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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	23/08/2018 20:04
Date Of Accident	20/08/2018 14:00
Exact Location Of Accident	ALONG TIONG BAHRU MARKET
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBH452M
Insured/Policyholder	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	200710651D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96840720
Alternative Phone No	OFFICE-96840720
Vehicle Particulars	
Manufacturer	FIAT
Model	DOBLO CARGO MAXI 1.6 MTJ AMT GLAZE
Exact Purpose for which vehicle was being used at time of accident	GOING FOR LUNCH
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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD18V00032/VCZ/R03
Cover Note Number	
Driver	
Name of Driver	CHIN FUN BOON (ZENG FANWEN)
NRIC No	S7925727C
Date Of Birth	05/09/1979

NRIC No S7925727C

Date Of Birth 05/09/1979

Occupation OUTDOOR

Date Of Driving Pass 31/05/2004

Driving Experience 14 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96840720

Fax Number

Contact Number OTHERS-96840720

EMail Address NOEMAIL

Address BLK 780 YISHUN RING ROAD

#10-3560

Postcode 760781

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident SIDE SWIPE
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

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name KRETA AYER NEIGHBOURHOOD POLICE POST

NO

NO

1

Police Station Address ROAD: 32 NORTH CANAL ROAD, POSTCODE: 059282, COUNTRY:

SINGAPORE

Police Station Contact **TEL NO**: 1800-5359999 - **FAX NO**: 62362541

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

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 SLE6973J

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver LEVERMANN ANJA

NRIC/Passport Number G3255608L Contact Number 91706876

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- 1. Places report consolly the details of the accident to speed up the claims process.
- This Fairt must be consisted by the Policyholder and/or the Authorised Driver.
- Information provided must be as triabilities and accutate as nogable. Any withit micropresentation or withholding of material facts may allow incurrence companies to impurious possess labelity.
- 4. The insure and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- I. Any false reporting may be referred to the Traffic Police Department for investigation.
- This report will be forwarded by the insurers to the QIA Records Mangement Centre establised by the General insurance Association of Simple (GIA) for archiving and that object of this report will for a fee be made available upon application by interested parties.
- by the loopermost of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report brong made evaluate aferesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

Landardiane, apinowledge, agree and consunt that

- (a) My tissine , my workshop and the General Insurance Association of Stripapers ("GIA") maybare permitted to cellect, 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 whiche(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shell be installed to the "Personal", the insurers is an appropriate to the "Personal insurers", the insurers is an appropriate to the police), for the purpose(s) of the purpo
- It processing, handling animal dealing with my claims including the settlement of the oblines and any necessary investigations relating to the observa-
- (ii) www.cligating the socidant and/or my claims;
- (ii) carrying our and/or dealing with my instructions or responding to any enquires by me;
- (v) admentificing my claims (including the malling of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about betweey of the same as well as on the external cover of environmental postages), another
- (v) complying with applicable law in administering, processing, handling and/or dealing with my dains. (millicities) the "Purposes")
- (b) all maintr(s) who have insured vericle(s) involved in this accident and the Insurers' lawyers/law firms, reaylare permitted to collect, use, disclose another process my Personal Information for one or more of the above Purposes; and
- ict my Principal Information may/can be disclosed by any of the Insurers and/or GtA to their third party service providers or agents.

 Circlosing their lawyers/law tirms), which may be sitled outside of Singapore, for one or more of the above Purposes.

Shelich Plan 4.

Accident Sketch Plan

My for Vehicle is parked on a narrow street while a fast m	wing car drive pass and
nit my side mirror. The driver did not stop immediately du with further and we meet to exchange details.	e to many vehicles, he Stop
the opposite driver admired that he is at fault and is will my right side mirror fall off and crack to preces.	ling to pay for the damage.
The appoint driver details:	
Levermann Anja, G325560BL	
Vehicle Number: SLE 6973]	
100	
	P.P. 1 - P.P. 1
	(F) (M)
Neclaration We decard the foregoing particulars are this in every respect.	
The state of the s	/
1) 600 500 See	an 24/08/2018
# 1/2 (m) * //2	M 26/08/1010

POLICE STATEMENT

Annex D

NOTICE OF REPORTING

This is to confirm that Chin Fun Boon (Zeng Fanwen), NRIC

S7925727C, has reported to the Police a non-injury traffic accident which

occurred outside Tiong Bahru Market, after taxi stand

on 20/08/2018 at 02:00pm involving the following vehicles:

V1) GBH452M - right side mirror dislodged

V2) SLE6973J - No damage

V1 was parked along the road (parallel) when V2 drove passed and hit onto V1's right side mirror. Particulars was exchanged.

V2 driver details: Levermann Anja G3255608L Tel: 91706876

2 If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issui	ng Office	er: SI Abdul	Rahim	
Date: 21/9/18	_Time: _	1030hrs		
S/D Ref: LO	_	KRETA AYER NPP		
Police Post/Unit : _		Certificat Continue		

Original - to be issued to informant Duplicate - to be submitted to Traffic Police

























