

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	21/09/2018 11:26
Date Of Accident	16/09/2018 18:30
Exact Location Of Accident	AT ENTRANCE OF 1.15 COVE VILLAGE CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKK5565R
Insured/Policyholder	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	200710651D
Email Address	THANA5301@GMAIL.COM
Mobile Phone No	(FOREIGN) 016-2836109
Alternative Phone No	OFFICE-84959584

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	COME BACK TO OFFICE AFTER OPERATE LOCKGATE
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	SD18V00034/VPZ/R03
Cover Note Number	

Driver

Name of Driver	THANARAJ SIVAGNANAM
Passport No/FIN	G6725023R
Date Of Birth	20/05/1992
Occupation	OUTDOOR
Date Of Driving Pass	20/06/2017
Driving Experience	1 YEAR AND 2 MONTHS
Gender	MALE
Mobile Number	(FOREIGN) 016-2836109
Fax Number	
Contact Number	OTHERS-84959584
Email Address	THANA5301@GMAIL.COM

Address	35 JALAN NUSARIA 4/11 TAMAN NUSANTARA
Postcode	81550
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	COLLISION - MAJOR/MINOR RD
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

PLEASE REFER TO SKETCH PLAN (TYPE OF COLLISION IS HEAD TO SIDE)

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	SJT6369Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN JINGWEI
NRIC/Passport Number	
Contact Number	83888598
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	3
Passenger 1	NAME: : GENDER: :

Passenger 2

NAME: :
GENDER: :

Sketch Plan

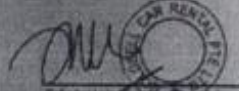
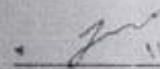
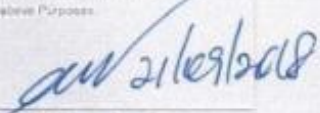
9/21/2018

Photo 3.jpg

SKETCH PLAN

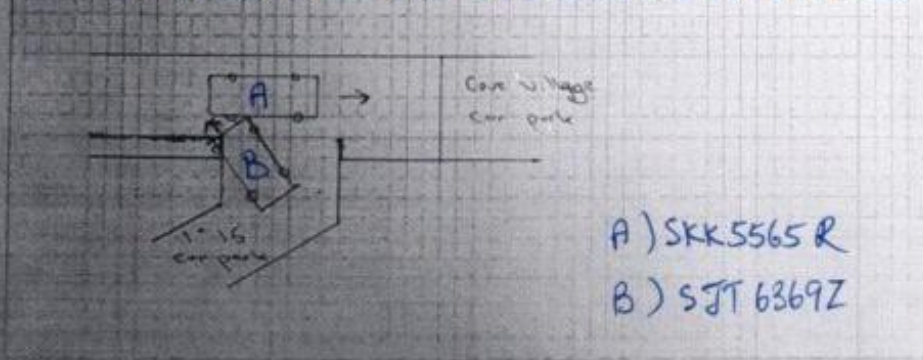
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6. This report will be forwarded by the insurer to the GAA Reports Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application 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 thereof.
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 be 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 accessed 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' law veritas firm, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police, for the purposes) 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 making 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 envelope/personal 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' law veritas firm, may be 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.

Policyholder's Signature, Print Name & Time Owner's Signature (if not the policyholder): Date & Time Witnessed by Reporting Officer/Personnel

Sketch Plan: **AT THE PARKWAY 1-15 COVE VILLAGE CARPARK**



A) SKK 5565 R
B) SJT 6369 Z

Sketch Plan #2

9/21/2018

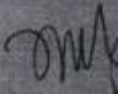
Photo 2.jpg


Describe Circumstance of the Accident

When I was drive towards Ventura Coast Village car park via 1015 ramp a private car came out from the 1015 car park hit the Civic while at round the rear right tire and bumper. The driver didn't stop at the exit of the car park and just accelerate towards my vehicle.

Declaration

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


Signature of driver

*  14/9/18 1452
Driver's Signature of driver is not the policyholder (if Car & Truck)

 21/09/2018
Signature of Third Party (if Car & Truck)

Sketch Plan #3

9/21/2018

Photo 1.jpg

9/16/2018

IMS - View Incident 110676

Attended By:

Cisco Thanaraj, Farid, Jimmy & S/Ranger Shafie



Location:

One 15 Club Resort



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Accident Photo



Accident Photo



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TOYOTA MOTOR CORPORATION

MODEL ZRE141R-GEPEKT 1598 mL

ENGINE 1ZR-EE

FRAME No. MR053REE104164240

COLOR 158 TRIM FA40 PLANT Z35 GVM(kg) -

JUN 13

MADE IN THAILAND