

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	31/05/2018 10:06
Date Of Accident	30/05/2018 18:30
Exact Location Of Accident	ALONG MCE TUNNEL NEAR EXIT TO FORT ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKB5487E
Insured/Policyholder	
Name Of Registered Owner	CHUA ANDY
NRIC No	S7212723D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92344664
Alternative Phone No	OFFICE-92344664

Vehicle Particulars

Manufacturer	CHEVROLET
Model	CRUZE 1.6L AUTO ABS D/AB 2WD 4DR
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	LONPAC INSURANCE BHD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z18VP05018246
Cover Note Number	-

Driver

Name of Driver	CHEW LAURA
NRIC No	S7810479A
Date Of Birth	24/04/1978
Occupation	INDOOR
Date Of Driving Pass	29/11/2002
Driving Experience	15 YEARS AND 6 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90082869
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	28 UPPER SERANGOON VIEW #06-33
Postcode	534207
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	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)	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

PLEASE REFER TO ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	FILE TOO LARGE FAIL TO UPLOAD
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD1086E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	TAN POH ANN KENNETH
NRIC/Passport Number	S0028851I
Contact Number	97353386
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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8. **Consent under the Personal Data Protection Act (PDPA)**

(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.

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

Accident Sketch Plan

SKETCH PLAN

A = SKB 5487 E
B = SHD 1086 E

Along MCE tunnel near Exit to Fort Road

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to Statement

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.:

Accident Sketch Plan

Statement of Laura Chew – NRIC S7810479A

On 30 May 2018, I was driving vehicle SKB5487E (Chevrolet Cruze) along MCE tunnel heading towards Tampines Road. At or about 6.33pm on the same day along MCE tunnel near the exit to Fort Road, I was involved in an accident with a silver colour (KIA) Premier Taxi SHD1086E.

2 The said taxi which was in front of my vehicle suddenly applied its brakes and upon seeing this, I made all efforts to avoid a collision by applying emergency braking. However I could not stop in time and my vehicle collided into the rear of the taxi. I would like to state that I was driving at the permissible speed of 80 Km/Hr prior to the collision with the taxi.

3 Immediately after the collision with the taxi, both vehicles came to a safe stop. I came out of my vehicle to check with the taxi driver if his passengers (there were two) and himself were ok. The taxi driver informed me that no one was hurt and everyone was ok.

4 The taxi driver and myself then assessed the damages of our respective vehicles. I noted that, the lower end of the taxi's rear bumper had suffered some cracks and scratched-like marks. The majority of the marks were most visible at the bottom right of the bumper. Annex A1 refers. As for my own vehicle (SKB5487E), the front right license plate suffered cracks and a small missing piece. Annex A2 refers

5 After assessing the damages, the taxi driver and I exchanged particulars and agreed to let our respective insurers to settle the matter as it was a minor accident with no injuries.

6 I would like to state that there were no arguments, threats, inducement made by both parties throughout the whole incident. I also noted that the passengers remained in the taxi and did not come out of the vehicle at any point of time.

7 The taxi driver's particulars were established to be Tan Poh Ann Kenneth, NRIC S0028851I, D.O.B 12 July 1953 of Blk 312A Sumang Link #08-177; Singapore 821312. His contact number is 9735 3386. A copy of the taxi driver's NRIC is attached in A3.

8 On the same day, 30 May 2018, I informed my husband of the accident. He is Chua Andy, NRIC S7212723D and the owner of the vehicle I was driving.

9 At or about 8.33pm the same day, my husband called the taxi driver, Tan Poh Ann Kenneth, to enquire if anyone was injured during the accident. Mr Tan informed my husband that no one was injured and everyone was fine.

10 Mr Tan further informed my husband that his rear boot is damaged because of the collision and cannot close. I would like to state that this was not mentioned during the damage assessment nor discovered onsite.



Accident Sketch Plan

11 I declare that the statement made by me is to the best of my knowledge and I make it knowingly that if it is tendered as evidence, I may be liable for making a false statement if I have willfully stated in it anything I know to be false or do not believe to be true.

Signature:



Date. 30/5/18

~END~

Accident Photo



Accident Photo



Accident Photo



Accident Photo



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