

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	17/05/2018 14:57
Date Of Accident	16/05/2018 13:30
Exact Location Of Accident	ALONG BUKIT BATOK WEST AVENUE 8
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PA5859L
Insured/Policyholder	
Name Of Registered Owner	NG SAY CHOO
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96139838
Alternative Phone No	OFFICE-96139838

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMB1SN1802111800
Cover Note Number	

Driver

Name of Driver	DAVID SIM HAI CHEOK
NRIC No	S1421298A
Date Of Birth	19/09/1960
Occupation	OUTDOOR
Date Of Driving Pass	02/11/1982
Driving Experience	35 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96139838
Fax Number	
Contact Number	OTHERS-96139838
EEmail Address	NOEMAIL

Address	BLK 208 BOON LAY PLACE #09-169
Postcode	640208
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - MAJOR/MINOR RD
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)	2
Passenger 1	NAME: : BUS ATTENDANT GENDER: : FEMALE

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	SLF3592P
Vehicle Make/Model/Colour	MERCEDES BENZ
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MR.WONG
NRIC/Passport Number	
Contact Number	98427683
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

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.

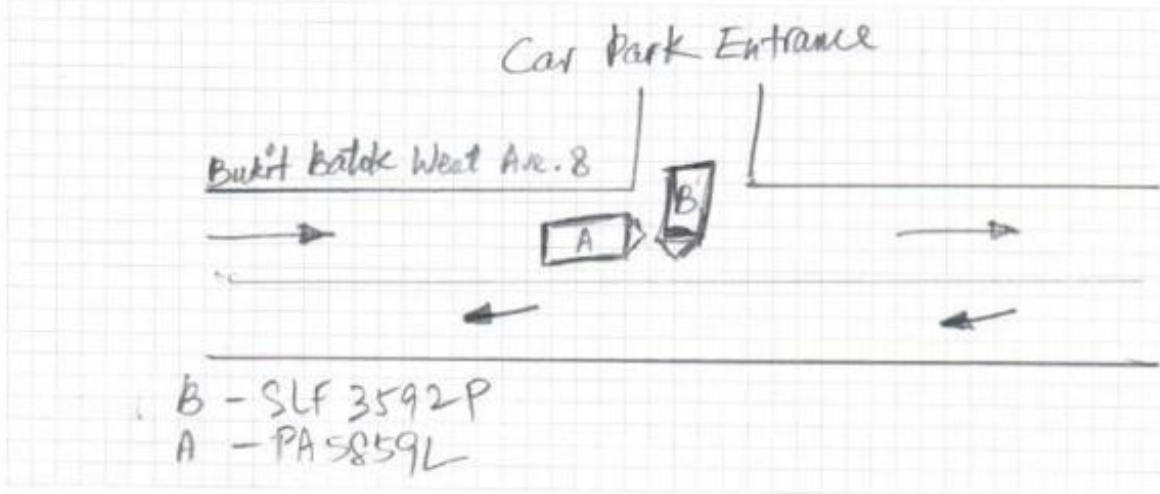
Policyholder's Signature
Date & Time:

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

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

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On Wed. 16 May 2018, I was driving Voc. Van PA 5859 L along Bt. Batok West Ave. 8 main road. Suddenly a dark grey Mercedes car driven by unknown Male Chinese man driving his mercedes car without stopping to give way to main road vehicles. I did horn the driver but it was too near to avoid a collision, even though I have applied the Emergency Brake. I has a female auntie passenger inside my Vocational Van which is also the bus Attendant. Due to the accident, the Voc. Van front left side, headlight, bumper, etc was damaged. That's all.

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.:

IGD/PMC Sketch/Report Form 2/3

Sketch Plan #3



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1421298A



Name
DAVID SIM HAI CHEOK
沈大偉
Race
CHINESE
Date of birth
19-09-1960 Sex
M
Country of birth
SINGAPORE


REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number S1421298A
Name
DAVID SIM HAI CHEOK
Birth Date 19 Sep 1960
Issue Date 09 Mar 2010

Land Transport Authority

VOCATIONAL LICENCE
Licence No. S1421298A
Name SIM HAI CHEOK DAVID
Issue Date 12/6/2012
Please visit www.lta.gov.sg to check the status of this vocational licence



4181430



NRIC No. S1421298A



Date of issue
17-01-2008


Address
APT BLK 208 BOON LAY PLACE
#09-169
SINGAPORE 640208

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS/E

Class	Description	Pass Date
Class 2B	Motorcycles <= 200 cc	06 Jun 1963
Class 2A	Motorcycles between 201 cc and 400 cc	06 Jun 1963
Class 3	Motor Cars < 2000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg	02 Nov 1962
Class 4	Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg	03 Jan 1964


Motor vehicles which are not constructed to carry load and the unladen weight < 725kg

Licence No. S1421298A



This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request, if found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
03	BUS VL	12/06/2012
04	BUS ATTENDANT	12/06/2012



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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