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 witholding 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 15:12			
Date Of Accident	17/05/2018 11:15			
Exact Location Of Accident	SLIP RD TO PIONEER RD			
Country/State of Loss	SINGAPORE			
DETAILS OF OWN VEHICLE				
Vehicle Registration Number	SKT3051Y			
Insured/Policyholder				
Name Of Registered Owner	TAN WOO CHOO			
NRIC No	S1182094H			
Email Address	YSHRESOURCESPL@SINGNET.COM.SG			
Mobile Phone No	(LOCAL) +65-98321623			
Alternative Phone No	OFFICE-98321623			
Vehicle Particulars				
Manufacturer	VOLVO			
Model	XC60-2.0 T5 (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?	NO			
If No, Please state action to be taken	THIRD PARTY			
Vehicle Category	PRIVATE CAR			
Insurance Company				
Name of Insurance Company	GREAT EASTERN GENERAL INSURANCE LIMITED			
Type Of Coverage	COMPREHENSIVE			
Fleet Policy	NO			

V0102603

Driver

Policy Number

Cover Note Number

Name of Driver TAN WOO CHOO NRIC No S1182094H Date Of Birth 08/07/1956 Occupation **INDOOR Date Of Driving Pass** 21/12/1977

Driving Experience 40 YEARS AND 4 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98321623

Fax Number

Contact Number OFFICE-98321623

EMail Address YSHRESOURCESPL@SINGNET.COM.SG Address BLK 709 BEDOK RESERVOIR RD #08-3870

Postcode 470709

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? YES

Was any injured conveyed to hospital by

ambulance?

NO

NO

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

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

AS PER SKETCH PLAN ATTACHED

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 SGW6781K

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)

DETAILS OF INJURED PERSON 1

Name TAN WOO CHOO

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SKT3051Y

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

Sketch Plan Pg. 1

SKETCH PLAN

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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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. The 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 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)

Lunderstand, 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:
 - 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 wenature Date & Time:

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

Reporting Centre Personnel's Signature Name:

GOOD

NRIC/FIN NO

Sketch Plan Pg. 2

SKETCH PLAN			
	Pionser Rot		1-SKT305/1 2-SEW678/1
DESCRIBE CIRCUMSTAN	CES OF THE ACCIDENT		
Iwas on t	he Slip rd, entering	Piower.	· Rd.
	,		
I come to	, a Stop as I wald	ed out for	tradfic.
Suddenly, I	Selt a huge ferk	k heard a	lond bang.
Came out	if the vahide & real	IsoA that S	56W6781K
	ed into the lear or		
I am for	eling a bit of	on in on my	body, will
be Seeing	the ductor later		

	· · · · · · · · · · · · · · · · · · ·		
DECLARATION /We declare the foregoing p	articulars are true in every respect.		(TALEPINES) (TALEPINES)
Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder)	Reporting Ce	entre Personnel's Signature

Date & Time:

NRIC/FIN No

Sketch Plan Pg. 3

--- REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1182094H





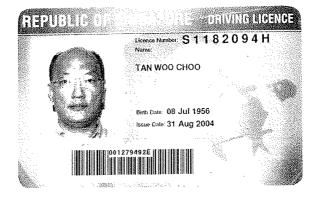
TAN WOO CHOO

CHINESE

One of Bess Sec. 08-07-1956 M

4209

SINGAPORE





APT BLK 709 BEDDK RESERVOIR #08 - 3870 SINGAPORE 470709
NRIC No: \$1182094H Date: 28-03

Date: 28-03-2000 No: 3637595

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

PASS DATE

Motor Cars of unladen weight not exceeding 3000 kg with not more than 7 passengers, exclusive of the diver; and Motor Tractors and other Motor Vehicles of unladen weight not exceeding 2500 kg

NP 428A

Licence No: S1182094H

ervice please visit reet at Eastern Centre 49 2888 Fax: +65 6327 3080 **6248** 2888

Schedule



COPY

Name/Address MR TAN WOO CHOO

BLK 709 BEDOK RESERVOIR RD #08-3870

SINGAPORE 470709

Policy No. : 2017-V0102603-VDP Policy Type : Drive And Save Plus Policy Period : 30-11-2017 to 29-11-2018 Date of Issue : 01-11-2017 Singapore : 20000524

Agency No. : Z0000524 Gross Premium : SGD********1,566.10

Petroi

Details of Coverage :

Risk Number : 1 Drive And Save Plus

Hire Purchase

: MAYBANK

Particulars of Motor Car:

Registration Number: SKT30517

Make : VOLVO XC60 T5 Cubic Capacity : 1969.00

Year of Manufacture: 2014 Engine Number : B4204T111136895 Chassis Number : YVIDE40LDF2698270

Sum Insured

: Market Value Type of Cover : Comprehensive any Workshop

Description

Annual Premium SGD

Basic Premium
Less NCB (50.000%)
NC CLAIM DISCOUNT PROTECTOR LOSS OF USE

2,665.64 1,332.82 SGD 133.28 100.00 SGD SGD

Total Due:

1,566.10 SGD

Excess Type : SECTION I

Driver(s)

TAN WOO CHOO

Subject to Clauses, Warranties, and Endorsements applicable and attached hereto :-

NO CLAIM DISCOUNT PROTECTOR IT IS AGREED THAT BY PAYMENT OF AN ADDITIONAL PREMIUM INDICATED IN THE SCHEDULE, THE 50% NO CLAIM DISCOUNT (NCD) ENTITLEMENT IN THIS

POLICY IS PROTECTED AS FOLLOWS: -

NO. OF CLAIMS MADE OR ARISEN DURING THE PERIOD OF INSURANCE

NCD ENTITLEMENT ON RENEWAL OF THE POLICY

SGD

ONE TWO THREE OR MORE

50% 20% NIL

IT IS FURTHER AGREED THAT THIS NO CLAIM DISCOUNT PROTECTOR IS NOT TRANSFERABLE TO ANOTHER INSURER AND DOES NOT GUARANTEE RENEWAL OR NON-CANCELLATION OF THIS POLICY BY THE COMPANY.

LOSS OF USE SUBJECT TO THE TERMS AND CONDITIONS OF THE POLICY AND THE CLAIM UNDER

GPDOLKO

Fage - 1-... 2/

Standard Excess

GST Regn No. M90366503P

Great Eastern General Insurance Limited (Reg. No. 1926 00000W) (A wholly owned subsidiary of Great Eastern Holdings (Limited) 1 Eckering Street, #01-01 Great Eastern Centre, Singapore 049659 Tel +65 6248 20(2) Fax +65 6532 2214 great-easterngeneral com















