

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	21/07/2018 11:03
Date Of Accident	20/07/2018 11:00
Exact Location Of Accident	ANG MO KIO AVE 3 TOWARDS CTE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFR118D
Insured/Policyholder	
Name Of Registered Owner	CHUA BAN YONG
NRIC No	S0221258G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94675577
Alternative Phone No	OFFICE-94675577

Vehicle Particulars

Manufacturer	BMW
Model	-

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? YES

If No, Please state action to be taken

Vehicle Category	PRIVATE CAR
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Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3009171801
Cover Note Number	

Driver

Name of Driver	CHUA YEW AIK
NRIC No	S7920789F
Date Of Birth	25/07/1979
Occupation	INDOOR
Date Of Driving Pass	28/01/2013
Driving Experience	5 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94675577
Fax Number	
Contact Number	OFFICE-94675577
Email Address	NOEMAIL

Address	-
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

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: : GRANDMOTHER GENDER: : FEMALE

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 attached report.

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	SLN2046P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
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)

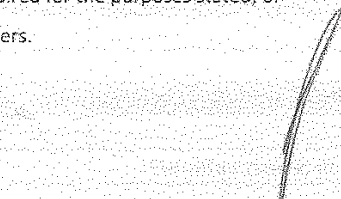
I understand, acknowledge, agree and consent that:

- (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.



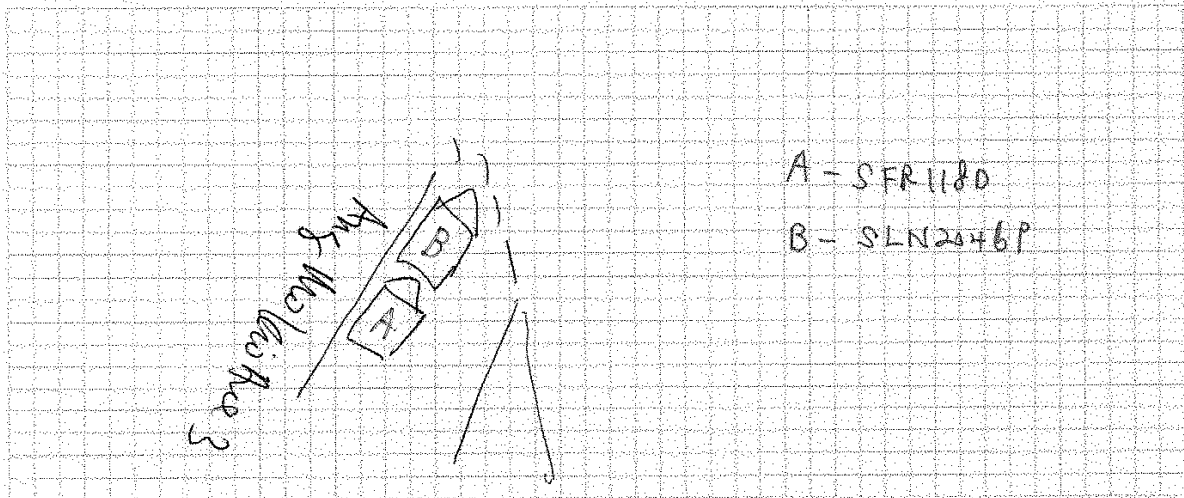
Policyholder's Signature
Date & Time:

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



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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As I was approaching the dip road, I checked that the front car was proceeding to move to the main road when suddenly the car suddenly stop and I ~~was~~ could not stop in time and hit onto his rear.

