

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 16:39
Date Of Accident	25/07/2018 13:55
Exact Location Of Accident	JALAN TOA PAYOH
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGG3975Y
Insured/Policyholder	
Name Of Registered Owner	CHU CHIN SENG
NRIC No	S1519853B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92213957
Alternative Phone No	OTHERS-92213957

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	PTE 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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3041731802
Cover Note Number	10/05/2018 - 09/05/2019

Driver

Name of Driver	CHAN BEE YEONG
NRIC No	S1622568A
Date Of Birth	22/01/1963
Occupation	INDOOR
Date Of Driving Pass	29/03/2017
Driving Experience	1 YEAR AND 3 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-92979400
Fax Number	
Contact Number	
EEmail Address	HYCS_KAREN@SINGNET.COM.SG

Address	BLK 246 BISHAN ST 22 #05-342
Postcode	570246
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	CHAIN COLLISION
Weather Conditions	DRIZZLING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	3
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: : LISA KONG 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 TO STATEMENT

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGD6072Z
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)	1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMC4224A
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)	1

Sketch Plan

SKETCH PLAN

VEHICLE NO.: S66 3975Y
INSURER : China
DATE & TIME: 25/07/18 @ 1355

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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: Samy (AMK) 25/07/18
NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN

PIE

Bus Stop

Trellis Tower

A: SGG 3975Y / 1w / passenger: (Lisa Kong-F)

B: SGD 6072Z (alone)

C: SMC 4224A (alone)

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Vehicle No: SGG 3975Y (China)

Date & Time: 25/07/2018 @ 1355 (Drizzling/Wet)

Motor car SGD 6072Z sudden e-brake in front, as such i follow too but couldn't in time and my vehicle front portion had hit onto the rear of SGD 6072Z. Upon blighting, i then realised there was another vehicle, SMC 4224A in front of SGD 6072Z and was involved in the ~~at~~ accident as well. I was involved in a 3 car chain collision with no one injured.

Note : Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy 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.:

GiARMC SketchPlanForm_V3

() Claim Own Policy () Claim Third Party ☒ Reporting Only
() Claim OD/TP at other workshop ()

Sketch Plan #3

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: **S1519853B**

Name: **CHU CHIN SENG**

Birth Date: **02 Nov 1962**
Issue Date: **26 Nov 2003**

001018230H

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S1622568A**

Name: **CHAN BEE YEONG**

曾美蓉

Race: **CHINESE**
Date of Birth: **22-01-1963** Sex: **F**
Country of Birth: **SINGAPORE**

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: **S1622568A**

Name: **CHAN BEE YEONG**

Birth Date: **22 Jan 1963**
Issue Date: **29 Mar 2017**

002570529C

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	16 Nov 1987
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	24 Nov 1998
Class 5	Motor Vehicles which are not constructed themselves to carry any load and the weight of which unladen exceeds 7250 kilograms	02 Feb 1999

NP 428A

License No: **S1519853B**

1940753

Barcode

MPC No: **S1622568A**

Address: [Redacted]

Blood Group: **B+** Date of issue: **25-04-1994**

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

Class	Description	EFFECTIVE DATE
Class 3A	Motor cars without clutch pedals (Auto) with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight $\leq 2500\text{kg}$	29 Mar 2017

NP 428A

License No: **S1622568A**

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

