

## 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	12/10/2018 18:18
Date Of Accident	11/10/2018 15:30
Exact Location Of Accident	JURONG WEST ST 52 ( BLK 523 CAR PARK )
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	YL6332T
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ONG HONG GHEE
NRIC No	S7213278E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97903526
Alternative Phone No	OFFICE-97903526

### Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA 150 D-3.0 D (M)
Exact Purpose for which vehicle was being used at time of accident	
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	LONPAC INSURANCE BHD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	Z18VC05000522
Cover Note Number	

### Driver

Name of Driver	ONG AH HOI
NRIC No	S1073022H
Date Of Birth	15/07/1948
Occupation	OUTDOOR
Date Of Driving Pass	05/12/1996
Driving Experience	21 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97903526
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 523 JURONG WEST ST 52 # 13-235
Postcode	640523
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	PARENT
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	RAINING
Road Surface	WET

#### 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?	
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

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	SLS5947T
Vehicle Make/Model/Colour	
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**

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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:

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

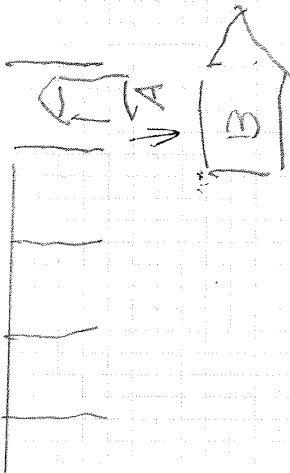
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

Please note that you might be able to submit an Own Damage Claim under own policy within 14 days.

( ) Claim Own Damage ( ) Claim TP (X) Reporting Only ( ) Claim OD/TP at other workshop

Workshop Name : \_\_\_\_\_

SKETCH PLAN



A-YL1332T.  
B-SLS5947T

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

It was raining. As I was reversing out from the parking lot, I accidentally hit into vehicle SLS 5947T.

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:  
NRIC/FIN No.:



**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Number **S1073022H**

Name  
**ONG AH HOI**

Birth Date: **15 Jul 1948**  
Issue Date: **20 Oct 2003**

1000936790G1

**REPUBLIC OF SINGAPORE**

IDENTITY CARD NO. **S1073022H**

Name  
**ONG AH HOI**

王 亞 惠



Race  
**CHINESE**

Date of birth  
**15-07-1948**

Country/Place of birth  
**SINGAPORE**

Sex  
**M**

S1073022H

**REPUBLIC OF SINGAPORE**

IDENTITY CARD NO. **S7213278E**

Name  
**ONG HONG GHEE**

CHINESE

Date of Birth  
**22-04-1972**

Country of Birth  
**SINGAPORE**

Sex  
**F**

S7213278E



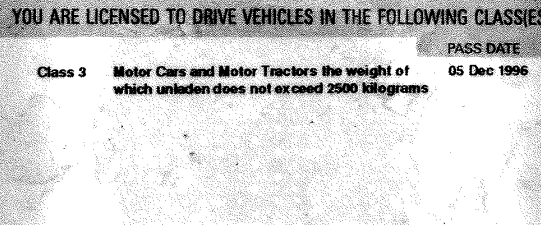

**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)**

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

PASS DATE  
**05 Dec 1996**

Licence No: **S1073022H**

NP 428A





5230013

NRIC No. **S1073022H**

Date of issue  
**30-09-2013**

Address  
**APT BLK 523 JURONG WEST STREET 52  
#13-235  
SINGAPORE 640523**

2010220

NRIC No. **S7213278E**



Blood Group  
**B+**

Date of issue  
**11-05-1994**

APT BLK 181B BOON LAY DRIVE #12-622  
SINGAPORE 642181

NRIC No: **S7213278E**

Date: **22/07/2017**

Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



