SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Mobile Number

Fax Number
Contact Number
EMail Address

- 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</u> 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.

atoresaid.		
	ACCIDENT STATEMENT	
Date Of Report	22/05/2018 19:01	
Date Of Accident	19/05/2018 14:00	
Exact Location Of Accident	ALONG UPPER SERANGOON TOWARDS PIE	
Country/State of Loss	SINGAPORE	
DETAILS OF OWN VEHICLE		
Vehicle Registration Number	YN8849X	
Insured/Policyholder		
Name Of Registered Owner	CHANG SAI HOON	
NRIC No	S1719672C	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-90388113	
Alternative Phone No	OFFICE-90388113	
Vehicle Particulars		
Manufacturer	ISUZU	
Model	FVR34SUQDC	
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL	
Are you claiming under your own insurance policy for repair to your vehicle?	NO	
If No, Please state action to be taken	REPORTING ONLY	
Vehicle Category	COMMERCIAL VEHICLE	
Insurance Company		
Name of Insurance Company	EQ INSURANCE COMPANY LTD	
Type Of Coverage	COMPREHENSIVE	
Fleet Policy	NO	
Policy Number	DMCPHQ17-004051	
Cover Note Number		
Driver		
Name of Driver	YEE KOK CHANG	
Passport No/FIN	G7474524K	
Date Of Birth	06/10/1983	
Occupation	OUTDOOR	
Date Of Driving Pass	01/10/2005	
Driving Experience	12 YEARS AND 7 MONTHS	
Gender	MALE	
NA 1 11 NI 1	(1.0041.) - 05.0000440	

(LOCAL) +65-90388113

NOEMAIL

Address

Postcode

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 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

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.

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 (YN8849X) was entering the merging lane along upper Serangoon towards pie when a car (SKS3452D) who was also entering the merging lane, hit me. The front left side of the car make contact with the rear right side of my lorry. No injuries involved.

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 SKS3452D

Vehicle Make/Model/Colour ALFA ROMEO/GIULIETTA 1.4T MULTIAIR TCT/WHITE

1

NO

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver CHOY WAI-FUN IRENE

NRIC/Passport Number S0108224H

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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- of Singapore (GIA) for archiving and that copies of this report will for a fee be made available 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. 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 of the control of 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 set out in this [form] and any other personal information to all insurer(s) who have insure 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 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

(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
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
- (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.

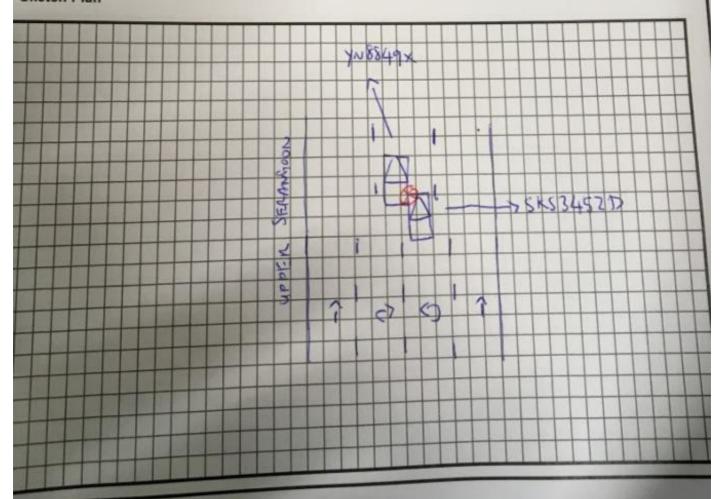
VERIFIED BY AJAX MARS REPORTING OFFICER MOHAMMAD SULHANDI BIN

Policyholder's Signature / Date & Time Driver's Signature (If driver is got the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

MOHD AFFANDI

Sketch Plan



Common Statement Pg. 1

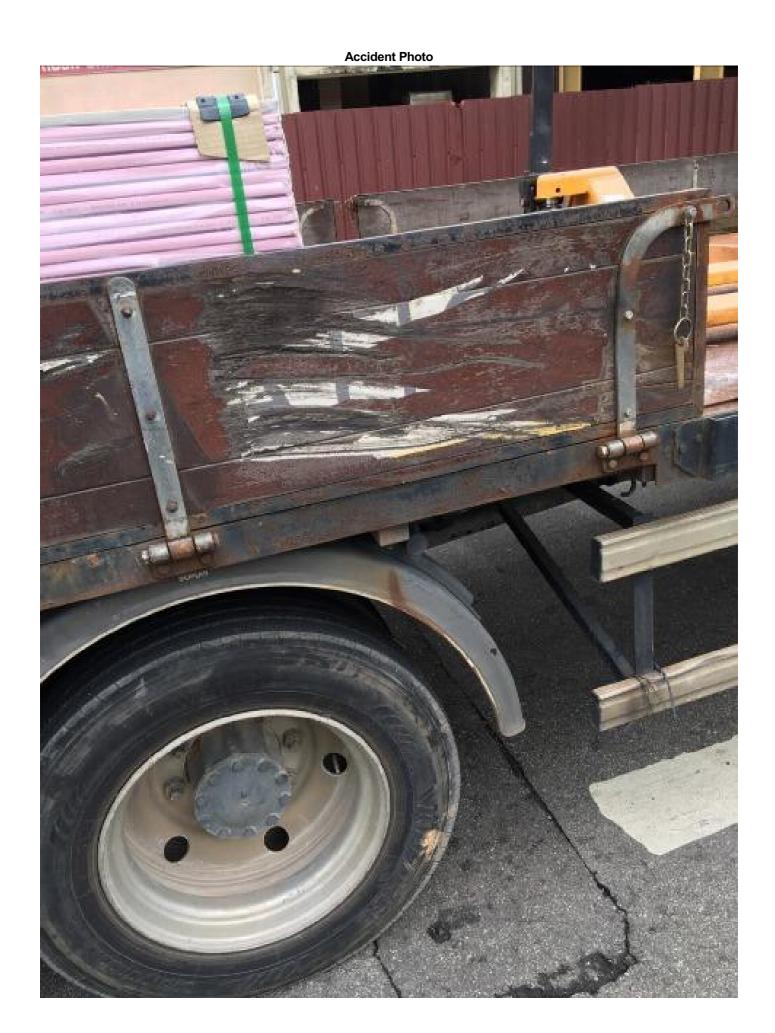
ACCIDENT STATEMENT (2000 characters)

a car (SKS3452D) who was also entering	lane along upper Serangoon towards pie when ng the merging lane, hit me. The front left side ght side of my lorry. No injuries involved.
Taxi Voucher No.:	
DECLARATION	
I/We declare that the above particulars & information provi	ded above are true in every aspect
VERIFIED BY AJAX MARS REPORTING OFFICER - MOHAMMAD SULHANDI BIN MOH AFFANDI	
MARS Officer	
Job Complete Date/Time	Registered Owner or Driver's Signature Date/Time:
22 May 2018 at 3:31 PM	22 May 2018 at 3:31 PM

















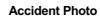














Driving License REPUBLIC OF SINGAPORE DRIVING LICENCE Licence Number G7474524K Name: YEE KOK CHANG Birth Date: 06 Oct 1983 Issue Date: 07 Sep 2015 Valid TIII 30/09/2020 WORK PERMIT Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore Employer
ATA TRANSPORTS & TRADING Name YEE KOK CHANG Work Permit No. 4 01471251 SERVICE

4 01471251

K0250436

