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 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.

ACCIDENT STATEMENT	
Date Of Report	23/11/2018 12:16
Date Of Accident	22/11/2018 11:30
Exact Location Of Accident	CHOA CHU KANG 230KV S'PORE POWERGRID SUBSTATION
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBB4194M
Insured/Policyholder	
Name Of Registered Owner	POWER AUTOMATION PTE LTD
Co Reg No	199504994R
Email Address	WEIMING.DIONG@PA.COM.SG
Mobile Phone No	(LOCAL) +65-98733976
Alternative Phone No	OFFICE-98733976
Vehicle Particulars	
Manufacturer	FIAT
Model	DOBLO-1.9 D CARGO JTD (M)
Exact Purpose for which vehicle was being used at time of accident	VAN WAS PARKED
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 28674051 MKC
Cover Note Number	
Driver	
Name of Driver	DIONG WEI MING
NRIC No	S8784209F
Date Of Birth	30/08/1987
Occupation	OUTDOOR
Date Of Driving Pass	14/04/2012
Driving Experience	6 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	+65-98733976
Fax Number	
Contact Number	OTHERS-98733976
EMail Address	WEIMING.DIONG@PA.COM.SG

Address	BLK 672B YISHUN AVENUE 4 #05-552
Postcode	762672
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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)	0

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?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YN5691C
Vehicle Make/Model/Colour	MERCEDES BENZ SPRINTER
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MUHAMAD HELMY BIN AHMAD NOOR
NRIC/Passport Number	S8029329A
Contact Number	92311462
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

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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.

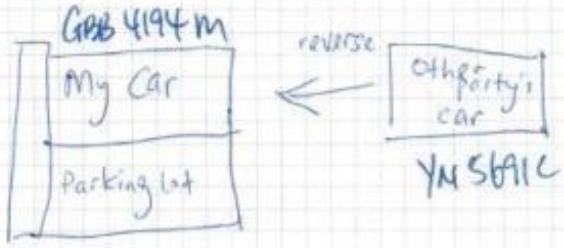
POWER AUTOMATION PTE LTD

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.:

23/11/2018

Accident Sketch Plan

SKETCH PLAN Choa Chu Kang 230kV Sembcorp Powergrid Substation



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 22th Nov 2018 at 11.30 am, other party's van was entering the Choa Chu Kang 230kV Singapore Powergrid substation. My car was parked inside the station at 10.15 am. During this time, the other party's van was moving towards my car and was preparing to park. When the driver was preparing to reverse and park inside the parking lot, he reversed and bumped into my car. As the result, my car plate was damaged.

DECLARATION

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

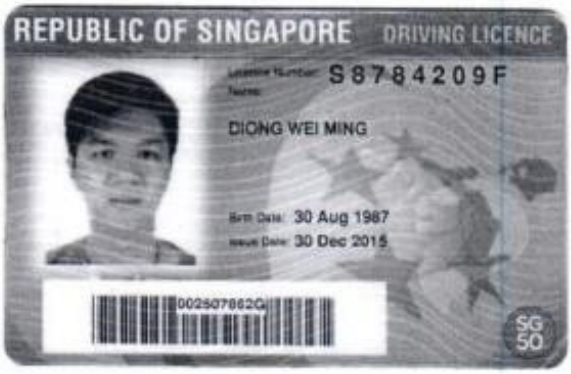
Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:
		23/11/2018

ID


REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8784209F

Name
DIONG WEI MING

Race
CHINESE
Date of birth
30-08-1987
Sex
M
Country/Place of birth
MALAYSIA


REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S8784209F
Name
DIONG WEI MING
Birth Date 30 Aug 1987
Issue Date 30 Dec 2015


9385925

NRIC No. S8784209F

Nationality
MALAYSIAN
Date of issue
06-11-2015

APT BLK 672B YISHUN AVENUE 4 #05-562
SINGAPORE 762672
NRIC No: S8784209F Date: 20/01/2017


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

		EFFECTIVE DATE
Class 2B	Motorcycles =< 200 cc	14 Apr 2012
Class 3	Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg	14 Apr 2012

