

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 | 22/06/2018 15:44 |
| Date Of Accident | 21/06/2018 19:20 |
| Exact Location Of Accident | SERANGOON NORTH AVENUE 1 |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------------------|
| Vehicle Registration Number | SGH5132U |
| Insured/Policyholder | |
| Name Of Registered Owner | GU JIE |
| NRIC No | S7569813E |
| Email Address | KOOGEE2002@GMAIL.COM |
| Mobile Phone No | (LOCAL) +65-91267685 |
| Alternative Phone No | OTHERS-91267685 |

Vehicle Particulars

| | |
|--|----------------|
| Manufacturer | HYUNDAI |
| Model | NFSONATA 2.0 |
| Exact Purpose for which vehicle was being used at time of accident | |
| 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 | DMPCSN3115391701 |
| Cover Note Number | |

Driver

| | |
|----------------------|----------------------|
| Name of Driver | GU JIE |
| NRIC No | S7569813E |
| Date Of Birth | 24/11/1975 |
| Occupation | INDOOR |
| Date Of Driving Pass | 16/06/2012 |
| Driving Experience | 6 YEARS AND 0 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-91267685 |
| Fax Number | |
| Contact Number | OTHERS-91267685 |
| Email Address | KOOGEE2002@GMAIL.COM |

| | |
|---|--------------------------------------|
| Address | BLOCK 200B SENGKANG EAST ROAD #15-26 |
| Postcode | 542200 |
| 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 - CHANGE/CROSS LANE |
| 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

ON 21/6/2018 AT QROUND 1920HRS, I WAS DRIVING FROM YIO CHU KANG ROAD TURNING LEFT INTO SERANGOON NORTH AVENUE 1. JUST AFTER TURNING, I FOUND IT WAS WRONG ROAD, THEN I SIGNALLLED RIGHT AND PREPARED TO MAKE AN U-TURN. WHEN ENSURE NO ONCOMING CAR, I DID U-TURN AND SUDDENLY WAS HIT BY THE CAR BEHIND ME. AFTER WE BOTH PARKED PROPERLY, I TALKED WITH THE DRIVER FROM ANOTHER CAR. HE SAID HE WAS THINKING I PREPARED TO PARK AT ROAD SIDE AND SPEEDED UP WANTED TO EXCEED FROM MY CAR RIGHT SIDE AND SUDDENLY SAW I TURNED RIGHT AND THE CRASH HAPPENED.

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 | GBB2996D |
| Vehicle Make/Model/Colour | OPEL |
| Details Of Properties | |
| Vehicle Category | COMMERCIAL VEHICLE |
| Name of Driver | ABDUL WAHID BIN JAFFAR |
| NRIC/Passport Number | S6937453J |
| Contact Number | |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | 1 |

Accident Sketch Plan

SKETCH PLAN


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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: 22/6/18 1300hrs


Driver's Signature
(If driver is not the policyholder)
Date & Time: 22/6/18 1300hrs


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



Accident Sketch Plan

SKETCH PLAN

Please refer to attached sketch

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 21st June 2018, at around 7:20PM, I was driving from Yio Chu Kang Rd. turning left into Serangoon North Ave. 1, at just after turning, I found it was wrong road, I ~~should~~ then I signaled right and prepare U-Turn, when ensure no coming car I did U-Turn, and suddenly was hit by the car behind me.

After we both parked properly, I talked with the driver from another car, he said he was thinking I prepared to park at road side and speeded up wanted to exceed from my car right side, and suddenly saw I turned right, and the crash happened.

DECLARATION

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

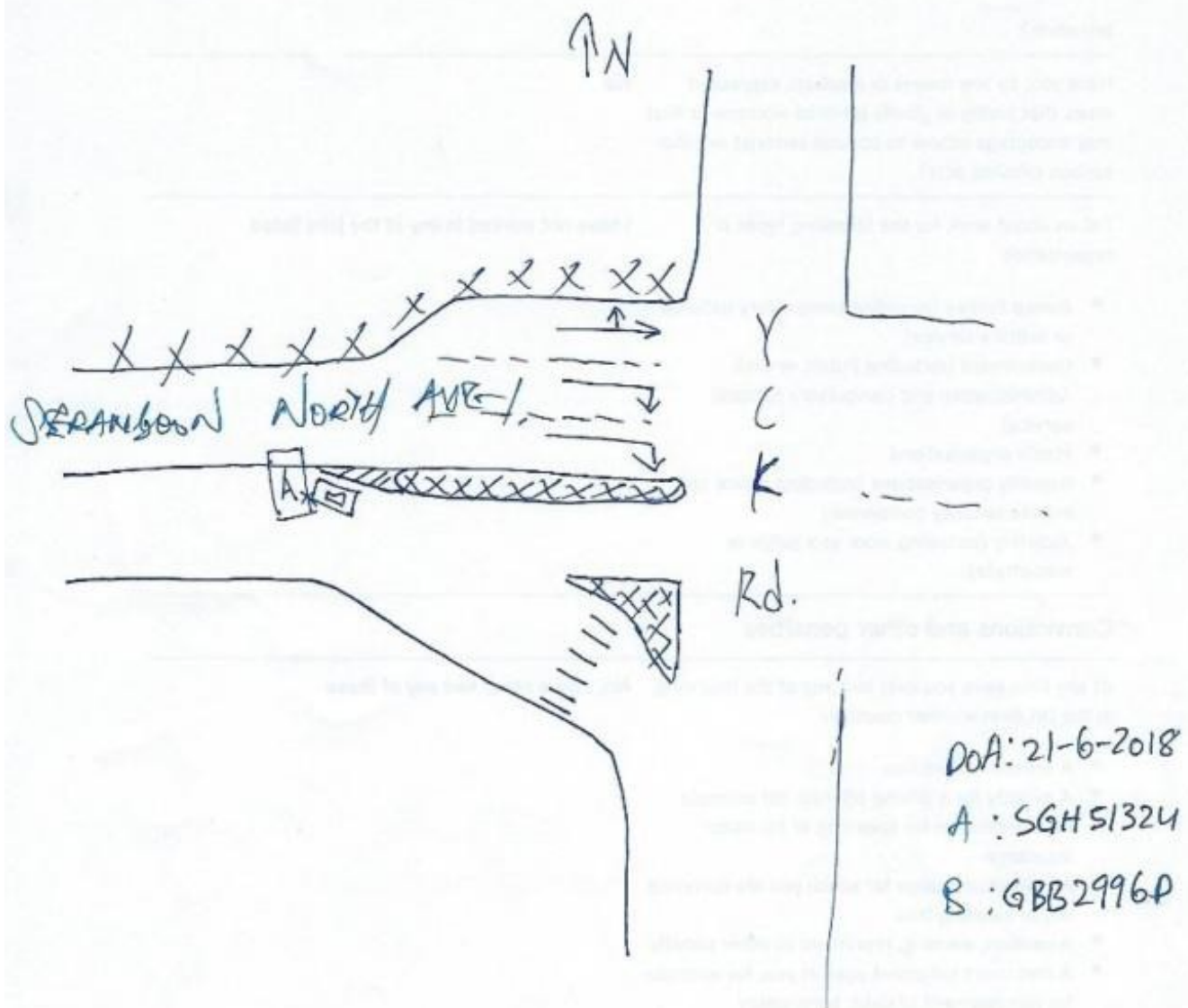
Policyholder's Signature
Date & Time:

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

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



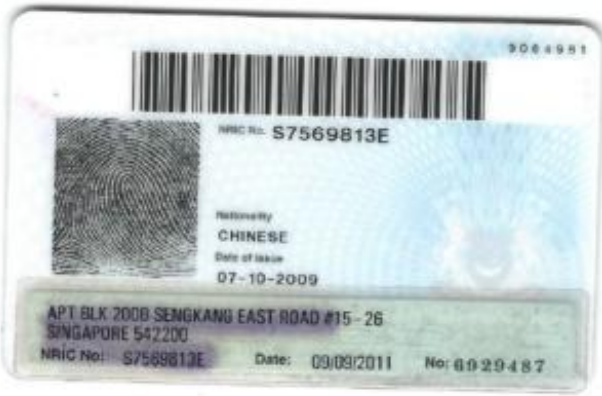
Sketch



Identification Card




Driving Licence



Third Party Particular

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S6937453J



Name
ABDUL WAHID BIN JAFFAR

Race
MALAY

Date of birth
30-10-1969

Country/Place of birth
SINGAPORE

Sex
M

5268938



NRIC No. S6937453J



Date of issue
17-02-2014

Address
**APT BLK 509 WOODLANDS DRIVE 14 #02-01
SINGAPORE 730509**

NRIC No: S6937453J Date: 25/05/2015

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S6937453J

Name
ABDUL WAHID BIN JAFFAR

Birth Date: **30 Oct 1969**

Issue Date: **12 Jan 2016**




002518198F

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

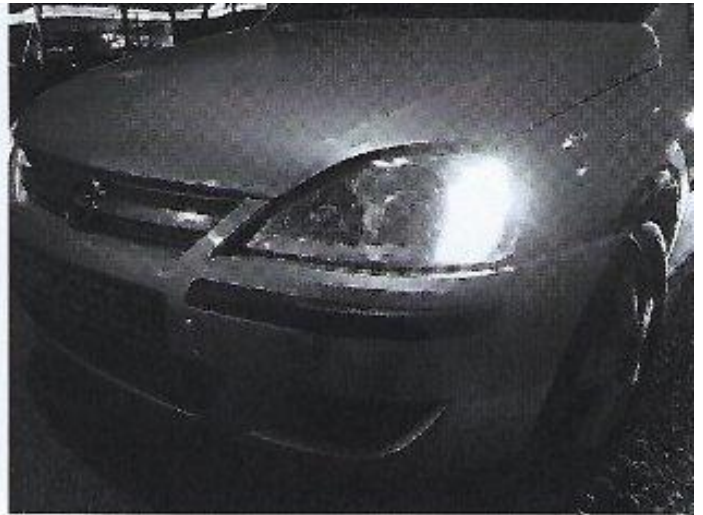
EFFECTIVE DATE

Class 3A Motor cars without clutch pedals (Auto) with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver, and other motor vehicles without clutch pedals with unladen weight $\leq 2500\text{kg}$ 12 Jan 2016

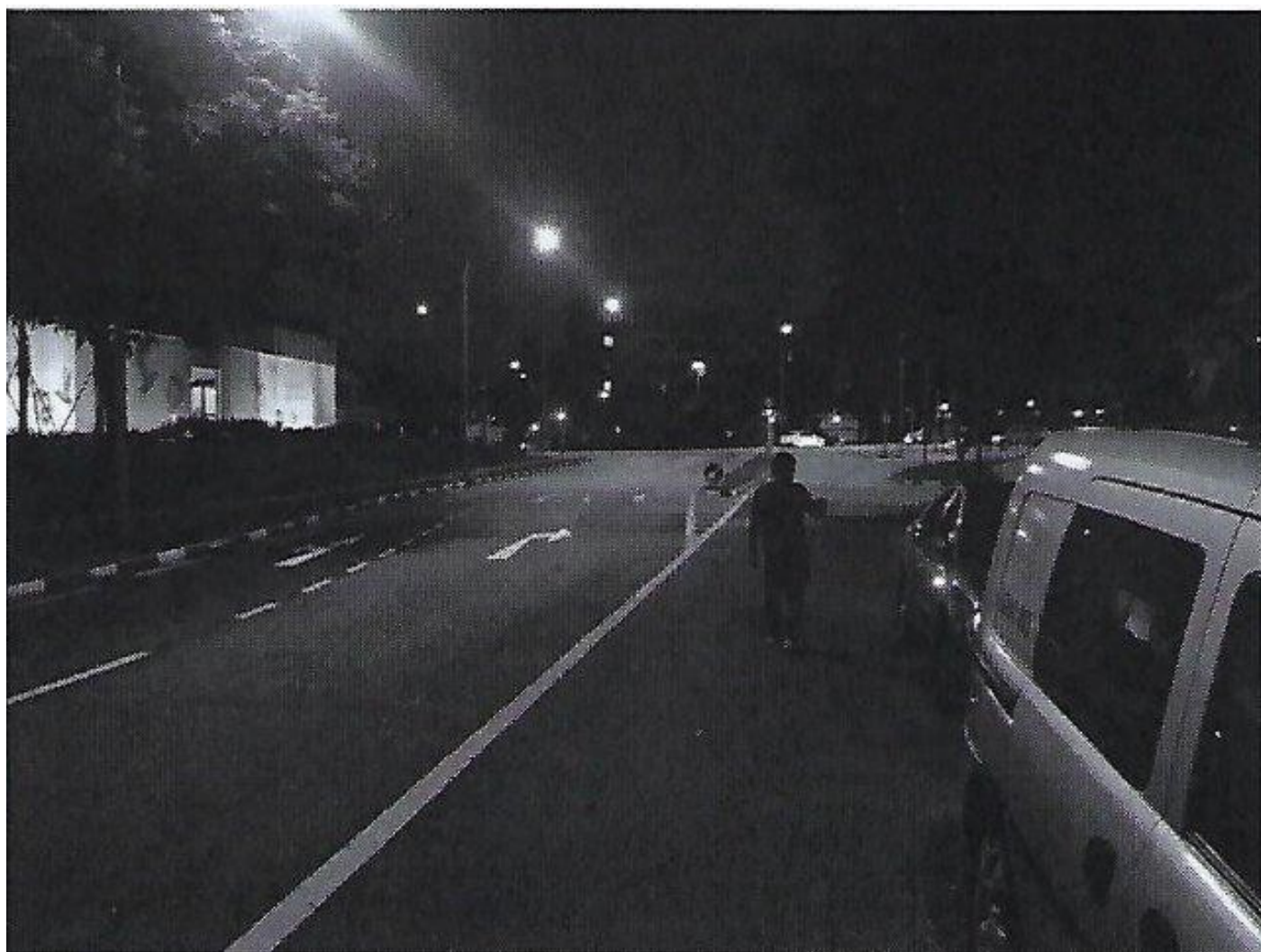


Licence No: S6937453J

Scene Photo



Scene Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

