

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	22/11/2018 16:20
Date Of Accident	21/11/2018 23:40
Exact Location Of Accident	JUNC OF SENJA RD & SENJA WAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLL1948D
Insured/Policyholder	
Name Of Registered Owner	GD CARZ
Co Reg No	53122597J
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-97810867

Vehicle Particulars

Manufacturer	HOLDEN
Model	SHUTTLE
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	THIRD PARTY
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	5083196477-02
Cover Note Number	-

Driver

Name of Driver	ALVIN LOH CHIN LOKE (ALVIN LU ZHENLU)
NRIC No	S8225145F
Date Of Birth	07/08/1982
Occupation	OUTDOOR
Date Of Driving Pass	25/05/2005
Driving Experience	13 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96199962
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 285 CHOA CHU KANG AVE 3 #10-300
Postcode	680285
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

Type Of Accident	COLLISION - HEAD TO REAR
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?	YES
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)	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

I STOP AT THE TRAFFIC JUNC OF SENJA RD & SENJA WAY WAITING TO TURNING RIGHT INTO SENJA WAY. ALL OF A SUDDEN, I FELT AN IMPACT FROM BEHIND. AFTER THE INCIDENT, I ALIGHTED FROM MY VEH AND REALIZED VEH B (BEARING NO GBE3773H) FROM BEHIND COLLIDED ONTO MY VEH REAR PORTION.

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	GBE3773H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	YAP YONH SHEN
NRIC/Passport Number	S9833077A
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	ALVIN LOH CHIN LOKE (ALVIN LU ZHENLU)
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Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

NECK & BACK

SLL1948D

YES

NO

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.:

Senja Way

Senja Rol

A = SLH1948D

B = GBE3773H

Please refer to statement

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

Date & Time:

Driver's Signature

Reporting Centre Personnel's Signature

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8225145F



Name

ALVIN LOH CHIN LOKE
(ALVIN LU ZHENLU)

卢振禄

Race

CHINESE

Date of birth

07-08-1982

Sex

M

Country/Place of birth

SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S8225145F

ALVIN LOH CHIN LOKE
(ALVIN LU ZHENLU)

Birth Date: 07 Aug 1982

Issue Date: 25 May 2005



5203087



NRIC No. S8225145F



Date of issue

07-08-2013

Address

APT BLK 285 CHOA CHU KANG AVENUE 3
#10-300
SINGAPORE 680285

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

PASS DATE

25 May 2005

Class 3 Motor cars <= 3000 kg with <= 7 passengers,
exclusive of the driver; and motor tractors,
vehicles <= 2500 kg

NP 428A



Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="21/11/2018 16:13"/>
Vehicle No.(For Motor)	<input type="text" value="SLL1948D"/>	Certificate Number	<input type="text"/>
<input type="button" value="Search"/>			

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	S083196477-02		GD CARZ	53122597J	GFT	drivo CLASSIC	SLL1948D	SLL1948D	19/08/2018	

Policy Information

Policy No.	5083196477-02	Policyholder Name	GD CARZ	Policyholder NRIC	53122597J
Certificate No.					
Address	210 TURF CLUB ROAD B16 TURF CITY SINGAPORE 287995				
Product Name	FLEET INSURANCE	Plan	Group Policy Flag N		
Policy Issue Date	24/07/2018	Effective Date	19/08/2018 00:00	Expiry Date	18/08/2019 23:59
Third Party Excess	1000.00	Own damage Excess	1000.00	Windscreen Excess	100.00
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	1000.00	Outside Singapore TP Excess	1000.00		
Agent	COWELL INSURANCE (AGENCY)	Agent Tel.	63392592	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

Policyholder Mailing Address

Address 1	210 TURF CLUB ROAD	Address 2	B16 TURF CITY	Address 3	SINGAPORE 287995
Address 4		Address Type	Singapore address	Post Code	287995
Unit No.		Related Policy Number	5083196477-02		

Insured Object: SLL1948D

Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
1	19/08/2018 00:00	Basic Information Endorsement	000001286878393	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that this policy is extended to cover the following vehicle(s) as follows: CHASSIS NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. ZVW400029819 19-08-2018 \$2,060.02 In view of this amendment, an additional premium of \$2,060.02 (inclusive of GST) is payable under your policy. Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate it if you could make payment to us within 14 days from the date of this letter. For cheque payment, please issue the cheque in favour of "NTUC Income" with your name and policy number indicated on the reverse of the cheque. Alternatively, you could also make payment at any of our branches by cash or NETS.
2	19/08/2018 00:00	Basic Information Endorsement	000001286875494	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that this policy is extended to cover the following vehicle(s) as follows: VEHICLE NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. SLD2188R 19-08-2018 \$1,882.65 In view of this amendment, an additional

Claim Handling

Accident MT/1021041

Policy No.	5083196477-02	Vehicle No.	SLL1948D	GST Registration No.	
Certificate No.					
Policyholder Name	GD CARZ			Policyholder NRIC	531221
Product Code	FLEET INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	97810867	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	Yes
Accident Details					
Report Date	23/11/2018 09:30	Accident Report Within 24 hrs	Yes	Accident Type	Collision
Date of Accident	21/11/2018	Time of Accident hh:mm	23:40	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	JUNC OF SENJA RD & SENJA WAY				
Excess					
Own damage Excess	1,000.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess	1,000.00		
Third Party Excess	1,000.00	Outside Singapore TP Excess	1,000.00		
Benefits					
GST Registered Information					
GST Registered	No	GST Registration Date			
GST Registration No.		GST Status Verified		Yes	
Modification History					
Policyholder Mailing Address					
Address 1	210 TURF CLUB ROAD	Address 2	B16 TURF CITY	Address 3	SINGAPORE
Address 4		Address Type	Singapore address	Post Code	287991
Unit No.		Related Policy Number	5083196477-02		
OI Driver Info					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	ALVIN LOH CHIN LOKE (ALVIN L)	Driver NRIC	S8225145F	Driver DOB	07/08/
Register Date of Driver License	25/05/2005	Driver Age	36	Driving Experience	13
Contact No.(Mobile)	96199962	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 285 #10-300	Address 2	CHOA CHU KANG AVENUE 3	Address 3	SINGAPORE
Address 4		Address Type	Singapore address	Post Code	680281
Unit No.	10-300				
Does he own a Singapore Registered car?	Yes <input checked="" type="radio"/> No <input type="radio"/>	Driver Vehicle No.		Driver Insurer Company	
Declaration					
breathalyser or Blood Test Reading?	0 mg	Any Injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No		
Modification History					

Claim 001 **New**

Claim Type *	OD-MX	Insured Name	GD CARZ
Contact No.(Mobile)	82331245	Contact No.(Home)	
Email Address		Vehicle Number	SLL1948D
Claim Description	SLL1948D / GBE3773H ON 21 Nov 2018		
Preferred Workshop	0	Insured Liability	Not at Fault
Continued No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Date Registered		GIA report	Received
Report Taken By		Claim Close Date	23/11/2018 09:36
			LIEW SHAN HUI
<input checked="" type="checkbox"/> Print AK letter			

Save Submit

Attachment

Accident No.	MT/1021041	Claim No.	001
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Last Doc. Received

Yes No

Upload Date

23/11/2018 09:38

Path *

Category *

Confidential

Urgency *

Choose File No file chosen

Clear

Please Select ▼

NO ▼

Normal ▼

Choose File No file chosen

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Please Select ▼

NO ▼

Normal ▼

Choose File No file chosen

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Normal ▼

Choose File No file chosen

Clear

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NO ▼

Normal ▼

Choose File No file chosen

Clear

Please Select ▼

NO ▼

Normal ▼

Message Read

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 23 Nov 2018 09:38	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-11-23
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 23 Nov 2018 09:38	SAS	Normal	SAS 2018-11-23
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 23 Nov 2018 09:38	Photos	Normal	Photos 2018-11-23
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 23 Nov 2018 09:38	Photos	Normal	Photos 2018-11-23
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 23 Nov 2018 09:38	Photos	Normal	Photos 2018-11-23
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 23 Nov 2018 09:38	Photos	Normal	Photos 2018-11-23
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 23 Nov 2018 09:38	Photos	Normal	Photos 2018-11-23

Video List

Uploaded By/Date	Folder Date	File Name	Source
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