

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 | 25/07/2018 14:53 |
| Date Of Accident | 15/07/2018 13:45 |
| Exact Location Of Accident | LORONG AH SOO BLOCK 132 CARPARK |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|--------------------------|
| Vehicle Registration Number | GV672L |
| Insured/Policyholder | |
| Name Of Registered Owner | BIZ 21 MARKETING |
| Co Reg No | 52842887W |
| Email Address | WILLIAMTOHWT@HOTMAIL.COM |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-62479363 |

Vehicle Particulars

| | |
|--|--------------------|
| Manufacturer | TOYOTA |
| Model | LITEACE |
| 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 | COMMERCIAL VEHICLE |

Insurance Company

| | |
|---------------------------|---|
| Name of Insurance Company | CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. |
| Type Of Coverage | THIRD PARTY FIRE AND/OR THEFT |
| Fleet Policy | NO |
| Policy Number | DMCVSN3066411701 |
| Cover Note Number | |

Driver

| | |
|----------------------|------------------------|
| Name of Driver | LIM KOK ENG |
| NRIC No | S1418856H |
| Date Of Birth | 25/05/1960 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 07/08/1978 |
| Driving Experience | 39 YEARS AND 11 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-96492633 |
| Fax Number | |
| Contact Number | |
| EEmail Address | NOEMAIL |

| | |
|---|------------------------------------|
| Address | BLOCK 301B ANCHORVALE DRIVE #14-49 |
| Postcode | 542301 |
| Was driver an employee of the Insured's Company | YES |
| If No, Relationship of the Driver with the Insured | |
| Vehicle Registration Number of Driver's Own Vehicle | - |
| | - |
| | - |
| Insurance Company of Driver's Own Vehicle | - |
| | - |
| | - |

General Information of the Accident

| | |
|--------------------|------------------------------|
| Type Of Accident | COLLIDED INTO PARKED VEHICLE |
| 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? | NO |
| 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

WHEN I DID A REVERSE PARKING INTO ONE OF THE PARKING LOT AT CARPARK OF BLOCK 132 LORONG AH SOO, I ACCIDENTALLY HIT ONTO THE FRONT RIGHT PORTION OF A PARKED VEHICLE.

Attachment(s)

| | |
|---|-----|
| Are accident photos available for attachment? | YES |
| Was there any video captured by Car Camera? | NO |
| Was there any audio recorded? | NO |

Accident Sketch Plan

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.

BIZ 21 MARKETING
www.biz21mktg.com

Policyholder's Signature

Date & Time: 25/7/18 1050hrs

Driver's Signature

(If driver is not the policyholder)

Date & Time: 25/7/18 1050hrs

Reporting Centre Personnel's Signature

Name: Cassandra

NRJC/FIN No.:

Accident Sketch Plan

SKETCH PLAN

Diagram illustrating the accident scene on a grid. Vehicle A is positioned vertically, and Vehicle B is positioned horizontally, overlapping the front right corner of Vehicle A. Handwritten notes on the right side of the grid:

DoA: 15-7-2018
A: 6V672L
B: Unknown

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

When I did a reverse parking into one of the parking lot at carpark of Block 132 Lorong Ah Seng, I accidentally hit onto the front right portion of a parked vehicle.

DECLARATION

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

BIZ 21 MARKETING
www.biz21marketing.com

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.:



Identification Card

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S1418856H**



Name
LIM KOK ENG
林國榮

Race
CHINESE

Date of Birth
25-05-1960

Sex
M

Country of Birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S1418856H**
Name
LIM KOK ENG

Birth Date **25 May 1960**
Issue Date **20 Jun 2003**



000534272E

Driving Licence

04 11 15



NRIC No: S1418856H



Blood Group: O+ Date of issue: 14-07-1992

APT BLK 301B ANCHORVALE DRIVE #14-49
SINGAPORE 542301


NRIC No: S1418856H Date: 07-12-2000 No: 3908163

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

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE 07 Aug 1978

Licence No: S1418856H





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