Licence No:S8784209F

NP 428A

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

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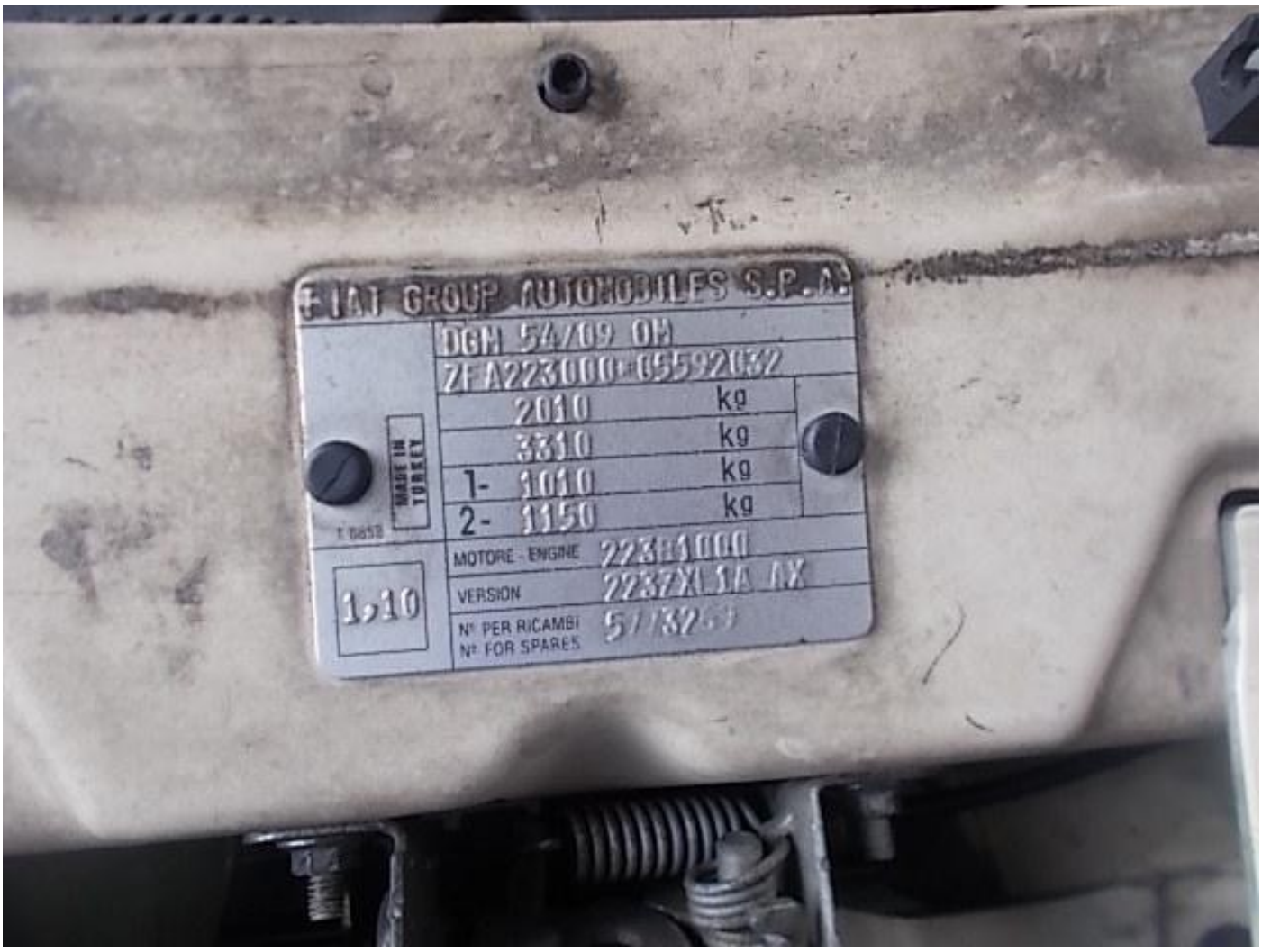

Addendum Sheet

GENERAL INSURANCE ASSOCIATION RECORDS MANAGEMENT CENTRE

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: S66SS0020G / GST Reg. No.: M400017733

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 : XMAC18/51888 Vehicle Registration No: GBB4194M

Name(as shown in NRIC) : DICKEY WAI MING NRIC/FIN/Passport No : S8784209F

(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate

Address : _____ Singapore( )

Contact (Tel) : _____ Mobile No. : 98733976

Email Address : _____

Date of Accident : 22/11/2018 Time of Accident : 11:30

Place of Accident : CHOA CHU KANG 230KV SUBSTN POWERGRID SUBSTATION

Insurance Company : MSIG

(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:

To INSERT T/P PARTICULARS.

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No:
Date: 07/12/2018