

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	18/08/2018 16:16
Date Of Accident	17/08/2018 12:15
Exact Location Of Accident	TAMPINES ONE SHOPPING MALL (B2 CARPARK)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX9520M
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD SAIFULNAZRI BIN SARDANI
NRIC No	S8520404A
Email Address	IZYAN_MELLYNA@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90675370
Alternative Phone No	OTHERS-96156960

Vehicle Particulars

Manufacturer	VOLVO
Model	XC60 T5 2.0 AT ABS D/AB 2WD 5DR TURBO
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3052411800
Cover Note Number	

Driver

Name of Driver	IZYAN MELLYNA BINTE ISHAK
NRIC No	S8520404A
Date Of Birth	21/05/1987
Occupation	INDOOR
Date Of Driving Pass	24/04/2009
Driving Experience	9 YEARS AND 3 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90675370
Fax Number	
Contact Number	OTHERS-96156960
EEmail Address	IZYAN_MELLYNA@GMAIL.COM

Address	BLK 562B PASIR RIS STREET 51 #09-513
Postcode	512526
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	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: : HUSBAND GENDER: : MALE

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

PLEASE REFER TO SKETCH PLAN (TYPE OF COLLISION IS THIRD PARTY REVERSE AND HIT INSURED)

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	SLL3172L
Vehicle Make/Model/Colour	NISSAN QASHQAI
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	97735352
Address	
Postcode	
Insurance Company Name	
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:

15/8/2018 1609

Driver's Signature
(If driver is not the policyholder)

Date & Time:

13/8/2018 1609

Reporting Centre Personnel's Signature

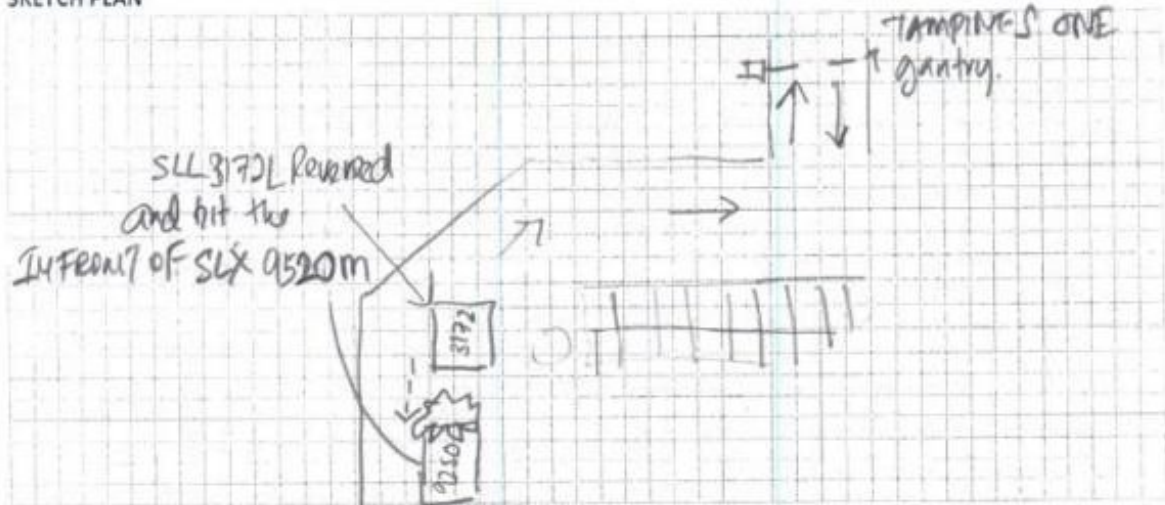
Name:

NRIC/FIN No.:

18/08/2018
GOSD NATHAN

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I, IRYAN MELYNIA BTE IRHAK, DRIVER OF SLX9520M, WAS DRIVING OUT OF TAMPINES ONE REACEMENT TWO CARPARK (B2) WHEN A WHITE NISSAN QASHQAI SLL3172L STOPPED AT LEAST FOUR (4) METERS IN FRONT OF OUR VEHICLE. WE ALSO STOPPED UPON NOTICING.

WITHIN A FEW SECONDS, THE WHITE NISSAN QASHQAI SLL3172L SUDDENLY REVERSED, DESPITE SOUNDING ~~THE~~ MY HORN TO ALERT THE DRIVER. THE WHITE NISSAN QASHQAI SLL3172L HIT THE FRONT BUMPER OF OUR CAR, CAUSING ~~TO BE~~ DAMAGE TO THE LICENCE PLATE OF OUR VOLVO SLX9520M AND TO THE FRONT BUMPER. THERE WAS A SCRATCH FOUND ON THE FRONT BUMPER OF THE VOLVO SLX9520M.

THE DRIVER OF THE NISSAN QASHQAI SLL3172L, A MALE CHINESE MAN IN HIS 50s, BY THE NAME - CHEW, ACKNOWLEDGED HIS MISTAKE. ~~AND~~ ~~OK~~.

DECLARATION

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

Policyholder's Signature

Date & Time:

18/8/2018 1618

Driver's Signature

(If driver is not the policyholder)

Date & Time:

18/8/2018 1618

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

18/8/2018

ROSA NATHAN

ID

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S8714079B**



Name
IZYAN MELLYNA BINTE ISHAK

Race
JAVANESE

Date of birth
21-05-1987

Country/Place of birth
SINGAPORE

Sex
F



REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number **S8714079B**

Holder
IZYAN MELLYNA BINTE ISHAK

Birth Date **21 May 1987**

Issue Date **24 Apr 2009**



001735560E

5757489



NRIC No. **S8714079B**



Date of issue
19-06-2017

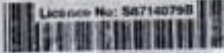
Address
**APT BLK 526B PASIR RIS STREET 51
#09-S13
SINGAPORE 512526**

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

CLASS DATE
24 Apr 2009

Class 3A Motor cars without clutch pedals (Auto) $\leq 3000\text{kg}$
with ≤ 7 passengers, exclusive of the driver; and
other motor vehicles without clutch pedals $\leq 250\text{kg}$

Licence No: **S8714079B**



NP 423A

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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: S665500200 / 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 : MNA18107638 Vehicle Registration No: SLX 9520M
Name (as shown in NRIC) : IZAN MAWYUA BIN KISHAK NRIC/FIN/Passport No : S8520406A
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore ()
Contact (Tel) : _____ Mobile No. : 90675370
Email Address : _____
Date of Accident : _____ Time of Accident : _____
Place of Accident : TOMPKINS ONE SHOPPING MALL (B2 CARPARK)
Insurance Company : CHINA AIRWAYS

(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:

INSURED VEHICLE NUMBER IS SLX 9520M ON SCRAM

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name: Rafiq Wathiq
NRIC/FIN No: 30108/2018
Date: