

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	10/10/2018 11:21
Date Of Accident	09/10/2018 18:40
Exact Location Of Accident	ESSO AT UPPER BUKIT TIMAH ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMD2848H
Insured/Policyholder	
Name Of Registered Owner	TAY BOON SIANG
NRIC No	S9011645B
Email Address	TAYBOONSIANG90@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97726707
Alternative Phone No	OTHERS-65666879

Vehicle Particulars

Manufacturer	HYUNDAI
Model	ELANTRA 1.6 4DR AUTO "S"
Exact Purpose for which vehicle was being used at time of accident	TRANSPORT FROM WORK TO HOME (BUKIT BATOK NUS)
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

Driver

Name of Driver	TAY BOON SIANG
NRIC No	S9011645B
Date Of Birth	04/04/1990
Occupation	INDOOR
Date Of Driving Pass	18/07/2016
Driving Experience	2 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97726707
Fax Number	
Contact Number	OTHERS-65666879
Email Address	TAYBOONSIANG90@GMAIL.COM

Address	BLK 291A BUKIT BATOK STREET 24 #17-63
Postcode	650291
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)	2
Passenger 1	NAME: : TEO QING
	GENDER: : FEMALE

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

REFER TO ATTACHMENT

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 Witness 1

Name	TEO QING
Phone Number	97169177
Email Address	TEOQING@GMAIL.COM

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBG2046U
Vehicle Make/Model/Colour	MOTORBICYCLE,BLUE
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	MOHD HAIKAL BIN MOHD HISA
NRIC/Passport Number	S9101522F
Contact Number	87498879
Address	

Postcode

Insurance Company Name

AXA INSURANCE PTE LTD

Nature Of Damage

SCRATCH ON FRONT MOTORBIKE

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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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

Date & Time:

Oct 10 (9 a.m.)

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

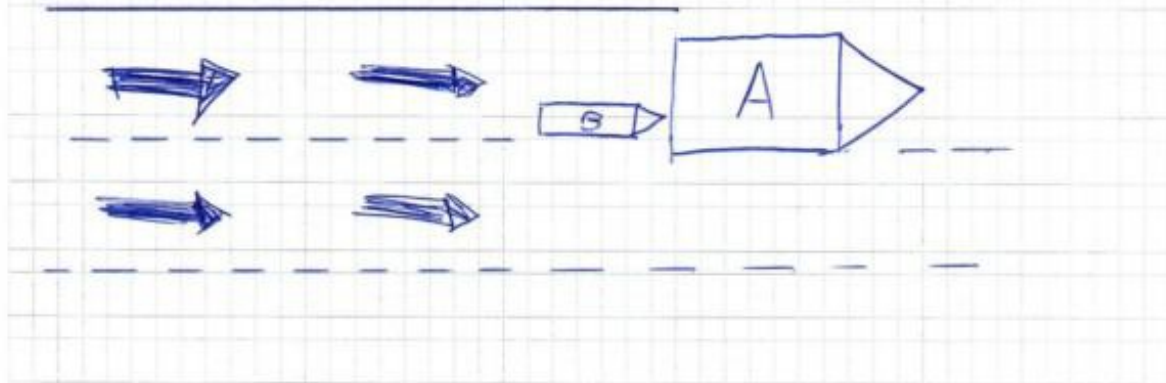
Name:

NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN

Upper Bukit Timah Road.



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- 5:37pm
- Congested Road, Upper Bukit Timah
 - I am trying to do a lane change (Left)
 - Left signal has been kept on for 5-10s (7 ticks) as vehicles on the left do not give way.
 - Car finally gives way just before Esso entrance.
 - I see a motorcycle straddling lanes but he is not riding fast and is at a safe distance so I switch lane.
 - After changing lanes, car in front slow down to go into Esso so I slow down.
- 6:38pm
- Motor bike speed up, tries to avoid me but hits the back of my car.
 - Hazard light, move car into Esso.
 - Inspect damage and exchange particulars.

DECLARATION

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

Policyholder's Signature

Date & Time:

Oct 10 (9am)

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Identification Card

REPUBLIC OF SINGAPORE DRIVING LICENCE

Holder's No. **S9011645B**

Name
**TAY BOON SIANG
(ZHENG WENXIANG)**

Date of Birth **04 Apr 1996**
Valid Until **18 Jul 2018**

FOR C&C USE ONLY

Barcode: 8800000000000

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S9011645B**

Name
**TAY BOON SIANG
(ZHENG WENXIANG)**
郑汶祥

Race
CHINESE

Date of Birth **04-04-1996** Sex **M**

Country of Birth
SINGAPORE

FOR C&C USE ONLY

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

Class 5A Motor cars without more than 6 seats (Aveo) with unladen weight less than 2000kg with up to 7 passengers, equipped with air-brake, and other motor vehicles with unladen weight less than 2000kg

Valid Until **18 Jul 2018**

FOR C&C USE ONLY

Barcode: 8800000000000

License No **S9011645B**

MP 4286

Barcode: 8800000000000

Holder's No. **S9011645B**

Date of Birth **14-04-1996**

Address
**APT BLK 201A BUETT DATOK STREET 94
#17-03
SINGAPORE 660291**

FOR C&C USE ONLY