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	25/09/2018 09:01
Date Of Accident	22/09/2018 12:00
Exact Location Of Accident	AT BLK 424C YISHUN AVE 11
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKZ8581U
Insured/Policyholder	
Name Of Registered Owner	LAM SIEW LOON
NRIC No	S7214760Z
Email Address	LAMWILSON99@YAHOO.COM
Mobile Phone No	(LOCAL) +65-97837208
Alternative Phone No	OFFICE-97837208
Vehicle Particulars	
Manufacturer	VOLKSWAGEN
Model	JETTA TSI (DSG) TRENDLINE
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 28683941 AVW
Cover Note Number	
Driver	
Name of Driver	LAM SIEW LOON

Name of Driver LAM SIEW LOOP
NRIC No S7214760Z

Date Of Birth 16/04/1972
Occupation INDOOR
Date Of Driving Pass 05/09/1996

Driving Experience 22 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97837208

Fax Number

Contact Number OFFICE-97837208

EMail Address LAMWILSON99@YAHOO.COM

232 COMMONWEALTH AVE #16-18 Address

COMMONWEALTH TOWERS

Postcode 149740

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

SIDE SWIPE Type Of Accident Weather Conditions **CLEAR** DRY

Road Surface

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

YES Was any other material or property damaged?

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

NO

3

Number of Passengers (Including Driver)

Passenger 1

NAME: : MDM CHIA BOON KEE

GENDER: : FEMALE

Passenger 2 NAME: : PHOEBE NG ZI HUI

> GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

NO

NO

Circumstances of Accident

MORE DETAILS 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 Witness 1

Name MDM CHIA BOON KEE

96918245 Phone Number

Email Address

Details of Witness 2

PHOEBE NG ZI HUI Name

Phone Number 911 80491

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLK7437C

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

HONDA VEZEL

PRIVATE CAR

LEE CHONG JIN LAURENCE(LI ZHANG REN)

S7806959G

92779940

Sketch Plan Pg. 1

SKETCH PLAN

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- The 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 lodgment 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.
- 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

The State of the Control of the State of the Control

Date & Time:

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

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

Sketch Plan #2 Pg 1

OKOLOTT ILLIT#2 T g. T		
SKETCH PLAN	rubbah chyle	B4C
	FRONT ROW	Yishun Avenue 11
DESCRIBE CIRCUMSTANCES OF TH	REAL	
Refer to the	attach went	
to get a gyot Mr Lee Chony Jii it very expensiv alternate wothsho they are not sell workshop is not original paint. In decided to se	ol8, I went to Voigtion for the repair n on the cost of the and he wanted to e and he wanted to p. He found a 3rd ling original paint for able to show proof the end, Mr Lee (the using insyrance.	F. I have m formed \$2000. He said it so source for party workhop but Volkwagen. That that they are using thong Jin has See attached reporting
DECLARATION I/We declare the foregoing particulars	are true in every respect.	Maj
Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

Page 5 of 18

Sketch Plan #3 Pg. 1

Wong, Meiy (VWG Singapore)

From:

Lam Wilson lamwilson99@yahoo.com

Sent:

Tuesday, September 25, 2018 8:27 AM

To:

Wong, Meiy (VWG Singapore)

Subject:

Details of the incident

A summary of what happened on 22 Sep which I will inform my Insurance Company:

My name is Mr Lam Siew Loon, and I am a Grab Hitch driver.

On 22 Sep around 11am, I have fetched 2 passengers from Blk 836 Woodlands Street 83, they are Mdm Chia Boon Kee (96918245) and Phoebe Ng Zi Hui (911 80491). Their destination was Blk 424C Yishun Avenue 11.

On arrival at Blk 424C at around 12pm, I parked my car on the left side of a white Honda Vezel (SLK 7437C). At the moment when Mdm Chia and Phoebe Ng were getting ready to take their bags to leave my car, the Honda Vezel started to turn left and hit into the right side of my car. I have sounded my car horn to try to warn the other driver on seeing his car movement, but he stopped his car too late and banged into my car, and leaving some scratches on the right front door of my car. The driver should check left or right to ensure that there is no car beside him before turning. But he didn't perform this check.

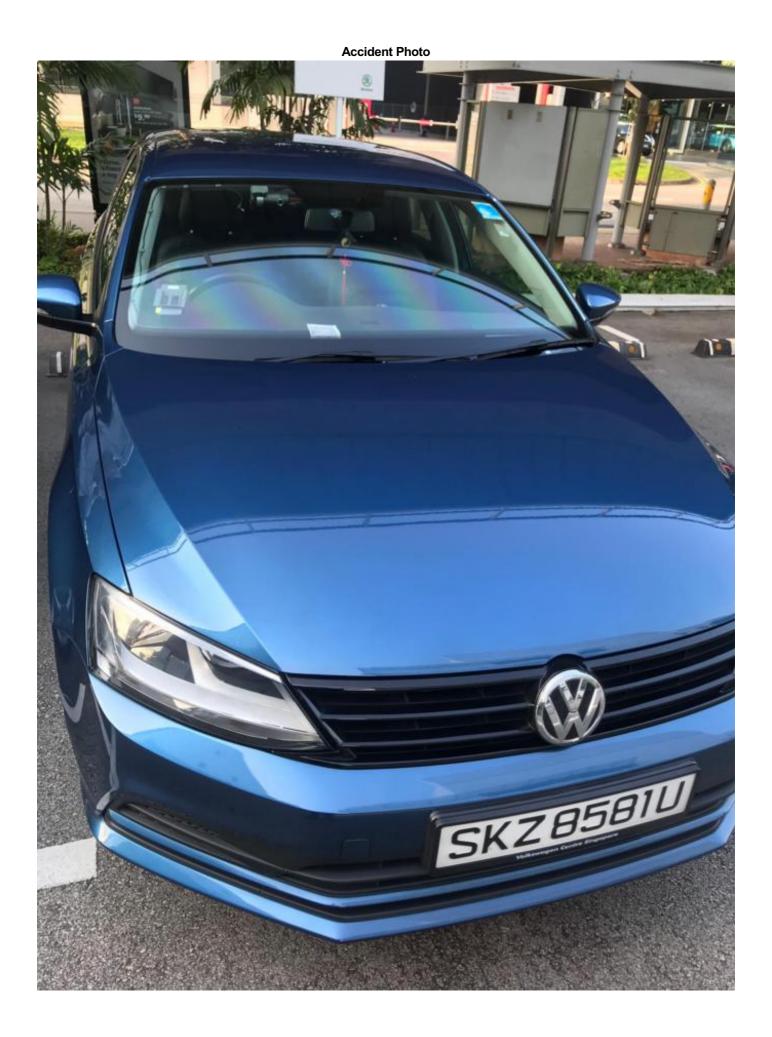
We have exchanged contacts. The driver name is Lee Chong Jin Laurence (Li Zhang Ren) and his NRIC is S7806959G. His car plate number is SLK7437C.

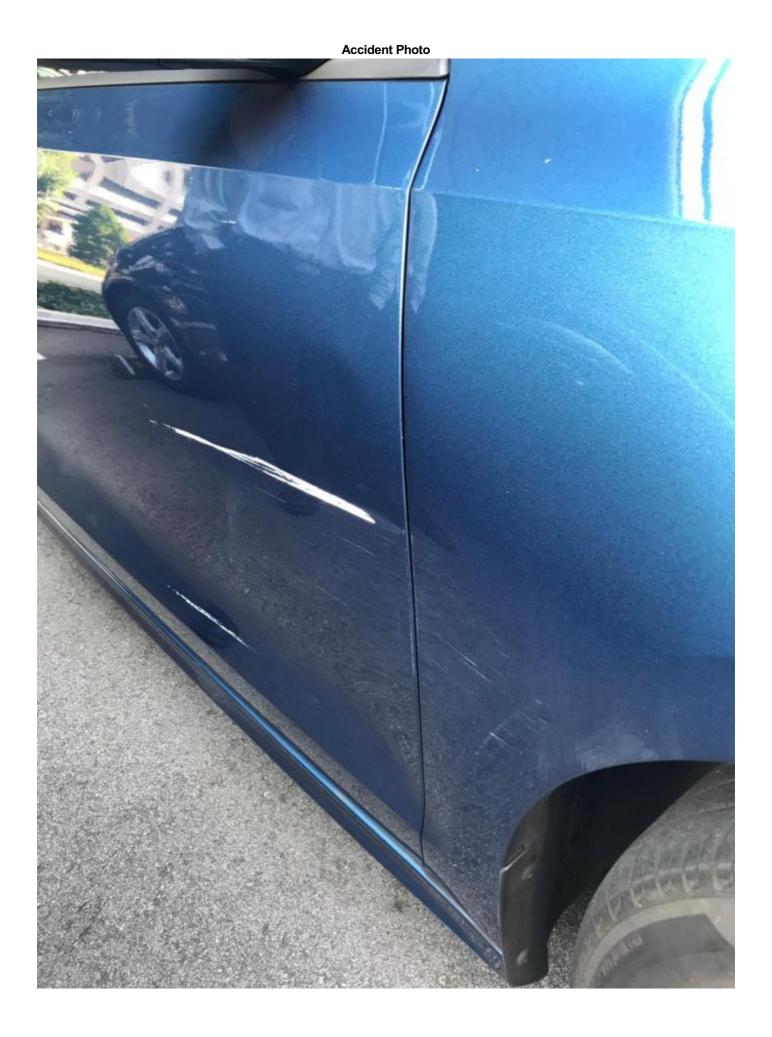
Please claim 3rd party insurance claim from Mr Lee Chong Jin Laurence.

