

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	16/07/2018 16:14
Date Of Accident	14/07/2018 11:45
Exact Location Of Accident	KPE TOWARDS ECP
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKQ6064G
Insured/Policyholder	
Name Of Registered Owner	CHEONG KAH WAI
NRIC No	S6807007D
Email Address	WENSDF9875@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-98557598
Alternative Phone No	OTHERS-98557598

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	S300L-3.0 (A)
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	PNPV2018-00005709
Cover Note Number	24/04/2018 - 23/04/2019

Driver

Name of Driver	CHEONG KAH WAI
NRIC No	S6807007D
Date Of Birth	14/02/1968
Occupation	INDOOR
Date Of Driving Pass	11/11/1997
Driving Experience	20 YEARS AND 8 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98557598
Fax Number	
Contact Number	OTHERS-98557598
Email Address	WENSDF9875@YAHOO.COM.SG

Address	BLK 401 ANG MO KIO AVE 10 #12-607
Postcode	560401
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	CHAIN COLLISION
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?	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)	2
Passenger 1	NAME: : KEAN LEE XIU QI GENDER: : MALE

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

REFER TO THE SKETCH PLAN BY DRIVER

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	SLS4068L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE HIRE
Name of Driver	CHUA BOON YONG
NRIC/Passport Number	S1816982G
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLQ8059Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE HIRE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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.

Policyholder's Signature
Date & Time:

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

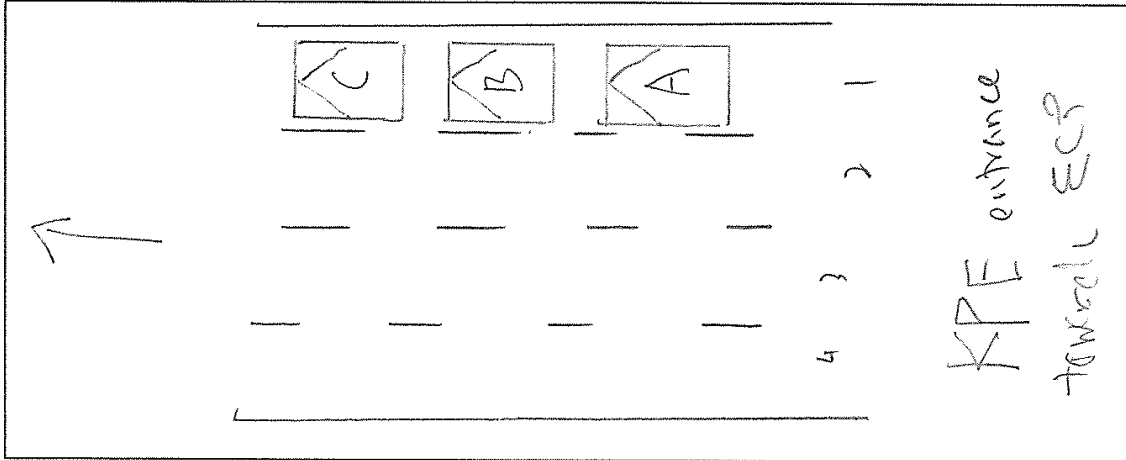


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan Pg. 2

Date of accident: 14/7/18 Time: 11:45am Location: KPE towards ECP
 My Vehicle A: SLO 6064G Vehicle B: SLS 4068L Vehicle C: SLO 8087Y

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 14/7/18 around 11.45am, the road was wet which after rain, I was driving towards KPE, into the entrance, the front car SLS 4068L suddenly brake, therefore I have no choice and cause a knock onto the back of his car.

CAR B- CHUA BOON YONG
 SIB1682G

☐ Claim OD/TP at Ah Lim Motor ☐ Claim OD/TP at other workshop ☒ Reporting Only

Remarks : Please forward a copy of my efile accident report to :

My workshop :

Email address :

& myself :

Email address :

Note : Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

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:
 NRIC/FIN No.:



AH LIM MOTOR COMPANY

FWD

YOUR CLASSIC CAR INSURANCE SUMMARY

Please call +65-6322-2072 for FWD Emergency Assistance
if Your Car breaks down or is involved in an accident.
All accidents must be reported within 24 hours or the next working day of the incident
regardless of whether it will lead to a claim.

POLICY NUMBER : PNPV2018-00005709

About this policy

Premium paid : S\$927.14 **Coverage start date** : 24/04/2018
(inclusive of GST) **Coverage end date** : 23/04/2019

Who is insured to drive: : You and any Authorised Driver

Plan Type : CLASSIC

About you (As the policyholder)

Your name : CHEONG KAH WAI
Address : 15 Jalan Chermay Seletar Hills Estate Singapore 809325
Email : wensdf9875@yahoo.com.sg

NRIC/FIN : S6807007D **Date of birth** : 14/02/1968
Marital status : Single **Gender** : Female
Current no claims discount : 50% **Mobile Number** : 98557598
Years of driving experience : Three or more **Certificate of merit** : Yes

About your car

Car make and model : MERCEDES BENZ S300L
Year of first registration : 2009
Car plate number : SKD8064G
Issued on: : 03/05/2018

Abhishek Bhatia
 Chief Executive Officer
 FWD Singapore Pte Ltd

Please refer to contract for specific terms, conditions and exclusions of this policy.
 Please immediately inform us at +65 6320-3835 or email us to contact-us@fwd.com if any details in this Car Insurance Summary need to be changed.

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FWD

The following are maximum limits per Accident as defined in the contract.



