

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	03/08/2018 09:43
Date Of Accident	02/08/2018 16:10
Exact Location Of Accident	HOUGANG AVENUE 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE3602T
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Insured/Policyholder

Name Of Registered Owner	PHARMED IMPORT & EXPORT PTE LTD
Co Reg No	198400783H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-63374855

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE-3.0 D DX TURBO MT 2WD 4DR (M)
Exact Purpose for which vehicle was being used at time of accident	DELIVERY 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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	QBE INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	8-V0013923-MVR-R001
Cover Note Number	06/11/2017 TO 05/11/2018

Driver

Name of Driver	SEAH ENG HWA
NRIC No	S1434083A
Date Of Birth	31/07/1960
Occupation	OUTDOOR
Date Of Driving Pass	07/05/1985
Driving Experience	33 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98339124
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLOCK 509 WEST COAST DRIVE #10-277
Postcode	120509
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	CHAIN COLLISION
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?	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

On 02/08/2018 at about 1610, I was driving my vehicle (A: GBE3602T) on the centre lane along Hougang Avenue 3 heading towards Eunos Link. The vehicle (C: GBE8247C) which was travelling in front of me slowed down and stop due to vehicles ahead stopped and I followed suit. Suddenly, I felt a great impact of my vehicle's rear portion caused my vehicle push forward hit onto rear portion of vehicle C. I alighted and discovered that is a chain collision total involve 3 vehicles. The vehicle (B: YP2481B) hit onto my vehicle's rear portion caused my vehicle pushed forward hit onto rear portion of vehicle C. Nobody was injured in this accident. Three vehicle have no passenger on board.

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	YP2481B
Vehicle Make/Model/Colour	HINO
Details Of Properties	LORRY
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	HAN KOK MENG
NRIC/Passport Number	S1366516H
Contact Number	97391140
Address	BLOCK 843 TAMPINES STREET 83 #05-132
Postcode	520843
Insurance Company Name	

Nature Of Damage	FRONT PORTION
No. Of Passenger (Including Driver)	1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GBE8247C
Vehicle Make/Model/Colour	NISSAN NV200
Details Of Properties	VAN
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	HENG TECK CHOON
NRIC/Passport Number	S0220783D
Contact Number	96795501
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	REAR PORTION
No. Of Passenger (Including Driver)	1


SKETCH PLAN

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8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

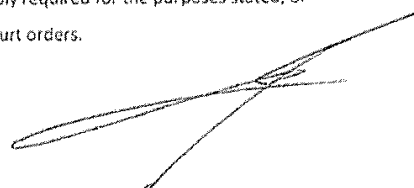
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "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:
3/8/2018
@ 1508

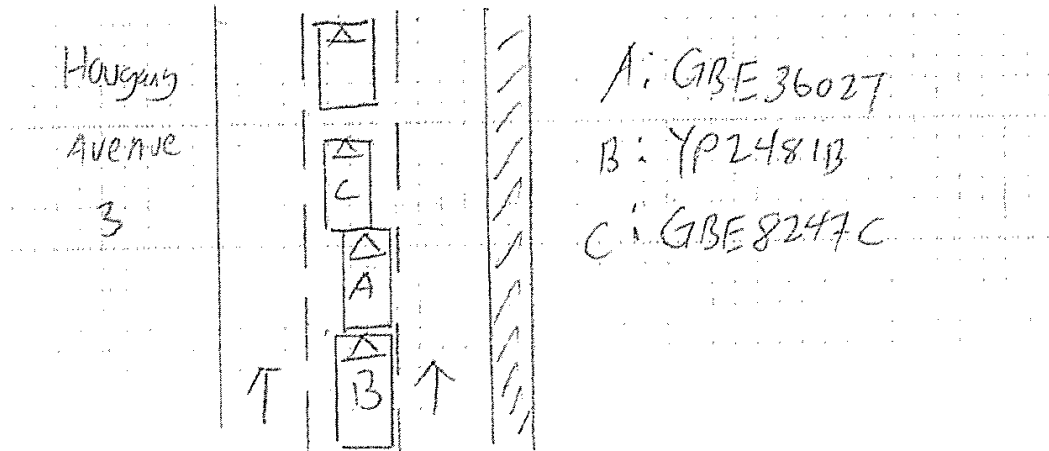

Driver's Signature

(If driver is not the policyholder)
Date & Time: 05/08/2018 @ 1000hrs


Reporting Centre Personnel's Signature

Name: Lam Wei Sheng
NRIC/FIN No.: G6864052R

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to CIA report

DECLARATION

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

Policyholder's Signature
Date & Time:

3/8/18
@ 150P



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

03/08/2018 @ 1000hr

Reporting Centre Personnel's Signature
Name: Lam Wai Shun
NRIC/FIN No.: G16864052A

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo

