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.	tent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	15/10/2018 09:38
Date Of Accident	14/10/2018 12:50
Exact Location Of Accident	TAMPINES AVE 5 TWDS PIE (TUAS)
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJK4677U
Insured/Policyholder	
Name Of Registered Owner	KAM SIEW HONG
NRIC No	S0040485C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-84119293
Alternative Phone No	OFFICE-84119293
Vehicle Particulars	
Manufacturer	NISSAN
Model	LATIO 1.5L AT ABS D/AIRBAG 2WD 4DR
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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5049840267-07
Cover Note Number	

	١,	

Name of Driver TAN BOH NIEW
NRIC No S0083750D
Date Of Birth 08/11/1948
Occupation OUTDOOR
Date Of Driving Pass 17/03/1976

Driving Experience 42 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98339851

Fax Number

Contact Number OFFICE-98339851

EMail Address NOEMAIL

Address BLK 515A TAMPINES CENTRAL 7

#17-08

Postcode 521515

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident COLLIDED INTO PROPERTY

Weather Conditions DRIZZLING
Road Surface WET

Other Information

Was any foreign vehicle involved in this accident? NO
Number of vehicles involved in the accident 1
Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

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? YES

If Yes, Please state which Police Station

Police Station Name TAMPINES NORTH NEIGHBOURHOOD POLICE POST

NO

Police Station Address ROAD: BLK 461 TAMPINES STREET 44 #01-56, POSTCODE: 520461,

COUNTRY: SINGAPORE

Police Station Contact **TEL NO**: 1800-7818999 - **FAX NO**: 67838603

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT - T/20181014/2073.

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? NO
Was there any audio recorded? NO

Accident Sketch Plan

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 truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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.
- 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:

NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN		
. (1 - 3	A: SIK UGA 70
The pine AVE S		
Refer to police of	report- 1/2018 1014/2073.	
DECLARATION I/We declare the foregoing part	iculars are true in every respect.	
	X	
Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personne's Signature Name: NRIC/FIN No.:

Name: NRIC/FIN No.:

Police Report





Report No. T/20181014/2073

Police Station Of Origin: Tampines North NPP 461 Tampines Street 44 #01-56 SINGAPORE 520461

Tel No: 1800-7818999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 14/10/2018 17:47		Vide Report No.:	Station Diary No.:	
Informa	nt's Partic	ulars		Tall Carling
Name of TAN BO	Informant: H NIEW		Address: APT BLK 515A TAMPI 521515	NES CENTRAL 7 #17-08 SINGAPORE
ID Type / ID No.: NRIC NO / S0083750D		Contact No.: Home/Office: Mobile: 98339851		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 69	Date of Birth: 08/11/1948	Type of Informant:	
Race: Chinese		Language:	Institution / School Name:	
Occupation: Other commercial and marketing sales representatives		Driving Licence Informa Class: 3	Date of Expiry:	

Seneral Inform	mation of the Accident				
Type of Accident:	Non-Injury Government Proper	Drink	Date/Time of Accident: 14/10/2018 12:50	Type of Location Bend	
Location: Along Road 1 TAMPINES A towards PIE (Weather: Drizzling		Road Surface: Wet		Road Speed Limit:	
Traffic Flow: Dual Carriage		Traffic Control: Not Controlled		Traffic Volume: Moderate	
Type of Collis Moving Vehic	ion: le Against - Road Divide	r/Kerb/Railings		Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SJK4677U	Car				Slightly	0
					Damaged	

Use of Pedestrian Crossing: NA

Police Report





Police Station Of Origin: Tampines North NPP 461 Tampines Street 44 #01-56 SINGAPORE

2 of 3

520461

Report No. T/20181014/2073

CONTINUATION OF REPORT Tel No: 1800-7818999

Name	TAN DOLLAUSIA		HTS II-		
raine	TAN BOH NIEW		ID No		S0083750D
Related Vehicle	NIL				
TOTAL VEHICLE	NIL		Contact No.		98339851
Hospital/Clinic NIL					
1 ACO 10 CON 10			Class Driving Licence Expiry	g ce &	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Dis-			
		Date Disc	narge	NIL	
- ajo gran	ted Medical Leave NIL	Degree of	Injury	NIL	

Brief Details.

On 14/10/2018 @ 1250hrs, I was driving my car SJK4677U along the bend at Tampines Ave 5 towards PIE (Tuas) when my car suddenly skidded and hit the railings near lamp post 55525 vide G/20181014/0115. Case is under TP IO Tan Chin Yong Tel 65476178.

I am not injured. No other vehicles involved.

Police Report





Police Station Of Origin:
Tampines North NPP
461 Tampines Street 44 #01-56 SINGAPORE
520461
Tel No: 1800-7818999
CONTINUATION OF REPORT

3 of 3 Report No. T/20181014/2073

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: G / Sr Staff Sgt MOHAMMAD ABDULGHANI BIN MOHD ADNAN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 14/10/2018 17:47
Officer In Charge Of Case: TP / AEIT / SSI 2 JUREMAH BINTE AHMAD Contact No.: 65472076	Classification Of Case:
Authentication Stamp NP168	SOFWICE V

























