

## 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	31/08/2018 15:00
Date Of Accident	28/08/2018 14:00
Exact Location Of Accident	HONG HENG GARDEN, 33 SEMBAWANG ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	PA7476U
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#### Insured/Policyholder

Name Of Registered Owner	ACE TRADE FAIR AND EVENT MANAGEMENT
Co Reg No	53159196D
Email Address	SORANGAJE@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81444331
Alternative Phone No	OFFICE-81444331

#### Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	COMMERCIAL VEHICLE

#### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5092270637-01
Cover Note Number	

#### Driver

Name of Driver	MOHAMED YAZID BIN HASSAN
NRIC No	S6900062B
Date Of Birth	02/01/1969
Occupation	OUTDOOR
Date Of Driving Pass	29/12/2003
Driving Experience	14 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81444331
Fax Number	
Contact Number	OTHERS-81444331
Email Address	SORANGAJE@GMAIL.COM

Address	BLK 121 BUKIT MERAH VIEW #05-50
Postcode	151121
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	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
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	5
Passenger 1	NAME: : STUDENT GENDER: : MALE
Passenger 2	NAME: : STUDENT GENDER: : MALE
Passenger 3	NAME: : STUDENT GENDER: : MALE
Passenger 4	NAME: : STUDENT 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

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH OWNER
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLP2741E
Vehicle Make/Model/Colour	RENAULT
Details Of Properties	

Vehicle Category	PRIVATE CAR
Name of Driver	CHEW GUOWEI, ALEX
NRIC/Passport Number	S8609508D
Contact Number	93297737
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## 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.



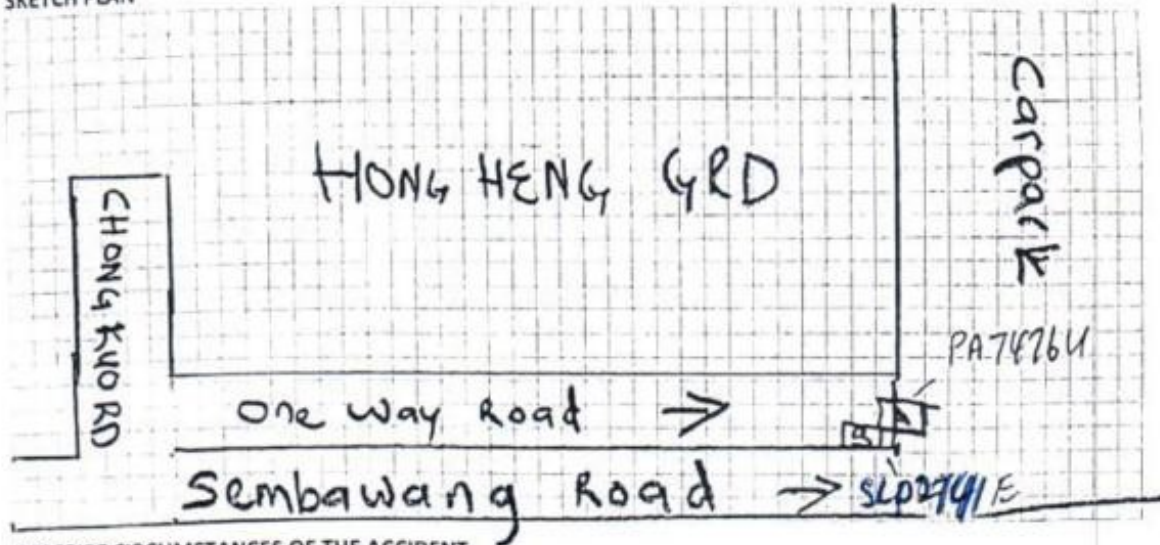
X  
Policyholder's Signature  
Date & Time:

Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 21 AUGUST 2008  
0945 HRS.

Reporting Centre Personnel's Signature  
Name: [Signature]  
NRIC/FIN No: [Signature]

# Accident Sketch Plan

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON THE 28 AUGUST 2018, TIME EST 1400HRS, I drive in a one road of 33 Sembawang Rd. That is my daily routine for dropping off one of the student at the coffee shop. When i was about to turn, i graze on the front right bumper, <sup>as he park near to the stop line</sup> and was a slight scratch after that i stop my van and the driver of the said car, quickly reverse his car and we start our conversation. We agreed to settle privately but on 30<sup>th</sup> of August 2018, He whatsapp me saying that he wanted to settle thru insurance. That small road not meant for parking of vehicle only for dropping off or pick up passenger.

## DECLARATION

I/We declare the following particulars are true in every respect

X Policyholder's Signature  
Date & Time:

Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 31 AUGUST 2018

Reporting Centre Personnel's Signature  
Name: ROSA WATSON  
NRIC/FIN No.:

4-2004/01, 2018/01/01, 2018/01/01

0945405



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



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