

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	13/08/2018 15:01
Date Of Accident	12/08/2018 15:20
Exact Location Of Accident	BLK 701A TAMPINES ST 71 MULTI STOREY CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKT2782C
Insured/Policyholder	
Name Of Registered Owner	HUANG YIPING
NRIC No	S7073846E
Email Address	JENNY.NGUNIFORM@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-97426086
Alternative Phone No	OFFICE-64881239

Vehicle Particulars

Manufacturer	AUDI
Model	A3-1.4 SEDAN TFSI (AMBIENTE) (A)
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	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	UNITED OVERSEAS INSURANCE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DH0M120034341800
Cover Note Number	

Driver

Name of Driver	HUANG YIPING
NRIC No	S7073846E
Date Of Birth	17/12/1970
Occupation	INDOOR
Date Of Driving Pass	22/05/2000
Driving Experience	18 YEARS AND 2 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97426086
Fax Number	
Contact Number	OFFICE-64881239
Email Address	JENNY.NGUNIFORM@YAHOO.COM.SG

Address	APT BLK 961 HOUGANG AVE 9 #02-576
Postcode	S530961
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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 ON 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	
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

TRAVELLING STRAIGHT IN THE CAR PARK WHEN SUDDENLY VEHICLE SLL1023Y EXIT FROM PARKING LOT & COLLIDED ONTO MY 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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLL1023Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Nature Of Damage	
No. Of Passenger (Including Driver)	

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: WONG SU
NRIC/FIN No.: 62341909P



[illegible]

Blk 701A Tampines St 71
Carpark level 3

SKT 7782C

SL11023Y

A hand-drawn diagram of a 3D object, possibly a mechanical part, with arrows pointing to labels. The object is a rectangular block with a triangular prism attached to its top surface. An arrow points from the label "SKT 7782C" to the base of the block. Another arrow points from the label "SL11023Y" to the top surface of the block.

Travelling straight in the car park when suddenly vehicle SLK1073Y exit from the parking lot & collided onto my car.

Travelling straight in the car park when suddenly vehicle SLK 1073Y exit from the parking lot & collided onto my car.

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

Policyholder's Signature

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

Name: Tan Feng Su
NRIC/FIN No.: E5334001F



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo



Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
 6 Raffles Quay #18-00 Singapore 048580
 Tel (65) 6224 0010 Fax (65) 6224 0030
 Operating Hours : Monday to Friday, 09:00 – 17:00
 UEN: S66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MPA118104244 Vehicle Registration No : STH2782C
 Name (as shown in NRIC) : Hong Yiping NRIC/FIN/Passport No : S1073846E
 (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
 Address : Blk 961 Happing Avenue 9 #02-576 Singapore 530961 Singapore ()
 Contact (Tel) : _____ Mobile No. : 91426086
 Email Address : jenny.ng.uniform@syntex.com.sg
 Date of Accident : 13/08/2018 Time of Accident : 1500H
 Place of Accident : Blk 701A Tampines MLSC
 Insurance Company : UOI

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

To upload 10 photos of vehicle.



Policyholder / Driver's Signature
 Date:



Reporting Centre Personnel's Signature
 Name: lan Eng SJ
 NRIC/FIN No.: G5334909P
 Date: 14/08/2018