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Claimant's Particulars :-			2) DA : Damage /	Assessment (\$100); INC (\$		
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Contact No:			5) FT : Follow-Th	rough Survey (Resurvey)	\$30	
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### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Fax Number

Contact Number

EMail Address

- 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 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.

- 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

	ACCIDENT STATEMENT
Date Of Report	28/09/2018 17:15
Date Of Accident	27/09/2018 19:45
Exact Location Of Accident	SLIP ROAD FROM EUNOS LINK INTO KAKI BUKIT AVENUE 1
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLU1949D
Insured/Policyholder	
Name Of Registered Owner	TAN KIEN WEI
NRIC No	S9202941G
Email Address	TANKW,KENT@GMAIL.COM
Mobile Phone No	(LOCAL) +65-93213413
Alternative Phone No	OTHERS-93213413
Vehicle Particulars	
Manufacturer	BMW
Model	316
Exact Purpose for which vehicle was being use time of accident	ed at PRIVATE USE
Are you claiming under your own insurance po for repair to your vehicle?	no No
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	A CONTRACTOR OF THE CONTRACTOR
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5099712576
Cover Note Number	
Driver	
Name of Driver	TAN KIEN WEI
NRIC No	S9202941G
Date Of Birth	07/01/1992
Occupation	INDOOR
Date Of Driving Pass	12/05/2017
Driving Experience	1 YEAR AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93213413

OTHERS-93213413

TANKW.KENT@GMAIL.COM

BLK 109 ANG MO KIO AVENUE 4 Address

#07-20

560109 Postcode

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

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

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

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

SKL4211M

Vehicle Make/Model/Colour

TOYOTA VIOS

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

GOOTHA SISA RANGANALHAPPA

NRIC/Passport Number

S7681201B

Contact Number

93363478

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### SKETCH PLAN

#### IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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>.
- The Issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 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.
- 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:
  - 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:
  - 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:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

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olicy No. ertificate No.	PRINCIPLE IN					
	TAN KIEN WEI				Pulcyholder NRIC	592029436
Product Code	PRIVATE CAR INSURANCE	Eaver Type	drivo CLASSIC		Loading	0
Contact No.(Motrile)	93213413	Curtact No. (Office)			Contact No Irrome	DOMESTIC STREET
Emwill Address		Tigeclai Remark			eCode	No *
(FIC:	- No - Yes	TCA	a No. Yes		eCode Reason	20
ICO Protection	Nan	NCD Exptlement(%)	20		Private Hire	Na
P Accident Details		The second secon			- etopowezanic	Cultision - Head to Rear
Report Crato	28/09/2/018 17:45	Accident Report Within 24 hrs	Yes		Accident Type	
Date of Accident	27/09/2018	Time of Assident shumm	19:45		Country of Accident:	Singapore
Reporting Centre		Orange Force			ECH No.	
Accident Location	SLIF ROAD FROM EUROS LINK INTO WAKE	BUKIT AVENUE 3				
→ Excess	201101	Control (Control Control Control	702		Wilderstein Extends 1	200.00
Own damage Excess	600.100	Additional Excess	0		Windstreen Excess	2109,000
Unnamed Driver Extess.	0.08	Quickles Singepore OD Expens		0.00		
Third Party Excess	0.00	Queside Singapore TV Excess				
▽ Benefits						
₩ GST Registered Informati			GST Sevisi	ration Date		
GST Registered GST Registration No.	FH0.		GST Stella		7045	
Modification History						
→ Policyholder Mailing Addr		Address 2	ANG NO KID AVEN	UE #	Address 3	KEBUN BARU HELGHTS
Address 3	BLX 105 ±07-20 SINGAPORE 560109	Address Type	Singapore address	DAME.	Post Code	580109
Address 4 Unit No.	STREET, STREET	Septed Palicy Number	5099712976			
♥ DI Driver Info						
Driver Name	TAN KIEN WEI	Driver Type	Main Driver			
Unnamed driver Name		Dover NACC	592029415		Driver DOB	87/01/1992
Register Date of Driver License	12/05/2017	Driver Age	26		Driving Experience	i
Contact No. (Mubile)	93213413	Contact No.(Office)			Centact No.(Home)	
Addres 1	BOX 109 #07-20	Address 2	ANG MO KIO AVEN	UE 4	Address 3	KESUN BARU HEIGHTS
Address 4	SDIGAFORE 560109	Address Type	Singkpore address		Post Code	560109
Unit No.					81.0.8	1222
Does he own a Singapore Registered car?	Yes + NO	Driver Vehicle No.	50019490		Driver Incurer Company	NTOC
Declaration		ALP CONTROL II.	Ves = No			
Modification History  Claim 001 New						
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Claim 001 Rem				GO-MX	Tan elen w	Contact (Office)
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	5 (BUKIT MERAH)) on 28 Sep 2018 17(48	5 (BLACIT MERAM)) on 29 Sep 2018 17:48	5 (BLACT MERSH)) or 29 Sep 2018 17 48

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## ACCIDENT STATEMENT

	DENT DAYE: 27/09/2018 (DD/MM/YYY), TIME: (19	(HH:MM)
LOCA	TION: Kak: Bukit	
	Control of the contro	
1.	DETAILS OF VEHICLE	FW
	alvehicle NUMBER: SLU 1949D	57
	DINSURANCE COMPANY NIVE INCOME	
	CIPOLICY NUMBER: 5097712576	9:
	d)POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD P	ARTY FIRE &THEFT)
	OMAKE & MODEL: BMW 316I.	
	1) TYPE: (SALOON / COUPE / MPV /VAN / LORRY / MOTORC	YOLE / OTHERS)
	g VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTOR	
	h) PURPOSE OF USING AT ACCIDENT TIME:	
	I) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE	660
	*** 선거적인 보고 있는 것이 있는 전경이 있는데 인터를 보고 있어 있다면 있는데 있는데 있는데 하고 있다. 그렇게 하고 있는데 있다면 있는데 없는데 없어 없다면 없다면 없다면 없다면 없다면 없다면 다른데 다른데 없다면	
-	IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING O	INC.
2.	INSURED / POLICY HOLDER	THE CERTIFIE
	NOT A STATE OF THE PARTY OF THE	14 SEMS 13
	GIADDRESS: Any Mo Kin Ave 3 BIK 109 #07-20	
	CLADOKESS: HIR MO NO LAK 2 BIK 104 41 01 50	5201-
07	* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER	
. 1		
of hazzandis	DRIVER  O) NAME: AP AYSOUM IN	4 - 1 E / FE / 4 (E)
cluding driver)		AALE / FEMALE)
15	DINKIC/FIN/FASSPORI:CONTAC	li
	c]ADDRESS:	
	THE ATT OF PIRTLEY OF LOT 1992 (PRINTED AND ADDRESS)	
10	*d)DATE OF BIRTH: ( O+) D1/ 1472 (DD/MM/YYYY)	W a
	FIDATE OF DRIVING PASS : : 125/2017	020
2	WAS DRIVED AN END OVER OF THE INCLIDED COMP	ANIVE OVER THE
	WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPA	INTY (YES / (NO)
 E:	DIWEATHER CONDITION: (CLEAR / RAINING / OTHERS	
٥.		
. 2	b)ROAD SURFACE: (DRY / WET / OTHERS	74
	WAS ANYBODY INJURED LYES /NO	
A.	a) REPORTED TO POLICE (YES NO)	
2.00	IF YES, PLEASE STATE WHICH POLICE STATION:	A Committee of the Comm
8.	THIRD PARTY VEHICLE  O) VEHICLE NUMBER: SKL 42 11 M MODEL:	Toyota Vios
A 1. 10 15 15 18 28	MODELL	toypin flos
esting states.	b) DRIVER'S NAME: Goolha Sisa Ranganalhan	-93363420
4	c) NRIC/FIN/PASSPORT: S7681201B CONTAC	1. 1/0-170
7	THIRD PARTY VEHICLE	72 8
of professioner	d) VEHICLE NUMBER:MODEL:_ e) DRIVER'S NAME:CONTAC	
16 ESS/1972 PARK	e) DRIVER'S NAME:	¥0 (4)
El. 31	f) NRIC/FIN/PASSPORT:CONTAC	

EMBIL = tankw. Kent @gmail.com VIDEO =

# REPUBLIC OF SINGAPORE

IDENTITY CARD NO \$9202941G





TAN KIEN WEI

建

瑋

CHINESE

07-01-1992 Country of tweet SINGAPORE



3906876



NRIC No. S9202941G

15-01-2007

APT BLK 109 ANG MC KIG AVENUE 4 #07 - 20 SINGAPORE 560109 NRIC No: S82028416 Date: 13/01/2010 No: 6428262

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

EFFECTIVE DATE

Class 3A Motor cars without clutch pedals (Auto) with uniaden weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight =< 2500kg

NP 428A



Hello, NAC_BUKIT_MERA	H_800676						• Change	e Language	h Chang	e Password	Log Ou
My Desktop	Polic	Policy Query									(0
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	Vehicle No.(For Motor)		SLU19	SLU1949D		Certificate Number					
						Search					
	Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	0	5099712576		TAN KIEN WEI	59202941G	GPC	CLASSIC	SLU1949D	SLU1949D	13/04/2018	12/04/2019