

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 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.

ACCIDENT STATEMENT

Date Of Report	15/10/2018 18:54
Date Of Accident	10/10/2018 20:30
Exact Location Of Accident	ALONG SELETAR AEROSPACE EXIT TO TPE CHANGI
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBH354M
Insured/Policyholder	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	200710651D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97211226
Alternative Phone No	OFFICE-97211226

Vehicle Particulars

Manufacturer	NISSAN
Model	NV200
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD18V00032/VCZ/R03
Cover Note Number	

Driver

Name of Driver	NG SIOW CHUAN (HUANG SHAOCHUAN)
NRIC No	S7426129I
Date Of Birth	13/07/1974
Occupation	OUTDOOR
Date Of Driving Pass	25/02/1997
Driving Experience	21 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97211226
Fax Number	
Contact Number	OTHERS-97211226
Email Address	NOEMAIL

Address	BLK 305 HOUGANG AVENUE 5 #03-371
Postcode	530305
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	CHAIN COLLISION
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	3
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	SLR8882G
Vehicle Make/Model/Colour	TOYOTA BLACK
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAY JUH HOOK
NRIC/Passport Number	S8785433G
Contact Number	91912475
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJX2546J
-----------------------------	----------

Vehicle Make/Model/Colour	BMW
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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 Authorized 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 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 Traffic Police Department for investigation.
6. This report will be forwarded by the insurers to the GIA Records Management Centre established by the General Insurance Association Of Singapore (GIA) for archiving and the copies of this report will be a fee be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, hereby consent to the archiving of this report at the centre and the copies of the report being made available aforesaid.

I understand, acknowledge, agree and consent that:

(a) My Insurer, workshop and General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process by insurer (collectively the "Personal Information") and any other personal information provided by me or who have insured vehicle(s) involved in the accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the insurer 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 or 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 Insurer's lawyer/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.



Policyholder's Signature / Date & Stamp

Driver's Signature (if driver is not the Policyholder) Date & Time

Driver's Signature (if driver is not the Policyholder) Date & Time

Witnessed by Reporting Centre Personnel

Witnessed by Reporting Centre Personnel

Sketch Plan

Sketch Plan

C7E Woodland

C7E Yucca trees

TPE - change

TPE blocking procedure

A) GBH2SV
B) SKR888
C) SJX25

Accident Sketch Plan

Describe Circumstance of the Accident

Accident occurred along Salsbury Avenue towards exit TPE
(TPE-Changi)

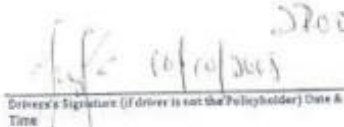
- Involved 3 vehicles chain collision

- 1st vehicle apply hand brake, caused 2nd vehicle (SHR 88823)
hit 1st vehicle rear, and 1st had hit said 2nd vehicle rear.

Declaration

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


Policyholder's Signature / Date & Stamp


Driver's Signature (if driver is not the Policyholder) Date & Time


Witnessed by Reporting Centre Personnel

ACCIDENT SCENE



gu/16/10/2018



ID



REPUBLIC OF SINGAPORE DRIVING LICENCE

97211226 Licence No: S74261291



NG SIOW CHUAN
(HUANG SHAOCHUAN)

Birth Date: 13 Jul 1974
Valid Date: 03 Aug 2017

0027100226

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

		EFFECTIVE DATE
Class 2B	Motorcycles <= 200 cc	24 Apr 1995
Class 2A	Motorcycles between 201 cc and 400 cc	08 Oct 1996
Class 2	Motorcycles > 400 cc	21 Feb 2006
Class 3	Motor cars with unladen weight <= 3000kg with <= 7 passengers, exclusive of driver; and other motor vehicles with unladen weight <= 2500kg	25 Feb 1997
Class 4	Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg	16 Feb 2009
Class 5	Motor vehicles which are not constructed to carry load or passengers and the unladen weight <= 7250kg	06 Jun 2009
	Motor vehicles not constructed to carry any load and the unladen weight > 7250kg	

NP 420A

Licence No: S74261291

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