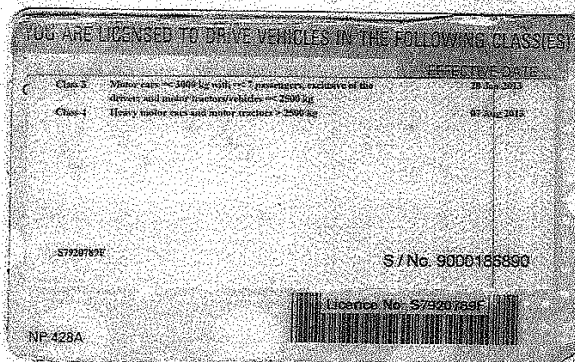
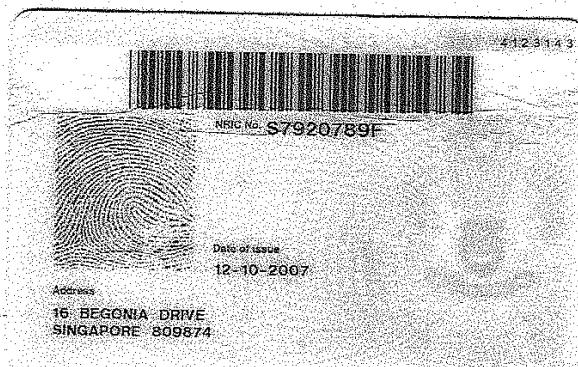
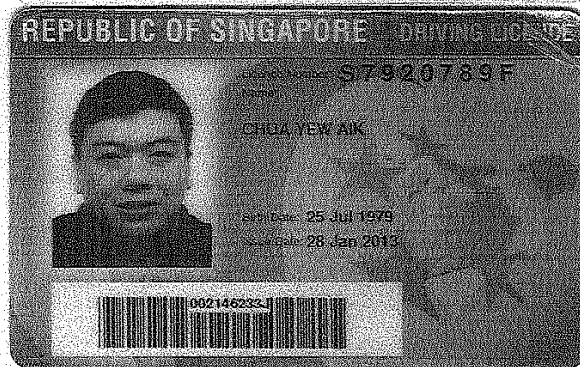
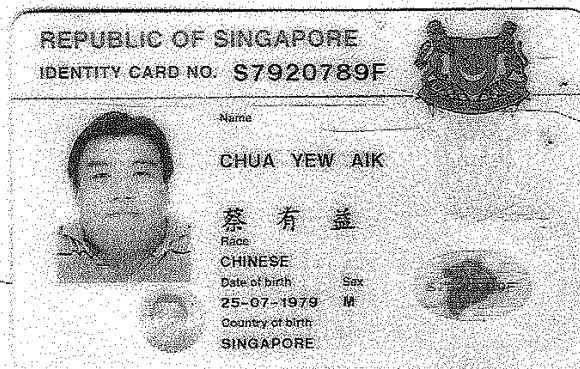
DECLARATION

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.:





Enquire Vehicle Registration Details

Owner Particulars

NRIC/Passport /Company Cert No.: S0221258G
 Owner ID Type: Singapore NRIC
 Owner Name: CHUA BAN YONG
 Registered Address: 16 BEGONIA DRIVE SINGAPORE 809874
 Mailing Address: -
 Birth Date: 09 Jun 1954

Vehicle Particulars

Vehicle No.: SFR118D
 Previous Vehicle No.: SGX7667X
 Effective Date of Ownership: 07 Feb 2017
 Original Regn Date: 03 May 2011
 Registration Date: 03 May 2011
 Year of Manufacture: 2011
 Vehicle Type: Passenger Motor Car
 Vehicle Scheme: -
 Vehicle Attachment 1: With Sun Roof
 Vehicle Attachment 2: -
 Vehicle Attachment 3: -
 Vehicle Make: B.M.W.
 Vehicle Model: 740LI 3.0L A/T ABS D/AB 2WD 4DR HID SR
 Primary Colour: Black
 Secondary Colour: -
 Passenger Capacity: 4
 Chassis No.: WBAKB42070CY83596
 Engine No.: 15767693N54B30A
 Engine Capacity /Power Rating: 2979 cc / -
 Maximum Power Output: 240.0 kW (321 bhp)
 Propellant: Petrol

Accident Sketch Plan Pg. 1

Max Unladen Weight:	1895 kg
Maximum Laden Weight:	2525 kg
Open Market Value:	\$84,050.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	02 May 2021
Minimum PARF Benefit:	\$42,025.00
No. of Transfers:	1
IU Label No.:	1124153767
COE No.:	2011030107000488D
COE Expiry Date:	02 May 2021
COE Category:	E - Open Category
COE Registration Category:	B - Car (1601cc & above)
Quota Premium (QP) / Prevailing Quota Premium:	\$62,001.00 / -
Actual QP Paid:	\$62,001.00
QP (Regn Cat):	\$62,000.00
OPC Cash Rebate Eligibility:	No
QP during COE Bidding Exercise:	\$62,001.00
Additional Registration Fee Rate:	100.00 %
Actual ARF Paid:	\$84,050.00
Vehicle Lifespan Expiry Date:	No Lifespan
CO2 Emission:	-
CO Emission:	-
HC Emission:	-
NOx Emission:	-
PM Emission:	-
Message:	COE rebate, if applicable, will be based on the QP of \$62,000.00. This is the lower of QP from Category E and the corresponding Category B in the same tender exercise. To renew the COE, the Prevailing Quota Premium payable is that of Category B.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo



Accident Photo



Accident Photo

