

## 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 11:19
Date Of Accident	14/10/2018 11:50
Exact Location Of Accident	CTE TUNNEL
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKJ3904P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	NEO MOH TECK
NRIC No	S1572409I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94591193
Alternative Phone No	OTHERS-94591193

### Vehicle Particulars

Manufacturer	TOYOTA
Model	MARK X-2.5 (A)
Exact Purpose for which vehicle was being used at time of accident	PTE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN1514931803
Cover Note Number	11/10/2018 - 10/10/2019

### Driver

Name of Driver	NEO MOH TECK
NRIC No	S1572409I
Date Of Birth	28/06/1963
Occupation	INDOOR
Date Of Driving Pass	23/02/1987
Driving Experience	31 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94591193
Fax Number	
Contact Number	OTHERS-94591193
Email Address	NOEMAIL

Address	BLK 223D COMPASSVALE WALK #08-681
Postcode	544223
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 - CHANGE/CROSS LANE
Weather Conditions	SHELTERED
Road Surface	DAMP

#### 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)	3
Passenger 1	NAME: : TAY LEE LEE GENDER: : FEMALE
Passenger 2	NAME: : MOTHER-IN-LAW 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 STATEMENT

#### 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	SH7691S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	CHUA SEOW KIANG
NRIC/Passport Number	S0105977G
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver) 2

## Sketch Plan

### SKETCH PLAN

VEHICLE NO.: SKJ 3904P  
INSURER : China  
DATE & TIME: 14/10/18 @ 1150

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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: 15/10/18

Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature  
Name: Dorlyn (AMIC)  
NRIC/FIN No.: 15/10/18

# Sketch Plan #2

## SKETCH PLAN

A: SKJ3904P  
(w 2 passengers:  
1) Tay Lee Lee - F  
2) Mother-in-law F)

B: SH 76915  
Chua Seow Kiang  
S01059776  
(w 1 Chinese male)

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Vehicle No: SKJ3904P (China)  
Date & Time: 14/10/18 @ 1150 (shattered/damp)

As i saw taxi was a distance away, as such i steered into the 1st lane. However, when my vehicle was 3/4 into the 1st lane, i felt an impact and realised motor taxi SH76915 front LH portion had collided onto my vehicle rear RH portion. No one was injured.

Note : Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information.

## DECLARATION

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

Policyholder's Signature  
Date & Time:

Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

GIARMC SketchPlanForm\_V3 ( ) Claim Own Policy ( ) Claim Third Party (x) Reporting Only  
( ) Claim OD/TP at other workshop ( )

Sketch Plan #3

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S15724091



Name  
**NEO MOH TECK**  
梁茂德

Race  
**CHINESE**

Date of birth  
**28-06-1963**

Sex  
**M**

Country/Place of birth  
**SINGAPORE**

S15724091

REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number: S15724091

Name  
**NEO MOH TECK**

Birth Date: 28 Jun 1963

Valid Date: 14 Mar 2003

10002950258

5991364



NRIC No: S15724091



Date of issue  
**01-08-2018**

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

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE  
**23 Feb 1987**

NP 428A

License No: S15724091



Accident Photo



Accident Photo

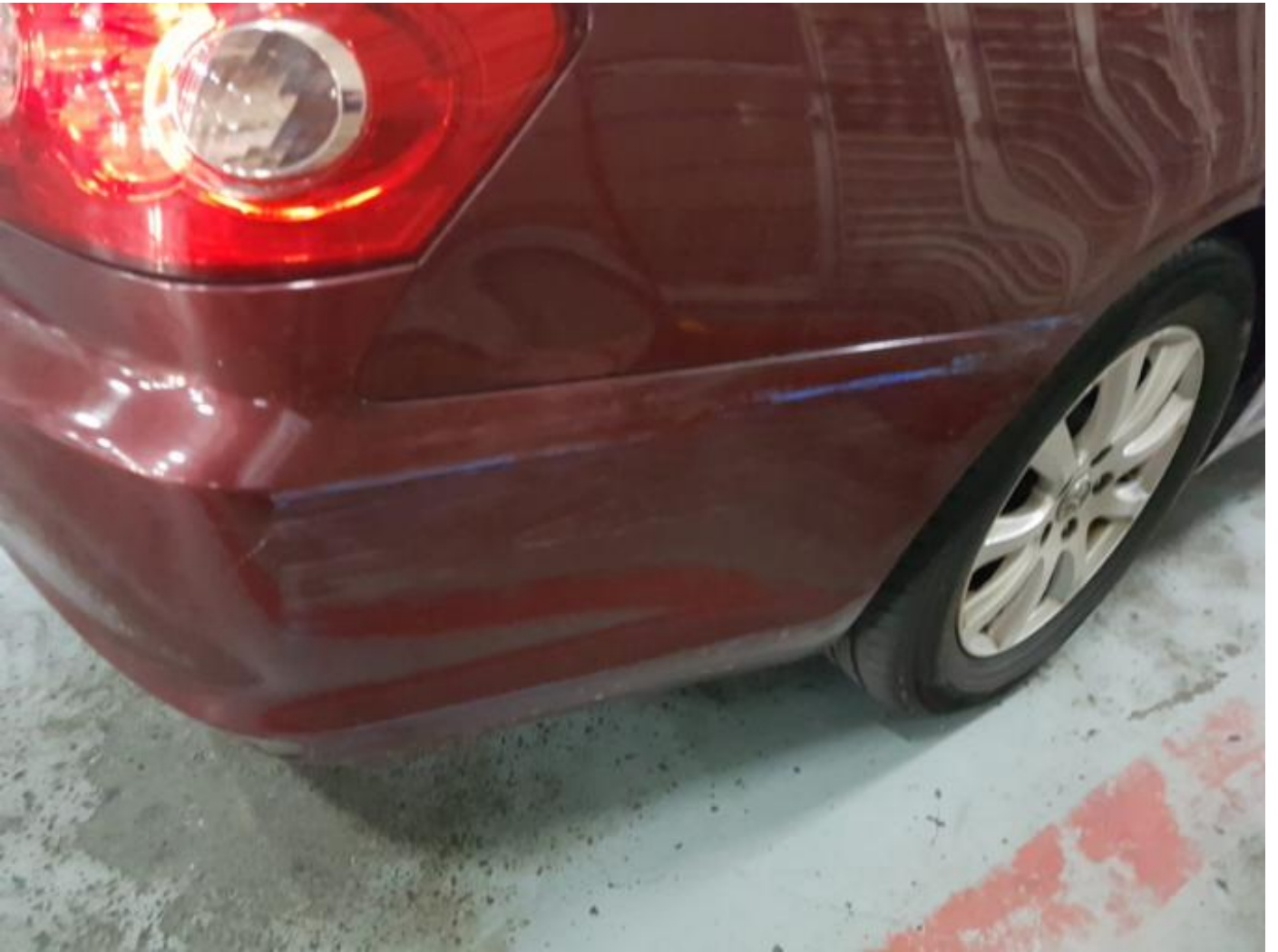




Accident Photo



Accident Photo



Accident Photo





Accident Photo



TP DAMAGE PHOTO





TP DAMAGE PHOTO