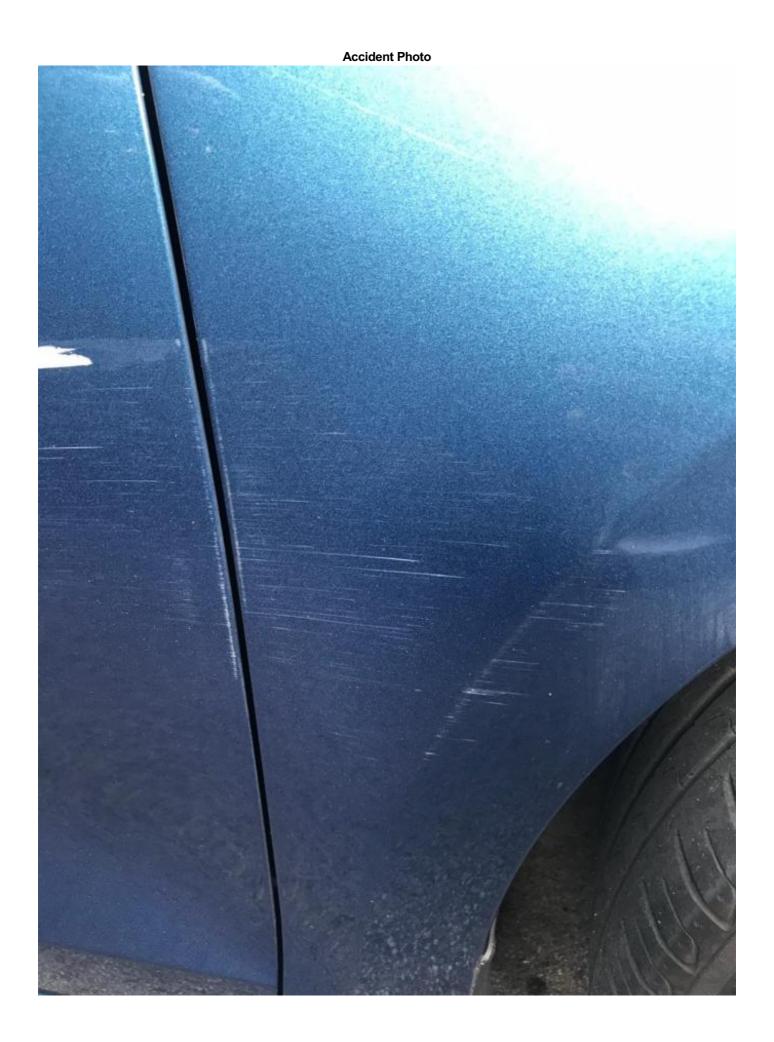
Thanks

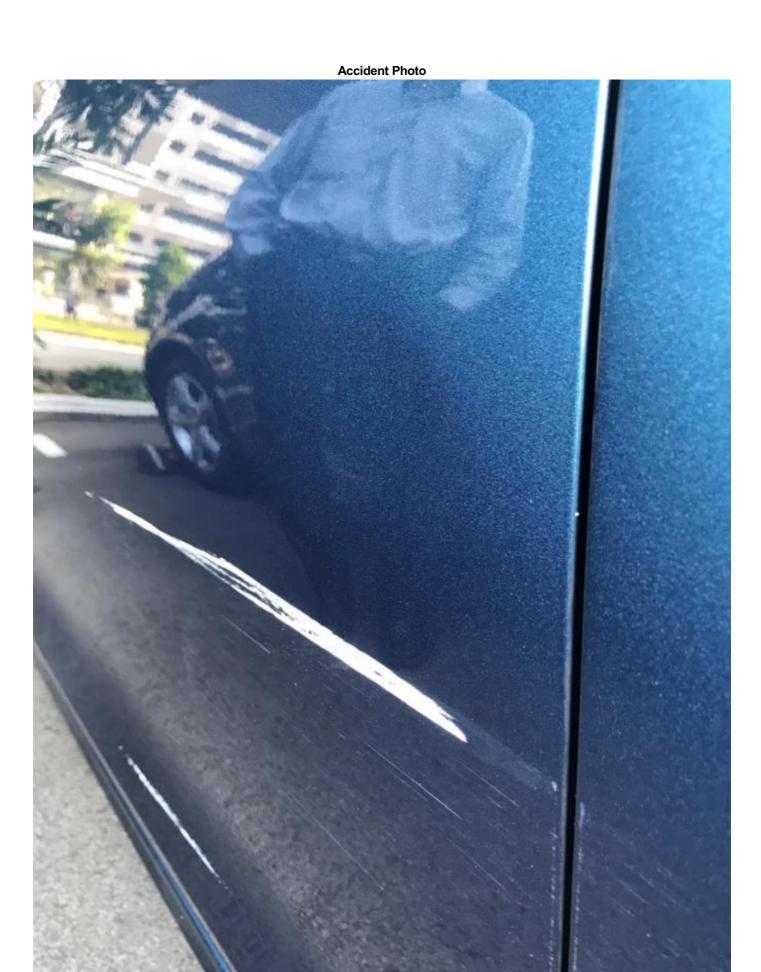
Sent from Yahoo Mail for iPhone

25/9/18













■ Singtel 🕏

8:38 AM







Car Accident Lee chong jin





You

The technician at Volkwagen said there is a small dent near the long scratch. You can call Edmund from Volkwagen to find out more

What small dent are you talking? U there ready settle say i will do the painting only ,why now must pay the dent too .how i know you make the dent yourself

You

And I said normal workshop does not have the original paint from Volkswagen.

Come on lah ..if like tat no one go to the shop and do already 7:29 PM

You

Are you saying you won't be paying? I didn't promise to go to your workshop, I said I will check Volkwagen and you will check your workshop.

If you say to pay 2000 ,of course i wont not pay if u are me ,are u going to pay if u have source

