

## 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	01/11/2018 13:40
Date Of Accident	31/10/2018 19:10
Exact Location Of Accident	WOODLANDS AVE 2
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKG7662B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	HENG BAK WEE
NRIC No	S8006927H
Email Address	STEVENHENG@LIVE.COM
Mobile Phone No	(LOCAL) +65-90223444
Alternative Phone No	OFFICE-NOPHONE

### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	B170-1.7 (A)
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	PRIVATE CAR

### Insurance Company

Name of Insurance Company	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	PNPV2017-00008736
Cover Note Number	

### Driver

Name of Driver	HENG BAK WEE
NRIC No	S8006927H
Date Of Birth	22/02/1980
Occupation	INDOOR
Date Of Driving Pass	16/08/2014
Driving Experience	4 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90223444
Fax Number	
Contact Number	OFFICE-NOPHONE
Email Address	STEVENHENG@LIVE.COM

Address	BLK 303 ANG MO KIO AVE 1 #03-1113
Postcode	560303
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	CLEAR
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?	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)	5
Passenger 1	NAME: : TAM YAM WAI GENDER: : FEMALE
Passenger 2	NAME: : EUGENE TAN GENDER: : MALE
Passenger 3	NAME: : HENG FENG CHANG GENDER: : MALE
Passenger 4	NAME: : HENG SHI HUI 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

ON 31/10/2018 @ ABT 1910HRS. I WAS DRIVING ALONG WOODLANDS AVE 2 ON THE MIDDLE LANE. AS I INTEND TO MAKE LEFT TURN, I THEN ON MY LEFT SIGNAL & SWERVE MY STEERING TO LEFT & STOP MY VEHICLE TO WAIT FOR CHANCE TO CHANGE MY LANE TO THE LEFT LANE. WHILE WAITING THE CHANCE, SUDDENLY TAXI (SHD3383J) COLLIDED INTO MY VEHICLE AT FRT LEFT PORTION. THAT'S ALL.

#### 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	SHD3383J
Vehicle Make/Model/Colour	
Details Of Properties	

Vehicle Category	TAXI
Name of Driver	TAN SIEW ANG
NRIC/Passport Number	S7421700A
Contact Number	96844422
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

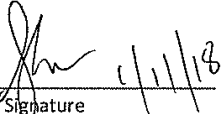
**SKETCH PLAN**

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7. 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 :
  - (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.

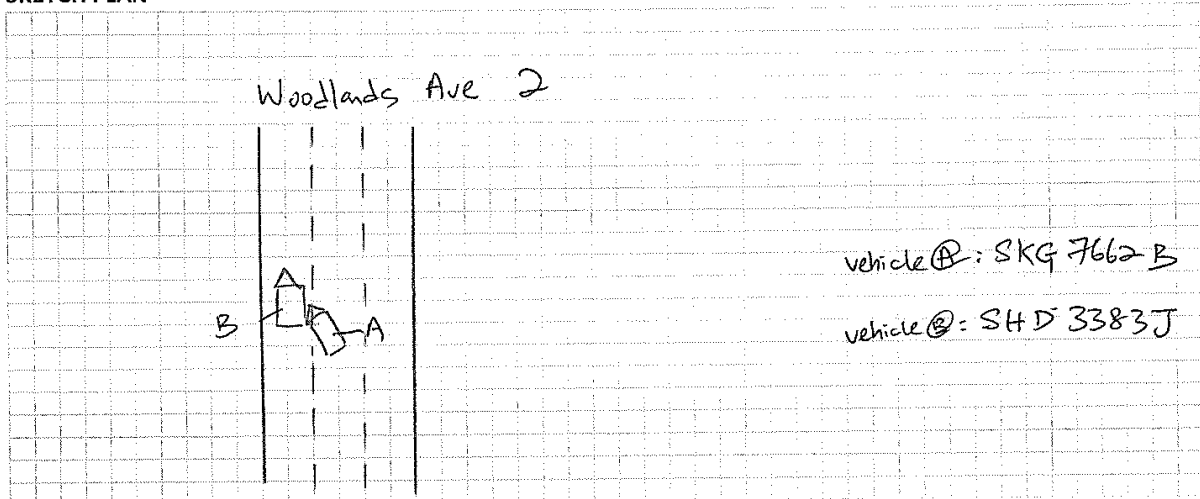
  
Policyholder's Signature  
Date & Time:

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

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

I AM AWARE THAT MY INSURER MAY HAVE A **14 DAYS TIMEFRAME** FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 31/10/2018 @ dt 19:00hrs.

Refer to circumstances of accident.

DECLARATION

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

Policyholder's Signature  
Date & Time:

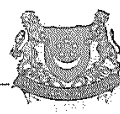
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

☐ Claim own policy  
☐ Claim third party  
☐ Claim OD / TP at other works hop  
☒ For record purpose

Policy No. PNPV2017-00008736  
Insurer FWD (C) Veh.No. SKG 7662 B

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S8006927H



Name

HENG BAK WEE  
(WANG MUWEI)

王睦威

Race

CHINESE

Date of birth

22-02-1980

Sex

M

Country of birth

SINGAPORE

S8006927H



4710580



NRIC No. S8006927H

Date of issue

26-03-2011

Address

APT BLK 303 ANG MO KIO AVENUE 1  
#03-1113  
SINGAPORE 560303

Accident Photo



Accident Photo





Accident Photo



Accident Photo



TP VEH





TP VEH



