5618T ON 6 May 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	GIA report	Received
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	06/05/2018 00:00
Date Registered	08/05/2018 15:18	Claim Close Date			
Report Taken By	ROSLE WAHAB				

Print Attachment

Save Submit

## Attachment

Accident No.	MT/0993480	Claim No.	001
Last Doc Received	Yes No	Upload Date	06/05/2018 15:19
Path *		Category *	Confidential Urgency *
Choose File No file chosen		Clear Please Select	NO Normal
Choose File No file chosen		Clear Please Select	NO Normal
Choose File No file chosen		Clear Please Select	NO Normal
Choose File No file chosen		Clear Please Select	NO Normal
Choose File No file chosen		Clear Please Select	NO Normal
Choose File No file chosen		Clear Please Select	NO Normal
Choose File No file chosen		Clear Please Select	NO Normal
Message Read			

Send Message Upload

## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent (CO)	Action
	NAC_BUKIT_MERAH_800676C NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH) on 08 May 2018 15:19	Photos	Normal	Photos 2018-5-8		Edit
	NAC_BUKIT_MERAH_800676C NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH) on 08 May 2018 15:19	Photos	Normal	Photos 2018-5-8		Edit
	NAC_BUKIT_MERAH_800676C NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH) on 08 May 2018 15:19	Photos	Normal	Photos 2018-5-8		Edit

	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 15:18	Photos	Normal	Photos 2018-5-8	<a href="#">Edit</a>
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 15:18	Photos	Normal	Photos 2018-5-8	<a href="#">Edit</a>
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 15:18	Photos	Normal	Photos 2018-5-8	<a href="#">Edit</a>
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 15:18	Photos	Normal	Photos 2018-5-8	<a href="#">Edit</a>
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	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 15:18	Photos	Normal	Photos 2018-5-8	<a href="#">Edit</a>
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 15:18	Photos	Normal	Photos 2018-5-8	<a href="#">Edit</a>
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 15:18	Photos	Normal	Photos 2018-5-8	<a href="#">Edit</a>
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 15:18	Photos	Normal	Photos 2018-5-8	<a href="#">Edit</a>
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 15:18	SAS	Normal	SAS 2018-5-8	<a href="#">Edit</a>
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 15:18	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-5-8	<a href="#">Edit</a>

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
		<a href="#">Display in New Window</a>	<a href="#">Scan and uploading</a>	

# ACCIDENT STATEMENT

ACCIDENT DATE: 8 / 5 / 2018 (DD/MM/YYYY), TIME: 7 : 50 (HH:MM)

LOCATION: Slip road from Commonwealth Ave West to Clementi Ave 4

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SFF3201P  
 b) INSURANCE COMPANY: NTUC  
 c) POLICY NUMBER: 5039896613-08  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: TOYOTA WISH 1.8  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: on way to work  
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) (NO)  
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

## 2. INSURED / POLICY HOLDER

- a) NAME: SEET LIN TZE (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S7347508B CONTACT: 96286718  
 c) ADDRESS: 121 HILLCREST ROAD  
SC288990

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

- a) NAME: AS ABOVE (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
 c) ADDRESS: \_\_\_\_\_

\*d) DATE OF BIRTH: 12 / 12 / 1973 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 1992

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO) (NO)  
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: OWNER

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS) \_\_\_\_\_

b) ROAD SURFACE: (DRY / WET / OTHERS) \_\_\_\_\_

6. WAS ANYBODY INJURED (YES / NO) (NO)

7. a) REPORTED TO POLICE (YES / NO) (NO)

IF YES, PLEASE STATE WHICH POLICE STATION: \_\_\_\_\_

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SKD5918T MODEL: \_\_\_\_\_  
 b) DRIVER'S NAME: DELSON  
 c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: 98232317

## 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
 e) DRIVER'S NAME: \_\_\_\_\_  
 f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

Email = seetlt@yahoo.com

fax =



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7347508B



SEET LIN TZE  
(XUE LINGZHI)

薛灵芝

Race

CHINESE

Date of Birth

12-12-1973

Sex

F

Country of Birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S7347508B

Name:

SEET LIN TZE  
(XUE LINGZHI)

Birth Date: 12 Dec 1973

Issue Date: 05 Nov 2003



1839520



NRIC No: S7347508B



Blood Group: Date of Issue

A+ 29-03-1994

121 HILLCREST ROAD  
SINGAPORE 288990

NRIC No: S7347508B

Date: 05-11-2001 (R) No: 4139118

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

PASS DATE

30 Nov 1997

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms



Licence No: S7347508B

NP 428A

Hello, NAC\_BUKIT\_MERAH\_800676

[Change Language](#) [Change Password](#) [Log Out](#)[My Desktop](#)[Notice of Loss](#)

## Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="08/05/2018 12:06"/>						
Vehicle No. (For Motor)	<input type="text" value="SFF3201P"/>								
<input type="button" value="Search"/>									
Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5039896613-08	SEET LIN TZE (XUE LINGZHI)	573475088	GPC	drive CLASSIC	SFF3201P	SFF3201P	18/11/2017	17/11/2018
<input type="button" value="Continue"/>									