If 2000 i rather we declare to insaurance to settle .please give me an answer if you want insaurance to settle if you dont want to settle private and giving problem

7:31 PM









I need to see the official proof that they are getting the paint from Volkswagen and not any other paint. Once ready, do send me

Or we settle this we go to the workshop and repair (under me) and plus i pass u cash ..this is the best i can do

I will wait for your official proof

2:59 PM 🗸

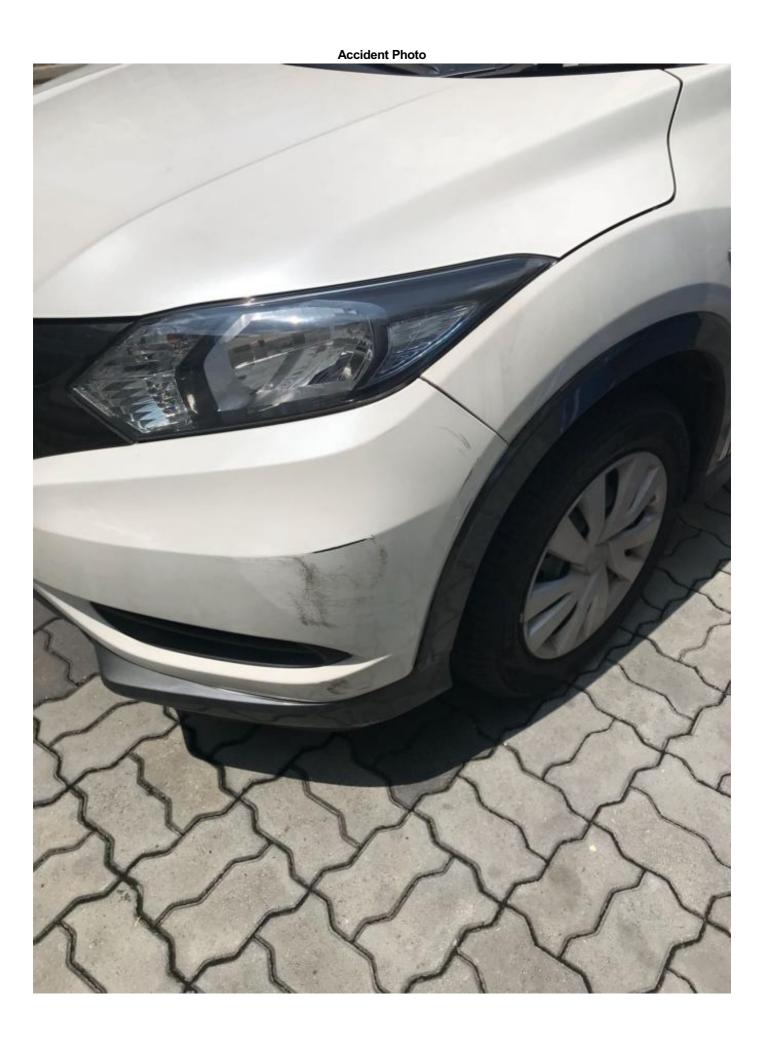
That guy have not answer me yet ..if you wait i ok











Accident Photo





Jessica

- 836 Woodlands St 83
- 424C Yishun Avenue 11



Fare SGD 8.00

REPORT AN ISSUE



Driving License





9783 7788 lamvilson 996 yohoo.com

SKZ8581 U A 28683441 Am NOD: Yes 5% Wess: \$ 500.

Identification Card

