

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	21/06/2018 12:20
Date Of Accident	16/06/2018 14:00
Exact Location Of Accident	SLIP RD TO BRADDELL RD (FROM CTE)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKU1732Z
Insured/Policyholder	
Name Of Registered Owner	LAWRENCE LOY BOXUAN
NRIC No	S7231948F
Email Address	TILICOUNTRY99@YAHOO.COM
Mobile Phone No	(LOCAL) +65-92789789
Alternative Phone No	OTHERS-92789789

Vehicle Particulars

Manufacturer	HONDA
Model	HR-V-1.5 (A)
Exact Purpose for which vehicle was being used at time of accident	PTE 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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCPSN3066421701
Cover Note Number	03/07/2017 - 02/07/2018

Driver

Name of Driver	LAWRENCE LOY BOXUAN
NRIC No	S7231948F
Date Of Birth	11/09/1972
Occupation	INDOOR
Date Of Driving Pass	08/12/1992
Driving Experience	25 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92789789
Fax Number	
Contact Number	OTHERS-92789789
EEmail Address	TILICOUNTRY99@YAHOO.COM

Address	BLK 817 TAMPINES ST 81 #11-586
Postcode	520817
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	2
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)	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

My vehicle was making an exit from CTE Exit 10 towards Braddell Road. As I thought that the third-party vehicle was making a move at the intersection road between CTE Exit 10 & Braddell Road, I stepped on my pedal & unfortunately hit the back of the third-party vehicle. The third-party owner is making a claim against my insurance & I was unable to report this accident sooner as my wife was admitted to the hospital on the 18/6/2018 & underwent a major operation on the 19/6/2018.

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	SKR9105Y
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)	

Sketch Plan

SKETCH PLAN

VEHICLE NO.: SKU1732Z
INSURER: China
DATE & TIME: 16/06/2018 @ 1400

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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.

[Signature]
Policyholder's Signature
Date & Time: 21/06/2018

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

[Signature]
Reporting Centre Personnel's Signature
Name: Dorlyn (Amek)
NRIC/FIN No.: 21/06/18

Sketch Plan #3

Hi,

My vehicle insurance is with China Taiping & was involved in a traffic accident on the 16/6/2018, & the details are as follow:

Vehicle Owner: Lawrence Loy Boxuan

Owner Vehicle No.: SKU1732Z

Date of Accident: 16/6/2018

Time of Accident: 1:50pm

Third Party Vehicle No.: SKR9105Y

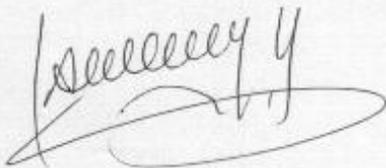
Details: My vehicle was making an exit from CTE Exit 10 towards Braddell Road. As I thought that the third-party vehicle was making a move at the intersection road between CTE Exit 10 & Braddell Road, I stepped on my pedal & unfortunately hit the back of the third-party vehicle. The third-party owner is making a claim against my insurance & I was unable to report this accident sooner as my wife was admitted to the hospital on the 18/6/2018 & underwent a major operation on the 19/6/2018.

Do let me know next course of action.

Best regards

Lawrence

(Mobile: 92789789)


21/06/2018

Sketch Plan #4

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7231948F



Name
LAWRENCE LOY BOXUAN
黎博軒

Race
CHINESE

Date of birth
11-09-1972

Sex
M

Country/Place of birth
SINGAPORE

57231948F

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number S7231948F

Name
LOY JIY MING, LAWRENCE
(LI ZHIMING, LAWRENCE)

Birth Date 11 Sep 1972

Issue Date 19 May 2004

091222242K

5559685



NRIC No. S7231948F

Date of issue
10-02-2016

Address



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

CLASS	DESCRIPTION	PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	10 Jan 1991
Class 2A	Motorcycles between 201 cc and 400 cc	17 Feb 1993
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	06 Dec 1992

NP 428A

License No. S7231948F



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

