

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	14/05/2018 15:09
Date Of Accident	13/05/2018 11:30
Exact Location Of Accident	ECP (CHANGI AIRPORT)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF2591Z
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Insured/Policyholder

Name Of Registered Owner	U-HUP ROLLER SHUTTER & ENGINEERING WORKS
Co Reg No	52967632W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-89999999

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E250 CGI 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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5093122676
Cover Note Number	

Driver

Name of Driver	QUEK SWEE ANN
NRIC No	S1761426F
Date Of Birth	11/08/1965
Occupation	INDOOR
Date Of Driving Pass	24/02/1983
Driving Experience	35 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91010588
Fax Number	
Contact Number	OFFICE-91010588
EEmail Address	NOEMAIL

Address	BLK 506 BEDOK NORTH AVENUE 3 #07-323
Postcode	460506
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 - CHANGE/CROSS LANE
Weather Conditions	RAINING
Road Surface	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?	
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)	4
Passenger 1	NAME: : - GENDER: : FEMALE
Passenger 2	NAME: : - GENDER: : FEMALE
Passenger 3	NAME: : - GENDER: : MALE

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

REFER TO STATEMENT.

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	SKE8Y
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)

Accident 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:

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

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

Accident Sketch Plan

SKETCH PLAN

ECP



DOA: 13/5/18

A: SLF 25912

B: SKE 84


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving straight along ECP, suddenly veh B
cut into my lane & collided onto my veh rear
LH portion

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:


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

BIZ CHECK

SINGAPORE
COMMERCIAL
CREDIT BUREAU

REQUEST CRITERIA	
(You have requested to search on the following)	
Date of Request:	28/03/2018 20:56:30
Requested Company Name:	U-HUP ROLLER SHUTTER & ENGINEERING WORKS
Requested Registration No.:	52967632W
Client's Account Reference:	-

ACCOUNTING AND CORPORATE REGULATORY AUTHORITY
BUSINESS PROFILE INFORMATION

SEARCH RECORD	
Company Name:	U-HUP ROLLER SHUTTER & ENGINEERING WORKS
Registration No.:	52967632W

REGISTRY	
Registration Date:	24/04/2002
Name Effective Date:	24/04/2002
Company Type/Constitution:	Partnership
Registered Address:	1037 EUNOS AVENUE 4, 01 - 77 - 409791 SINGAPORE
Change Address Date:	10/09/2007
Company Status:	LIVE
Status Effective Date:	26/02/2016
Registered Activities:	1. 25111 - MANUFACTURE OF METAL DOORS, WINDOW AND DOOR FRAMES, GRILLES AND GRATINGS (-) 2. 41009 - BUILDING CONSTRUCTION N.E.C. (-)
Expiry Date:	24/04/2019
Renewal Date:	26/02/2016

CHANGE OF BUSINESS NAME	
Previous Name	Effective Date
Nil	

OFFICER(S)/ OWNER(S)					
Officer Name/ Address/ Change Address Date	Identity No./ PA Reg. No.	Position	Appointment Date	Cessation Date	Nationality/Country of Incorporation
JANET YEO CHWEE PING (JANET YANG CUIPING) 506 BEDOK NORTH AVENUE 3, 07 - 323 - 460506, SINGAPORE 08/03/2008	57233688G	OWNER	22/04/2002	-	SINGAPORE CITIZEN
NG HOCK AUN 742 TAMPINES STREET 72, 13 - 92 - 520742, SINGAPORE 14/07/2013	S7664085H	OWNER	30/11/2007	-	SINGAPORE CITIZEN

Acra

JANET YEO CHWEE PING (JANET YANG CUIPING) 506 BEDOK NORTH AVENUE 3 , 07 - 323 - 460506, SINGAPORE 08/03/2008	S7233688G	MANAGER	22/04/2002	03/01/2016	SINGAPORE CITIZEN
NG HOCK AUN 742 TAMPINES STREET 72 , 13 - 92 - 520742, SINGAPORE 14/07/2013	S7664085H	MANAGER	30/11/2007	03/01/2016	SINGAPORE CITIZEN

SEARCH BY FINANCIAL SECTORS

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2018	0	0	1	0	0	0	0	0	0	0	0	0
2017	0	0	0	0	0	0	0	0	0	1	0	0
2016	0	0	0	0	0	0	0	0	1	0	0	0

SEARCH BY NON-FINANCIAL SECTORS

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2018	0	0	1	0	0	0	0	0	0	0	0	0
2017	0	0	1	0	0	0	0	0	0	0	0	0
2016	0	0	0	0	0	0	0	4	1	0	0	0

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