Emergency assistance	Yes
Third party liability: Death or injury to a third party Damage to a third party's property Legal costs	No Limit S\$5,000,000 S\$3,000
Loss or damage by fire or theft	Market value
Accidental loss or damage to Your car Your car's accessories Personal belongings	Market value S\$500 No
Excess Standard excess Young driver excess Windscreen replacement excess	S\$1,000 S\$2,500 S\$100
Lifetime NCD guarantee	Yes
Towing	S\$300
Safe travel after an accident	S\$40 per occupant
Daily transport allowance	S\$40 per day for 6 days
Replacement keys and locks	No
Personal accident sum insured For the driver For each passenger	S\$30,000 S\$10,000
Guardian angel benefit	S\$250,000
Extended workmanship guarantee (for repairs done by FWD Premium Workshops)	Yes
New car replacement (if Your Car is written off while less than one year old)	Yes
Car repairs at FWD premium workshops	Yes

Sketch Plan Pg. 4

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S6807007D

Name
CHEONG KAH WAI



張家慧
Race
CHINESE
Date of Birth 14-02-1968 Sex F
Country of Birth SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S6807007D
Name
CHEONG KAH WAI

Birth Date: 14 Feb 1968
Issue Date: 03 Feb 2004

B- Private Hire

C- "

90557598.

ran / m.

no mying.

no video.

24px.

Kean Lee Yiu Qi (M)

2527706


Barcode

NRIC No S6807007D

Blood Group O+ Date of issue 19-11-1994

APT. BLK 401 ANG MO KIO AVENUE 10 #12-607
SINGAPORE 560401

NRIC No S6807007D Date 19-03-2007 No 5709278



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

Class	Description	PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	11 Nov 1997

NP 428A

Barcode Licence No: S6807007D

Accident Photo



Accident Photo



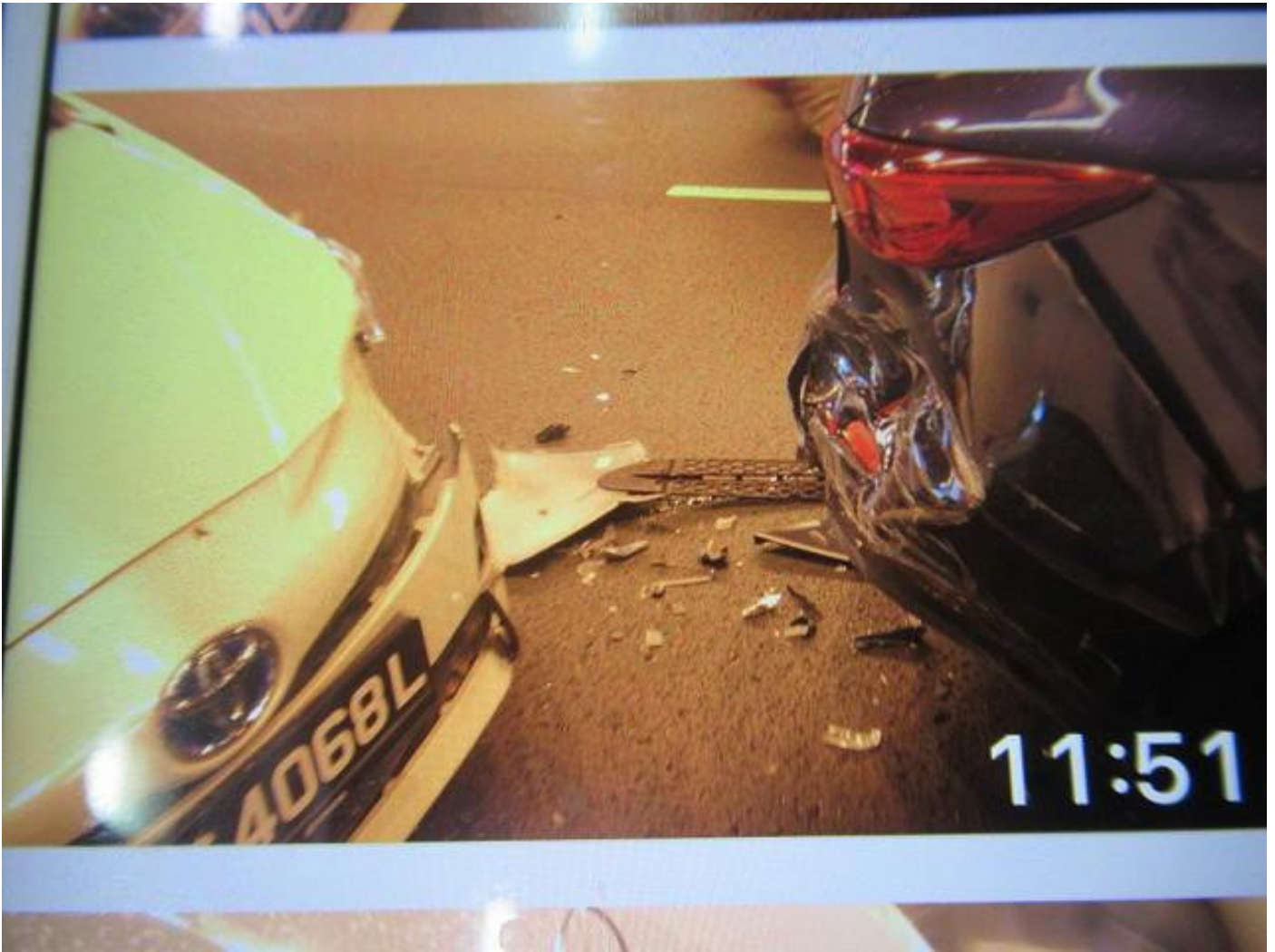
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