

## 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 13:17
Date Of Accident	02/05/2018 09:45
Exact Location Of Accident	YIO CHU KANG RD TOWARDS CTE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLT9339S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SOH CHIEW TING
NRIC No	S7702321F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97479339
Alternative Phone No	OFFICE-97479339

### Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	TIGUAN R-LINE 2.0 TSI AT 5N22M9
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	PRIVATE CAR

### Insurance Company

Name of Insurance Company	AVIVA LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	10607485
Cover Note Number	

### Driver

Name of Driver	LOK KOK ENG
NRIC No	S7720994H
Date Of Birth	31/07/1977
Occupation	INDOOR
Date Of Driving Pass	17/01/1996
Driving Experience	22 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97479339
Fax Number	
Contact Number	OFFICE-97479339
EEmail Address	KOKENG31@GMAIL.COM

Address	6 SIN MING ROAD #03-02
Postcode	575585
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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	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

I was travelling along slip rd from YIO CHU KANG RD towards CTE/City when a car SKL6371X over taking my car on the left & was driving on the road shoulder, rear right of car SKL6371X hit onto my SLT9339S front left side. No injuries involved. That's all. (As in video footage given)

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	UPLOADED INTO AVIVA FILE ZILLA
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKL6371X
Vehicle Make/Model/Colour	MERCEDES BENZ/ E 250 BLUEEFFICIENCY (HID) / SILVER
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	OOI POH THIAM
NRIC/Passport Number	
Contact Number	90215688
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

## Sketch Plan

### SKETCH PLAN

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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.
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.

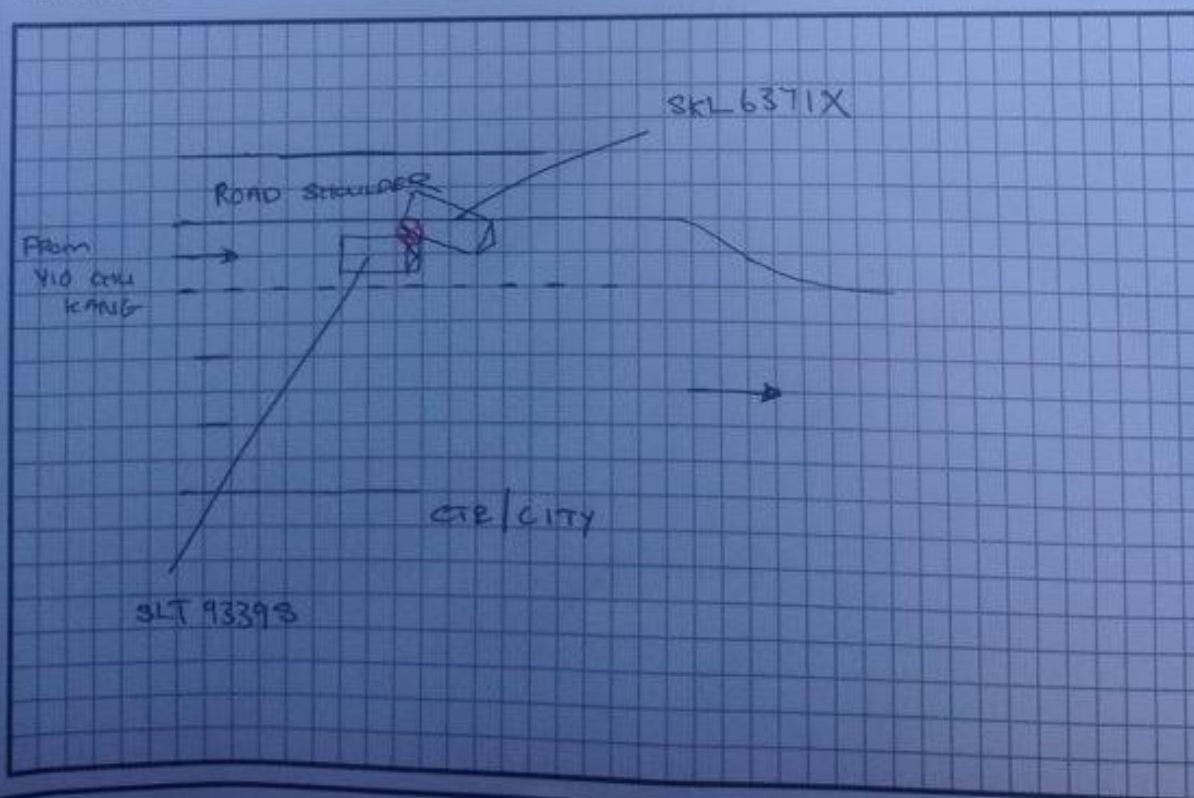
VERIFIED BY AJAX MARS  
REPORTING OFFICER  
MOHD FADZLY BIN ISMAIL

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre  
Personnel

#### Sketch Plan



**ACCIDENT STATEMENT (2000 characters)**

I was travelling along slip rd from YIO CHU KANG RD towards CTE/City when a car SKL6371X over taking my car on the left & was driving on the road shoulder, rear right of car SKL6371X hit onto my SLT9339S front left side. No injuries involved. That's all. (As in video footage given)

