

(Draft)

MLHM18078167 / Lai Huat (Meng Kee) Motor Pte Ltd - Sin Ming  
 ENTRY DATE & TIME: 18/06/2018 13:57  
 SUBMITTED BY: [To Be Confirmed]

## 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	18/06/2018 13:57
Date Of Accident	16/06/2018 18:30
Exact Location Of Accident	SLIP ROAD AT THOMSON ROAD TOWARDS BRADDELL ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGF9309L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	NG AH TEE
NRIC No	S0918484H
Email Address	NGBT79@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-97435299
Alternative Phone No	Others-98992121

### Vehicle Particulars

Manufacturer	TOYOTA
Model	ALTIS
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	THIRD PARTY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	17-MW009118-R02
Cover Note Number	

### Driver

Name of Driver	NG BOON TIAN (HUANG WENZHAN)
NRIC No	S7911439A
Date Of Birth	21/04/1979
Occupation	INDOOR
Date Of Driving Pass	12/10/1998
Driving Experience	19 YEARS AND 8 MONTHS
Gender	MALE

6/18/2018

E-FILE

Mobile Number (LOCAL) +65-98992121

Fax Number

Contact Number

EMail Address NGBT79@YAHOO.COM.SG

Address 34 SPRINGSIDE LINK

Postcode 786654

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured CHILDREN

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) 3

Passenger 1  
Name: : NG AH TEE  
Gender: : Male

Passenger 2  
Name: : TAN SIEW LEE  
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**

PLEASE 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 SH9011S

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category TAXI

Name of Driver

6/18/2018

E-FILE

\* NRIC/Passport Number

\* Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## SKETCH PLAN

### IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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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 liability**.
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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: 18 JUN 2018

13:57 hrs

Driver's Signature

(If driver is not the policyholder)

Date & Time:

18 JUN 2018

13:57 hrs

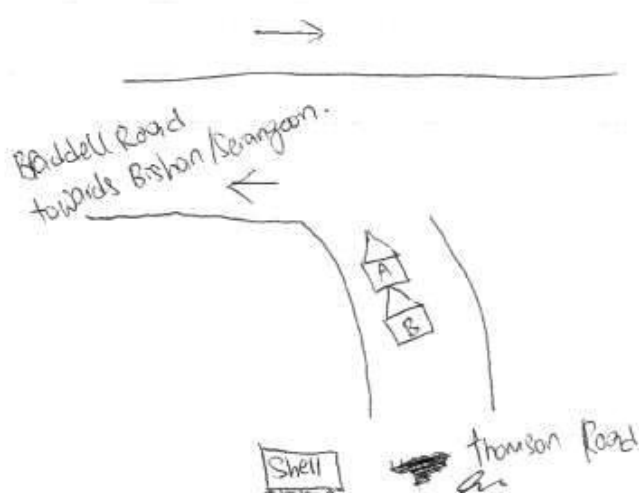
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Poh Kwee Choo  
S6840583A

# SKETCH PLAN



A: SGF 9309L

B: SH9011S

16/6/2018

630pm


## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along Thomson Road after Shell station and have filtered left to prepare to filter into Braddell Road.
I stopped to check on the oncoming traffic as there were cars moving along Braddell Road. Suddenly I felt a jerk from the rear of my vehicle and realised a taxi had knocked into my car. I alighted and exchanged details with the driver of taxi vehicle B.
Email: soonseengcompany@gmail.com

## DECLARATION

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

  
 Policyholder's Signature  
 Date & Time:  
 18 JUN 2018  
 13:57hrs

  
 Driver's Signature  
 (If driver is not the policyholder)  
 Date & Time:  
 18 JUN 2018  
 13:57hrs

  
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.: Poh Kwee Choo  
 S6840583A