

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	16/10/2018 16:57
Date Of Accident	15/10/2018 17:50
Exact Location Of Accident	ALONG COMMONWEALTH AVENUE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLL1887X
Insured/Policyholder	
Name Of Registered Owner	LEONG QINHAO, CALVIN (LIANG QINHAO, CALVIN)
NRIC No	S8438816E
Email Address	CALVIN_LEONG2001@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-96521437
Alternative Phone No	OTHERS-91826327

Vehicle Particulars

Manufacturer	HONDA
Model	CIVIC
Exact Purpose for which vehicle was being used at time of accident	DRIVING BACK HOME FROM WORK
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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD17V02333/VPC2/R00
Cover Note Number	

Driver

Name of Driver	LIM CHEE YENG
NRIC No	S8279811J
Date Of Birth	26/10/1982
Occupation	INDOOR
Date Of Driving Pass	30/11/2010
Driving Experience	7 YEARS AND 10 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-91826327
Fax Number	
Contact Number	OTHERS-96521437
EEmail Address	CALVIN_LEONG2001@YAHOO.COM.SG

Address	BLK 18C HOLLAND DRIVE #08-441
Postcode	274018
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	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	
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: : COLLEAGUE 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

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	SLA5494C
Vehicle Make/Model/Colour	NISSAN
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	KANTAYYA SUNITHA RAZU
NRIC/Passport Number	S2572861J
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
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: 16/10/18 1620

Driver's Signature

(If driver is not the policyholder)

Date & Time: 16/10/18 1620

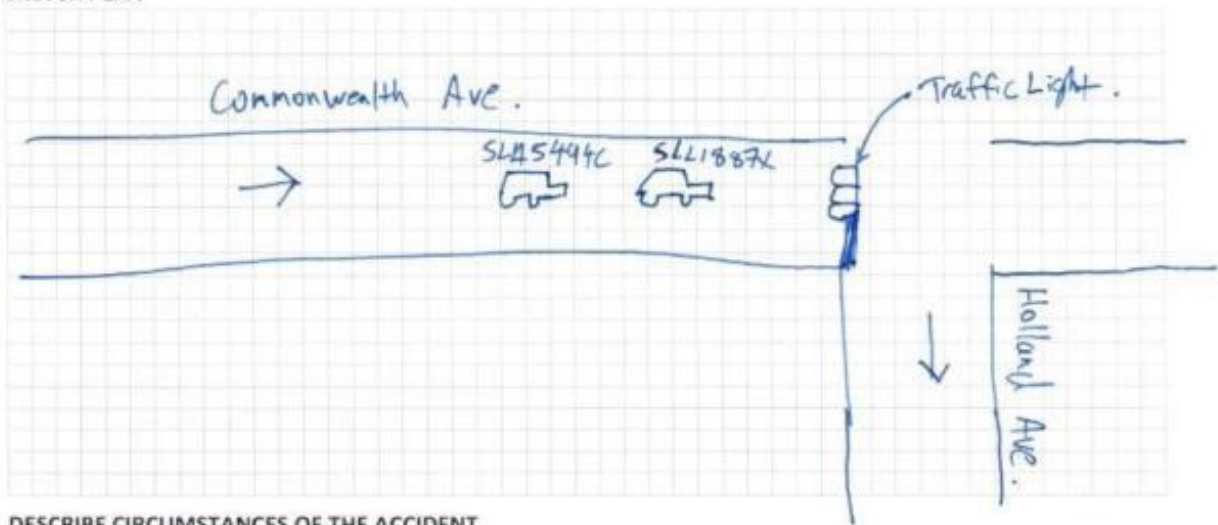
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At around 1750 hrs, I was travelling along Commonwealth Ave on extreme right lane, stopping at the traffic light and was being from behind by a car.

DECLARATION

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

Policyholder's Signature

Date & Time:

16/10/18 1620

16/10/18 1620

Driver's Signature

(If driver is not the policyholder)

Date & Time:

16/10/18 1620

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Rafiq Umar

Sketch Plan #3

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8279811J



Name
LIM CHEE YENG
林 紫 盈
Race
CHINESE
Date of birth
26-10-1982 Sex
F
Country of birth
MALAYSIA

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number **S8279811J**
Name
LIM CHEE YENG
Birth Date **26 Oct 1982**
Issue Date **30 Nov 2010**



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8438816E



Name
LEONG QINHAO, CALVIN
(LIANG QINHAO, CALVIN)
梁 钦 豪
Race
CHINESE
Date of birth
28-11-1984 Sex
M
Country/Place of birth
SINGAPORE



6671333



NRIC No. **S8279811J**
Nationality
MALAYSIAN
Date of issue
24-08-2007

APT BLK 18C HOLLAND DRIVE #08-441
SINGAPORE 274018
NRIC No. **S8279811J**

Date: **08/01/2011** No: **7223258**

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

EFFECTIVE DATE

Class 3 Motor Cars < 3000kg with <= 7 passengers, exclusive of the driver, and other motor vehicles < 2500kg 30 Nov 2010



NP 428A

5471133



NRIC No. **S8438816E**



Date of issue
19-05-2015

Address
APT BLK 18C HOLLAND DRIVE
#08-441
SINGAPORE 274018

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MAA118134560 Vehicle Registration No : SL 1887X
Name (as shown in NRIC) : Lim Chuan Yang NRIC/FIN/Passport No : S8279811J
(* Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore ()
Contact (Tel) : _____ Mobile No. : 91826327
Email Address : _____
Date of Accident : 15/10/2018 Time of Accident : 17:50
Place of Accident : BRANCH COMMERCIAL AVENUE
Insurance Company : LIBERTY

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

DRIVER IC NUMBER TO S8279811J

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name: Rebekah Lim
NRIC/FIN No.: 17/10/2018
Date: