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 liability.
- 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	11/10/2018 09:41
Date Of Accident	10/10/2018 19:20
Exact Location Of Accident	JUNCTION OF MEI CHIN ROAD AND QUEENSWAY
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SFY9090C
Insured/Policyholder	
Name Of Registered Owner	TAN WEE BOON (CHEN WEIWEN)
NRIC No	S7933652A
Email Address	WWW.MRBOON.COM@GMAIL.COM
Mobile Phone No	(LOCAL) +65-86868989
Alternative Phone No	OTHERS-86868989
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	LANCER EVOLUTION VII
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	A 29060267 QMX
Cover Note Number	
Driver	

Driver

Name of Driver TAN WEE BOON (CHEN WEIWEN)

NRIC No S7933652A

Date Of Birth 31/10/1979

Occupation INDOOR

Date Of Driving Pass 25/06/1998

Driving Experience 20 YEARS AND 3 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-86868989

Fax Number

Contact Number OTHERS-86868989

EMail Address WWW.MRBOON.COM@GMAIL.COM

Address BLK 111B DEPOT ROAD

#09-109

NO

Postcode 102111

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 SIDE SWIPE
Weather Conditions RAINING
Road Surface WET

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.

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? YES
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number XD6792C

Vehicle Make/Model/Colour ISUZU

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of DriverYI JUNNRIC/Passport NumberG6175503PContact Number86789698

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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 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:
 - (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

Date & Time: 11/10 / 18

92000

Driver's Signature

(If driver is not the policyholder)

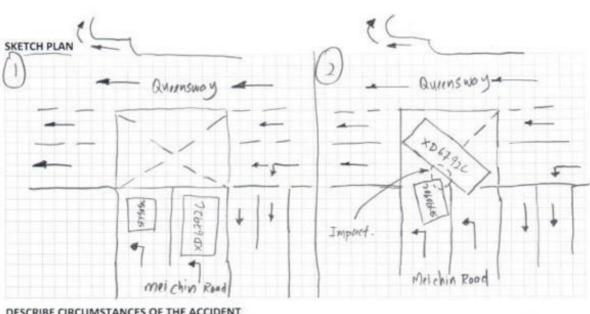
Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No.:

CERTAC ATTENDED TO THE AT

Sketch Plan #2



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PICTURE () TATE: 10/10/18 TIME: 19:22
EY9090C) is travelling from Mri Chin Read Come to the T-Tweetien that link to
Querksway. Stopped at the T-Junction (xD67926) is stopped at the T-Junction also.
SDEAGOC Storted to move off from the white line turning laft. As a safety
necortion, didn't move off immediately, wanted to allow the long (XD 6792C) to clear
the junction first. Then suddenly, (XD 6792C) verged toward my side abruptly!
Sicture (3)
erry (XDG792C) while turning left varged sharply towards left side suddenly!
SF19090C) horned very londly. But the lorry (XD6797C) just turned aren formarés
the left side with speed! Thus causing collision to my right side of my cor
SANGUADO). THAT IS NO MORE room on my left side to move & (XD6740C) just out into my
r Driver come down & apologised he didn't see my cor in his blind spot.
Horned him so loudly, he said he didn't heard the horn.
He prentioned his levy is too tall & my cov is too love (Hidden inside his blinds)
SMS, Photos, videos cotached as ovidences. Car video included (\$490900)
There's towns billionis as same as a second as a secon

DECLARATION

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

Policyholder's Signature Date & Time: 11/10/18 930 am Driver's Signature (If driver is not the policyholder) Date & Time:

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

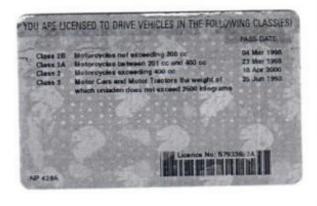
REPAIR UN HARS

Sketch Plan #3





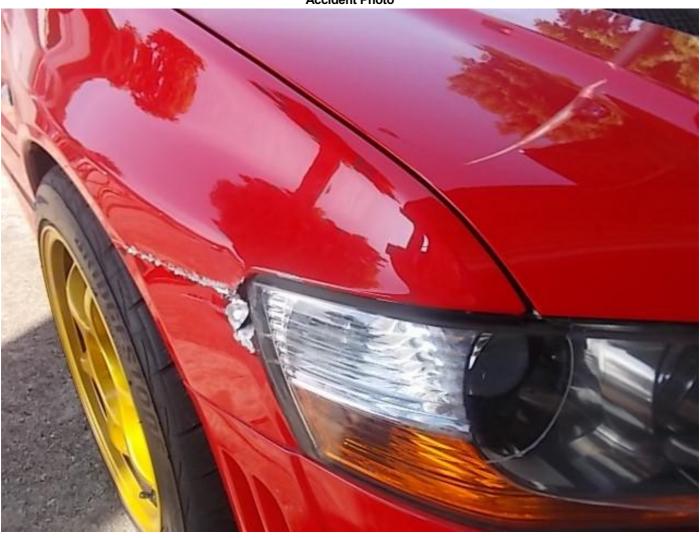










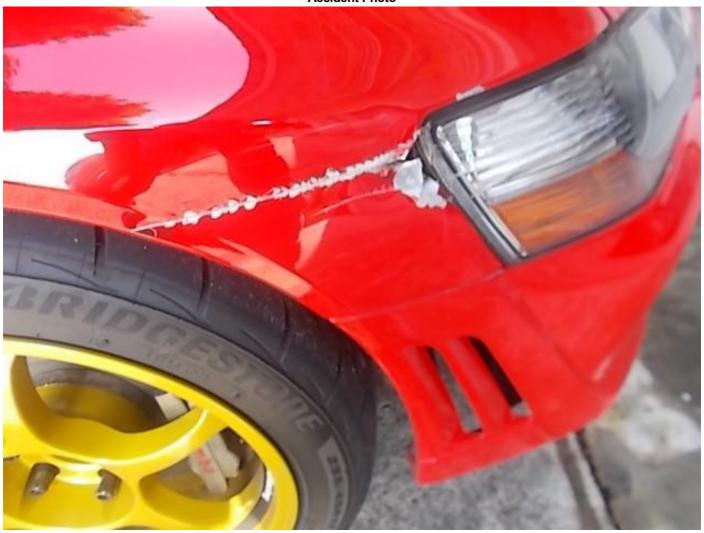
















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YiJun Ps-LorryDriver



86789698 Singapore

致: YI JUN G<u>6175503</u>P 剛才<u>10.10.2018</u> (<u>7:22pm</u>), 您的車 (XD<u>6792</u>C) 在(Mei Chin Road & Queensway) 駛進我的車道撞上我的 車(SFY<u>9090</u>C) 我會向你的保險公司索 赔,請确认以上的信息和個人資料. 請 提供您保險公司的名字? 車主陳先生

Received

陈先生你好,我们车辆发生的事我已 经通知公司了,<u>明天9点</u>以后你打电话 跟我公司先联系了

電話86868989

Received

YI JUN, 我的保險經紀須要以上的確認以共他做意外报告,請確認,謝謝你

10:11

你好,我公司会通知我我们自己的保险 公司处理、并会把现场所有拍的现场照 片交给保险公司做判断和决定



Text message















