

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	30/07/2018 11:32
Date Of Accident	27/07/2018 20:30
Exact Location Of Accident	JUNC DELTA RD & ALEXANDRA RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKC6217G
Insured/Policyholder	
Name Of Registered Owner	NG YING KOW
NRIC No	S1066224I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96690050
Alternative Phone No	OFFICE-96690050

Vehicle Particulars

Manufacturer	PEUGEOT
Model	508 1.6A TURBO ALLURE PLUS
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	B27193542SVP
Cover Note Number	

Driver

Name of Driver	NG JUN HAN, CALVIN
NRIC No	S8904788I
Date Of Birth	31/01/1989
Occupation	INDOOR
Date Of Driving Pass	20/01/2010
Driving Experience	8 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81266933
Fax Number	
Contact Number	OFFICE-81266933
Email Address	NOEMAIL

Address	3 MARIAM CLOSE
Postcode	508651
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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)	3
Passenger 1	NAME: : - GENDER: : MALE
Passenger 2	NAME: : - 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	GZ5767T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	NARASIMAN S/O JAYARAM
NRIC/Passport Number	S7133161Z
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver) 1

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.

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.:

Accident Sketch Plan

SKETCH PLAN

Delft Rd

Bijlmer

B

A

A: 5XC 62176

B: G25767T

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to statement.

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 Person's Signature
Name:
NRJC/FIN No.:

Accident Sketch Plan

TO WHOM IT MAY CONCERN :

Incident Report

27 Jul 2018, Approx 20:30 hours

I was on the rightmost lane, preparing to turn right at the junction connecting Delta Road-Lower Delta Road and Alexandra Road-Ganges Avenue. Delta House is on my right.



(Orange arrow indicates my direction of travel.)

I was second in line in the rightmost lane, with van bearing registration GZ5767T driven by one Mr. Narasimman (S7133161Z) in front of me. When the green arrow came on the first time, the said van did not move and the next traffic cycle continued. When the green arrow came on the second time, I sounded my horn to bring to the van driver's attention that we were waiting for him to move.

The van did not respond immediately, but after a pause, started to rollback. Eventually, the van bumped into my vehicle's front despite me sounding the horn. After a short pause, the van continued to perform a right turn despite having bumped into me. Instead of getting off, I therefore followed the van.

I was expecting the van to pull over at the nearest convenient location. However, the van continued driving for a distance and I began to follow while high-beaming it to get its attention.

Eventually, the van turned into a housing block area along Henderson Road and entered carpark (BMHE1). Even till this point, the driver seemed more lost and unaware that he had actually reversed into me. After touring the car park at a very slow pace, he tried to exit the carpark when my friend who was my passenger stopped him.

Accident Sketch Plan

I walked over to him and when he wound down his driver window, I noted that he looked extremely fatigued. I explained to him that he had reversed his vehicle into me and would like to exchange details. He seemed more in a daze and refused initially but I explained that this was required procedure. As he was holding up traffic, I suggested that he park first so that we could sort matters out.

While he was parking his van, I noted that he had significant difficulty gauging distances. Although he did not hit other vehicles, he took a long time to determine the distance he had in front and at the back of his vehicle. This can be referenced in the videos taken.

After he had parked, I spoke with him again to exchange details and he continued to be reluctant. At some point, he mentioned that he was not supposed to be driving the vehicle but I insisted on seeing his particulars. I offered my ID to him as well.

After exchanging our IDs, I told him that I was leaving and proceeded to take some photos of the van's rear and then photos of the front of my vehicle. Upon seeing this, he also exited his vehicle and did the same. I waited for him to be done and once again checked with him if it was fine with him that I left.

Upon entering my vehicle, the time was 20:39hrs.



034047831 / NA JUN HAN, CALVIN

SKL 6217 G

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo

