

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 11:49
Date Of Accident	13/05/2018 20:50
Exact Location Of Accident	DAIRY FARM ROAD VIA BKE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLK4576D
Insured/Policyholder	
Name Of Registered Owner	TEO MUI HENG
NRIC No	S1471779Z
Email Address	FRANKTEO50@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81259927
Alternative Phone No	OFFICE-81259927

Vehicle Particulars

Manufacturer	KIA
Model	FORTE K3-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	LONPAC INSURANCE BHD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z18VP05016397
Cover Note Number	

Driver

Name of Driver	TEO MUI HENG
NRIC No	S1471779Z
Date Of Birth	23/03/1961
Occupation	OUTDOOR
Date Of Driving Pass	12/04/1982
Driving Experience	36 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-81259927
Fax Number	
Contact Number	OFFICE-81259927
E Mail Address	FRANKTEO50@GMAIL.COM

Address	10 STIRLING ROAD # 32- 06
Postcode	148954
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	
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)	5
Passenger 1	NAME: : TAN LAY KUAN GENDER: : FEMALE
Passenger 2	NAME: : CASSANDIA TEO GENDER: : FEMALE
Passenger 3	NAME: : TAN CHEE KEONG GENDER: : MALE
Passenger 4	NAME: : ZEN TAN 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

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	SHC3104D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

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: 14/5/18

Driver's Signature
(If driver is not the policyholder)
Date & Time: 14/5/18

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

Please note that you might be able to submit an Own Damage Claim under own policy within 14 days.

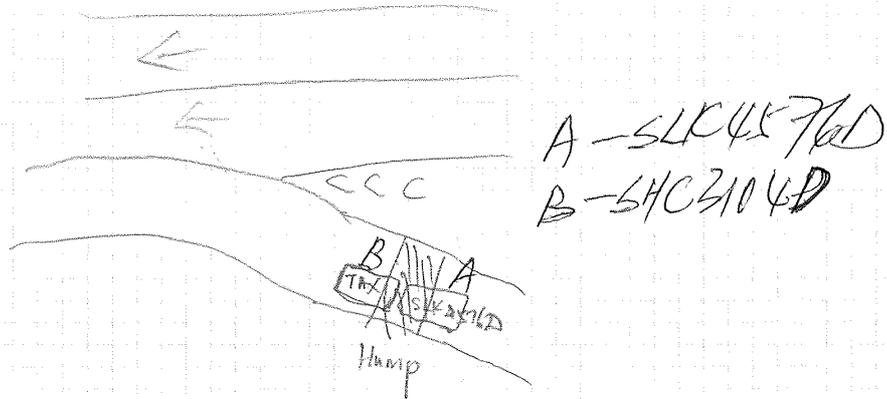
(X) Claim Own Damage () Claim TP () Reporting Only

(X) Claim OD/TP at other workshop

Workshop Name : Cycle & Carriage Svc Ctr (B1A) 299 Pandan Gardens

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The taxi stopped at the hump while travelling along Dairy Farm Road. My car with an infant and family was travelling in it. Unfortunately as he stopped at the hump, I couldn't brake or applied emergency brake in time. As such, I hit the rear of the taxi, vehicle registration number SHC 3104D. It happened on 13 May 2018 at 20:40 pm.

DECLARATION

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

Policyholder's Signature
Date & Time:
14/5/18

Driver's Signature
(If driver is not the policyholder)
Date & Time: 14/5/18

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

Driver's Driving License/ NRIC Pg. 1

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1471779Z



Name
TEO MUI HENG

Race
CHINESE

Date of birth
23-03-1961

Country/Place of birth
SINGAPORE

Sex
M

S1471779Z



REPUBLIC OF SINGAPORE DRIVING LICENCE

S1471779Z



TEO MUI HENG

Issue Date: 23 Mar 1981
Valid Until: 16 Dec 2017

006030421J

5668458



NRIC No: S1471779Z



Date of issue
07-11-2016

10 STIRLING ROAD #32-06
SINGAPORE 148964
NRIC No: S1471779Z Date: 26/12/2017

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES!

Class	Description	PASS DATE
Class 1	Motorcycles exceeding 400 cc	13 Jan 1979
Class 2	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	12 Apr 1982

NP 428A

1471779Z

104130184
G129265R

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