Taxi Voucher No.:

**DECLARATION**

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -  
MOHD FADZLY BIN ISMAIL

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

3 May 2018 12:40 pm

Date/Time:

3 May 2018 12:40 pm

**Accident Photo**



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Driving License

**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**

Licence Number: **S 7720994 H**  
Name: **LOK KOK ENG (LUO GUORONG)**

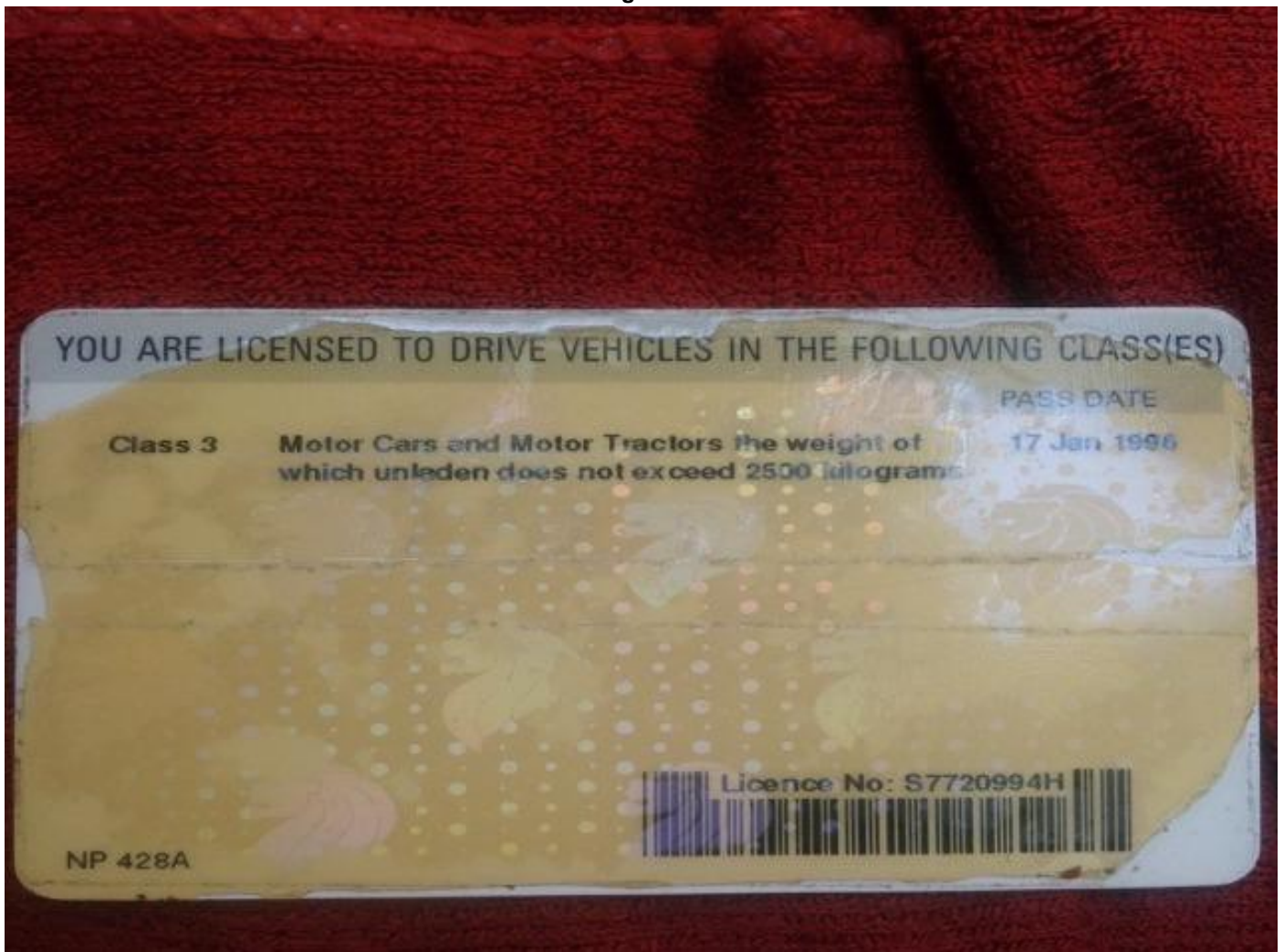
Birth Date: **31 Jul 1977**  
Issue Date: **31 Dec 2002**

**7000075696F**





Driving License





Identification Card

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7720994H



Name  
LOK KOK ENG  
(LUO GUORONG)  
骆 国 荣

Race  
CHINESE

Date of birth  
31-07-1977

Sex  
M

Country of birth  
SINGAPORE



Identification Card

4084093



NRIC No. S7720994H



Date of Issue  
13-08-2007

6 SIN MING ROAD #03-02  
SINGAPORE 575585

NRIC No: S7720994H      Date: 06/02/2015