

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	27/01/2018 12:43
Date Of Accident	26/01/2018 13:30
Exact Location Of Accident	CARPARK BDB 45 LOT 43 BLK 539 BEDOK NORTH ST 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKX4104B
Insured/Policyholder	
Name Of Registered Owner	LIM SENG GUAN
NRIC No	S2633528J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91445347
Alternative Phone No	OFFICE-91445347

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE CAR
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	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D18MTPV01000918
Cover Note Number	

Driver

Name of Driver	LIM SENG GUAN
NRIC No	S2633528J
Date Of Birth	26/03/1965
Occupation	INDOOR
Date Of Driving Pass	29/08/1985
Driving Experience	32 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91445347
Fax Number	
Contact Number	OFFICE-91445347
E-Mail Address	NOEMAIL

Address	BLK 507 BEDOK NORTH AVE 3 #13-355
Postcode	460507
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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?	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)	0

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

On 26-01-2018 at about 1.30 pm, My car bearing registration number SKX4104B parked at the open car park (BDB 45, lot no 43) near BLK 539 BEDOK NORTH ST 3. for my short lunch time. When i'm came back somebody approached me, he has just witnessed a lorry (YN7665R) reversed hit into my stationary car and asked me to check the extent of damage to my car. He gave me the particulars of the third party and is willing to be my witness. No Injury was noted. Particulars for Third Party as follows:
Company Name : SINMAH POULTRY PROCESSING (S) PTE LTD Driver Name : LIN DONGNING Car Number : YN7665R FIN Number : G8535633Q Contact number : 63831200 Witness: Name : TAN FIN HOWE GARY TEL : 8299 3640

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 Witness 1

Name	TAN FIN HOWE GARY
Phone Number	82993640
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YN7665R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	LIN DONGNING
NRIC/Passport Number	G8535633Q
Contact Number	63831200

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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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)**

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: 27-1-18 12:10pm

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN

Open car park.
 2) (BDB 45)
 2) BIK 539, Bedok North St 3.

A = SKX 4104B
 B = YN 7665R.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 26-01-2018, at about 1:30pm, my car bearing registration number SKX 4104B, parked at the open car park (BDB 45, lot no 43) near BIK 539 Bedok North St 3, for my short lunch time.

When I came back somebody approached me, he has just witnessed a lorry (YN 7665R) reversed hit into my stationary car and asked me to check the extent of damage to my car.

He gave me the particulars of the third party and is willing to be my witness.

No injury was noted.

Particulars for Third Party as follows:-

Company Name:- Simmah Poultry Processing (s) Pte

Driver Name:- Lin Dongning.

Fin No = 685356336

Car number: YN 7665R.

Contact number: 63831200.

Witness:-

Name:- Tan Fin Howe Gary

tel = 8299 3640.

DECLARATION

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

Policyholder's Signature

Date & Time: 27-1-18 12:10 PM

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.: