

## 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	25/06/2018 21:45
Date Of Accident	25/06/2018 07:25
Exact Location Of Accident	ROUND ABOUT UNDER TUAS FLYOVER
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLC5986P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHEW LI-MAY
NRIC No	S7670569J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97618784
Alternative Phone No	OTHERS-97618784

### Vehicle Particulars

Manufacturer	MAZDA
Model	6 2.0 4DR 1999CC
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	AVIVA LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	10822256
Cover Note Number	N.A

### Driver

Name of Driver	CHAI WEI YEP ALEX
NRIC No	S7442918A
Date Of Birth	22/12/1974
Occupation	INDOOR
Date Of Driving Pass	12/11/1997
Driving Experience	20 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97618784
Fax Number	
Contact Number	
Email Address	ALEXCHAIWY@GMAIL.COM

Address THE NAUTICAL, 97 JALAN SENDUDOK 769474  
 Postcode  
 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 - ROUNDABOUT  
 Weather Conditions RAINING  
 Road Surface WET

#### 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

I was on the left lane in the roundabout under Tuas Flyover, near Tuas Road exit. I signalled right to show my intention to continue around the roundabout to exit at Jalan Ahmad Ibrahim exit. SHC7144L was on the right lane in the roundabout, and the driver suddenly swerved left to exit the roundabout at Tuas Road exit. He did not signal left at all. I believe he did not check his blind spot before swerving to the left.

#### Attachment(s)

Are accident photos available for attachment? YES  
 Was there any video captured by Car Camera? YES  
 Remarks/ Reasons: PENDING VIDEO FROM INSURED  
 Was there any audio recorded? NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHC7144L  
 Vehicle Make/Model/Colour HYUNDAI / I40 1.7 CRDI F/L AT ABS AIRBAG 4DR  
 Details Of Properties N.A  
 Vehicle Category TAXI  
 Name of Driver JASMIN BIN AMIN  
 NRIC/Passport Number S0178897C  
 Contact Number  
 Address  
 Postcode  
 Insurance Company Name  
 Nature Of Damage  
 No. Of Passenger (Including Driver)

# Sketch Plan

## SKETCH PLAN

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to assist in the claims process.
2. The form must be completed by the Policyholder and/or the Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may result in insurance companies to repudiate policy liability.
4. The issue and acceptance of the form by insurance companies is not an admission of policy liability on the part of insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be furnished by the insurers of the GIC (General Insurance Association of Singapore) to the relevant authorities for their use and that copies of the report may be made available upon application by interested parties.
7. In the judgement of the report to the insurers, you hereby consent to the utilization of this report at the insurer's and to copies of the report being made available wherever:
8. Consistent with the Personal Data Protection Act (PDPA):
  - (a) Insurers, re-insurers and the General Insurance Association of Singapore (GIA) may be permitted to collect, use, disclose and/or process personal data for the purpose of underwriting and/or any other personal information provided by the or processed by the insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insured(s) who have insured the vehicle(s) involved in the accident (all insured(s) who have insured vehicle(s) involved in the accident whether collectively referred to as the "Insured(s)", the insurers' Insured(s) here, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police, for the purpose of)
  - (b) processing, handling and/or dealing with my claim including the settlement of the claim and any necessary investigation relating to the claim.
  - (c) investigating the accident and/or my claim.
  - (d) carrying out and/or dealing with my instructions or responding to any enquiries by me.
  - (e) administering my claim including the making of correspondence, statements, reports or notices to me, which could involve disclosure of certain personal data about me to body about delivery of the same as well as on the external cover of correspondence, packages, and/or
  - (f) complying with applicable law in administering, processing, handling and/or dealing with my claim.
9. I, as insured(s) who have insured vehicle(s) involved in the accident and the insurers' Insured(s) here, may be permitted to collect, use, disclose and/or process my Personal Information for one or more of the above purposes, and
10. my Personal Information may/ may not be disclosed by any of the insurers' Insured(s) to their third party service providers or agents (including their Insured(s) here, which may be used outside of Singapore, for one or more of the above purposes.

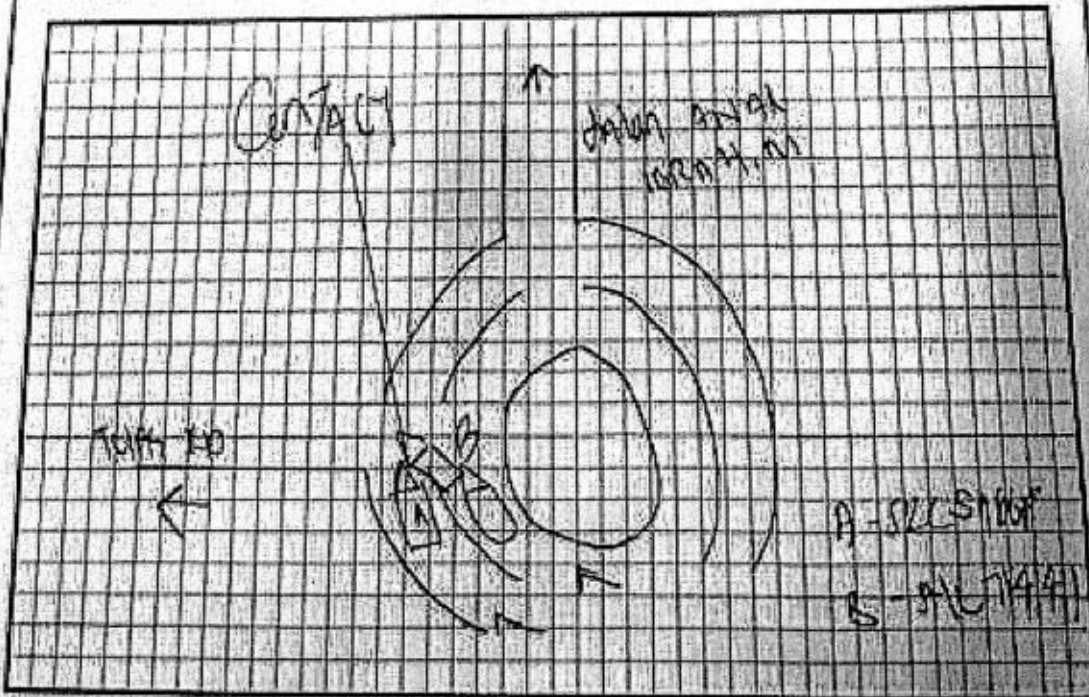
VERIFIED BY AJAX MARS  
REPORTING OFFICER  
Md Sharif

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the Policyholder) / Date & Time

Witnessed by Reporting Centre  
Personnel

### Sketch Plan



ACCIDENT STATEMENT (2000 characters)

I was on the left lane in the roundabout under Tuas Flyover, near Tuas Road exit. I signalled right to show my intention to continue around the roundabout to exit at Jalan Ahmad Ibrahim exit. SHC7144L was on the right lane in the roundabout, and the driver suddenly swerved left to exit the roundabout at Tuas Road exit. He did not signal left at all. I believe he did not check his blind spot before swerving to the left.

Taxi Voucher No.:

DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -  
MOHAMED SHARIL BIN SATAR

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

25 June 2018 at 7:23 PM

Date/Time:

25 June 2018 at 7:23 PM