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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

	aforesaid.	
		ACCIDENT STATEMENT
	Date Of Report	17/10/2018 10:50
	Date Of Accident	01/10/2018 17:00
	Exact Location Of Accident	JURONG ISLAND OILTANKING TERMINAL CARPARK
	Country/State of Loss	SINGAPORE
	D	ETAILS OF OWN VEHICLE
	Vehicle Registration Number	SJN1271K
	Insured/Policyholder	
	Name Of Registered Owner	REACH INT
	Co Reg No	53247782X
	Email Address	DAVISCHH@GMAIL.COM
	Mobile Phone No	(LOCAL) +65-96743845
	Alternative Phone No	OFFICE-96743845
	Vehicle Particulars	
	Manufacturer	HYUNDAI
	Model	AVANTE-2.0 GL
	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?	NO
	If No, Please state action to be taken	REPORTING ONLY
	Vehicle Category	PRIVATE HIRE
	Insurance Company	
	Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
	Type Of Coverage	COMPREHENSIVE
	Fleet Policy	NO
	Policy Number	5092838086
	Cover Note Number	
	Driver	
	Name of Driver	CHUA HAN HUI
	NRIC No	\$87388007

 Name of Driver
 CHUA HAN H

 NRIC No
 \$8738800Z

 Date Of Birth
 01/12/1987

 Occupation
 INDOOR

 Date Of Driving Pass
 27/04/2007

Driving Experience 11 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96743845

Fax Number

Contact Number OTHERS-96743845

EMail Address DAVISCHH@GMAIL.COM

BLK 627 WOODLANDS AVENUE 6 Address

#09-866

Postcode 730627

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

COLLIDED INTO PARKED VEHICLE Type Of Accident

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 NO ambulance?

YES Was any other material or property damaged? I have been approached by unknown person(s) NO soliciting/offering accident claims assistance. Number of Passengers (Including Driver) 1

Details of Police Action

NO Was the accident reported to the police?

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

SLV4430H Vehicle Registration Number Vehicle Make/Model/Colour HONDA CIVIC

Details Of Properties

Vehicle Category PRIVATE CAR Name of Driver **HUIN SENG KWAN**

NRIC/Passport Number S1744718A **Contact Number** 91720363

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

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 interested parties.
- By the lodgment 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.
- 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 :
 - 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:
 - 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'y Signature Date & Time:

te & Time: 16 001 2018

1215hr

Driver's Signature

(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signatur

NRIC/FIN N

Accident Sketch Plan

	6
	53mam
	220
	TO ONLY OF PARKING LOT
	SUMMATION
ESCRIBE	SI OCT 2019 I was driving my Hyundai Arante (SAT) SENTEK STN12+1K)
DM (OI OCT 2018 I was driving my Hyundai Harris Colly Sorris
	devine out of my parking lot I have collided against my the
While	the left purking lot (SIN4430H). The car (SLV4430H) is parked
and	stationery.
DEC	LARATION e declare the foregoing particulars are true in every respect.

1600 2018

ACRA

ACCOUNTING AND CORPORATE REGULATORY AUTHORITY (ACRA)



12060A00. R800608

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT. THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

Business Profile (Business) of REACH INT (53247782X)

Date: 18/01/2018

Existing Sole-Proprieto	or(s) / Partner(s)		Address	Address	Date of Entry
Name	ID	Nationality/Place of Incorporation/Origin		Source	Position
		SINGAPORE	627 WOODLANDS AVENUE 6	OSCARS	23/10/2013
CHUA HAN HUI	S8738800Z	CITIZEN	#09-866 SINGAPORE (730627)		Owner

Withdrawn Partner(s)	ner(s)	Nationality/Place of incorporation/Origin	Address	Address Source	Date of Entry	Date of Withdrawal
Name					Position	

Abbreviation

OSCARS - One Stop change of Address Reporting Service by Immigration & Checkpoint Authority.

Note

- The information contained in this Business Profile is extracted from lodgements filed by this entity with ACRA.
- The list of officers for this entity is available for online authentication within 30 days from the date of purchase of this Business Profile. Please scan
 the QR code available on the last page of this profile to access the authentication page. For more information, please visit www.acra.gov.sq.

FOR REGISTRAR OF COMPANIES AND BUSINESS NAMES SINGAPORE

RECEIPT NO.

: ACRA180118151128

DATE

: 18/01/2018

This is computer generated. Hence no signature required.



Authentication No.: E18046311F

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