

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	24/07/2018 14:24
Date Of Accident	16/07/2018 19:45
Exact Location Of Accident	WEST COAST WALK OPEN SPACE CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGU6207M
Insured/Policyholder	
Name Of Registered Owner	CAI DI'EN KEVIN
NRIC No	S8433926A
Email Address	KEVINCDE1984@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98825525
Alternative Phone No	OFFICE-98825525

Vehicle Particulars

Manufacturer	HONDA
Model	CIVIC-1.8 (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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3056111700
Cover Note Number	

Driver

Name of Driver	CAI DI'EN KEVIN
NRIC No	S8433926A
Date Of Birth	18/10/1984
Occupation	OUTDOOR
Date Of Driving Pass	15/10/2010
Driving Experience	7 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98825525
Fax Number	
Contact Number	OFFICE-98825525
Email Address	KEVINCDE1984@GMAIL.COM

Address	BLK 872B TAMPINES ST 86 #12-77
Postcode	522872
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	SIDE SWIPE
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?	
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

AS PER SKETCH PLAN ATTACHED.

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	SLP8826E
Vehicle Make/Model/Colour	TOYOTA COROLLA ALTIS SILVER COLOUR
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	NG JIN JIE
NRIC/Passport Number	S8315705D
Contact Number	86482518
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2
Passenger 1	NAME: :
	GENDER: :

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: 24/07/2018
2pm

Driver's Signature

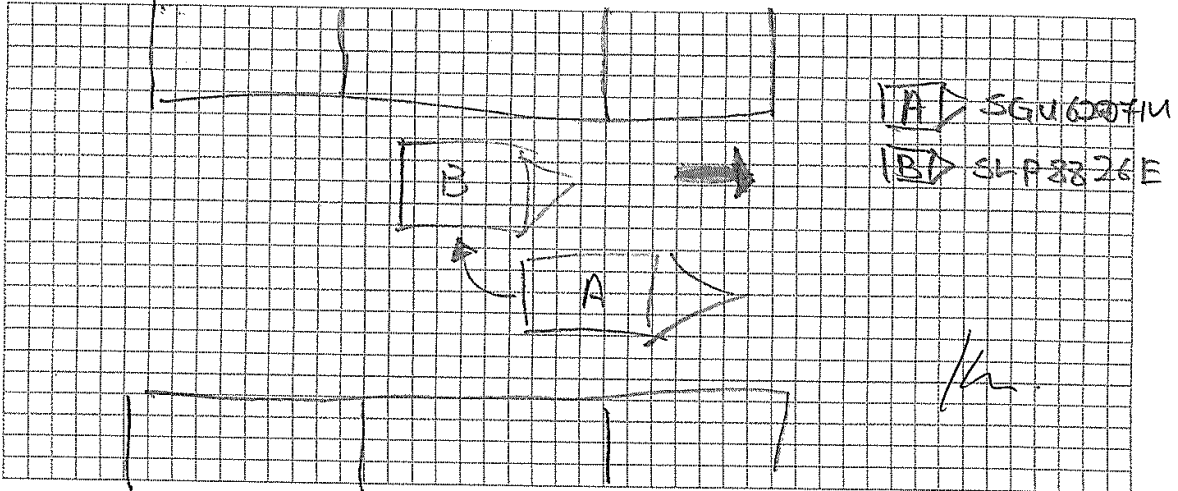
(If driver is not the policyholder)
Date & Time:



Reporting Centre Personnel's Signature

Name: Saly
NRIC/FIN No.: 57842

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I am reversing into the parking lot, suddenly I bang onto the side door of a Vehicle (SLP8826E).

I have repaired my car Vehicle (SGU6207M).

DECLARATION

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

Policyholder's Signature

Date & Time: 24/07/2018

Driver's Signature

(If driver is not the policyholder)

Reporting Centre Personnel's Signature

Name: Sahy





中国太平
CHINA TAIPING

中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

3 Anson Road #16-00 Springleaf Tower Singapore 079909
Tel: 6389 6111 Fax: 6222 1033
Website: www.sg.cntaiping.com
Co. Reg. No. 200208384E

Our Reference: **SNM18D03557/C01/7**

Date: **19 JULY 2018**

via Ordinary & Registered Mail



CAI DI'EN, KEVIN
BLK 872B TAMPINES STREET 86
#12-77
SINGAPORE 522872

DMPCSN 3056 111700
14/7/2017
20/11/2018
comprehension

Dear Sir / Madam

ACCIDENT INVOLVING SGU6207M AND SLP8826E ON 16 JULY 2018
ALONG WEST COAST WALK OPEN SPACE CARPARK

We refer to the abovementioned accident.

Please be advised that the third party vehicle, **SLP8826E**, is filing a third party property claim against your vehicle.

We have appointed **LKK Auto Consultants Pte Ltd**, to administer the said claim on our behalf and they will soon contact you for more information about the accident. Kindly render your assistance and co-operation accordingly.

We understand that you or your driver has not filed an accident report within 24 hours as per Motor Claims Framework. We would urge you to comply with the condition to file your accident report with your vehicle (whether damaged or not) to us IMMEDIATELY through **LKK Auto Consultants Pte Ltd** or any of our **authorized workshops**. You may log onto our website www.sg.cntaiping.com for location of the respective workshops.

We regret to advice that we and/or **LKK Auto Consultants Pte Ltd** will not be handling the third party claim and your **NO CLAIM DISCOUNT** will be penalized upon renewal of your policy if you fail to comply with the condition of reporting.

Yours truly,
Claims Department


(This is a computer generated letter and no signature is required.)

CC : LKK Auto Consultants Pte Ltd
Attn : VIVIAN
Ref : CC6/CT118013161/AWA3
Contact No : 68418625
via Email : VIVIAN@LKKAUTO.COM

CC : Agent - (AN0613A) - AUTO WORLD PTE LTD

F02/LKKDSANR-2013

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8433926A



Name
CAI DI'EN, KEVIN

蔡迪恩

Race
CHINESE


Date of birth
18-10-1984

Sex
M

Country of birth
SINGAPORE

3776336

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S8433926A

Name
CAI DI'EN, KEVIN

Birth Date: 18 Oct 1984

Issue Date: 26 May 2005


001344233C

owner/driver

3776336



NRIC No: S8433926A



Date of issue
15-09-2005

APT BLK B728 TAMPINES STREET 86 #12-77
SINGAPORE 522672

NRIC No: S8433926A Date: 05/09/2017

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

	PASS DATE
Class 2B Motorcycles <= 200 CC	26 May 2005
Class 2A Motorcycles between 201 CC and 400 CC	06 May 2008
Class 3 Motor cars <= 3000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg	15 Oct 2010

S/No. 9000134475

S8433926A

Licence No: S8433926A

IP 428A

SCENE PHOTO



SCENE PHOTO



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