Your NCD will be affected due to late reporting
Actual e-Filling Submission Date & Time: 06/12/2018 16:19

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	04/12/2018 11:00
Date Of Accident	17/11/2018 14:20
Exact Location Of Accident	ALONG EAST COAST ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLH3201H
Insured/Policyholder	
Name Of Registered Owner	LOKE PUI WAI CYNTHIA
NRIC No	S7346627Z
Email Address	LOKEPUIWAI@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-98154677
Alternative Phone No	OTHERS-98154677
Vehicle Particulars	
Manufacturer	TOYOTA
Model	ESTIMA
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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 29098021 QMY
Cover Note Number	
Driver	
Name of Driver	LOKE PUI WAI CYNTHIA
NRIC No	S7346627Z
Date Of Birth	20/12/1973
Occupation	INDOOR
Date Of Driving Pass	06/12/1996
Driving Experience	21 YEARS AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98154677
Fax Number	
Contact Number	OTHERS-98154677
EMail Address	LOKEPUIWAI@HOTMAIL.COM

Address	26 JALAN RENDANG
Postcode	428357
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	SIDE SWIPE
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)	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

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	SGH8334J
Vehicle Make/Model/Colour	TOYOTA RAV 4
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

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.**
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5. **Any false reporting may be referred to the Police for investigation.**
6. The 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 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:

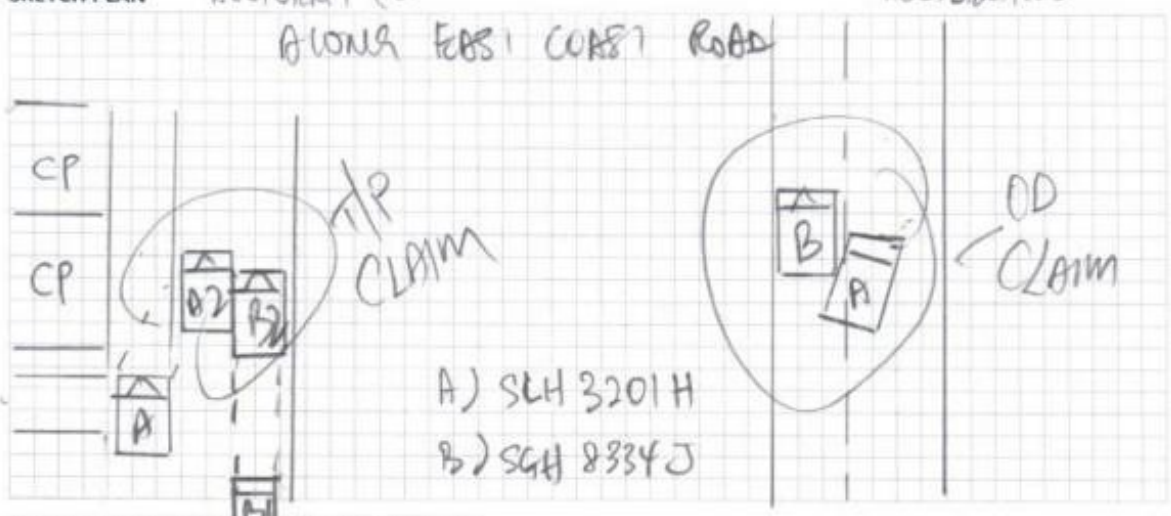
   (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

   (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time: 3 Dec 2018 3.57pm	Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN ACCIDENT (1) ACCIDENT (2)



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 17 Nov 2018, car A was travelling along East Coast Road. As there are vehicles parked at the side.
Car A signal to filter to the right after checking blind spot.
Car A saw car B accelerating and stopped for Car B to pass. Car B hence knocked into Car A mirror.
So both cars stopped along the road.
Car B was very agressive and refused to settle with me. Instead claimed that Car A caused extensive damage to his ~~rear~~ left SIDE mirror which I believe it's an old damage. So I did not asked him to settle as I thought that it was minor. So no driver licence or information was exchanged.
Accident (2) happened as Car A was moving out behind car B. Car A accidental brushed against the rear right of car B. Both stopped to exchange details. This time Car B was even more aggressive, refused to settle, and show his driver licence. Car B insisted that I show him my driver license but refused to show me his license. Car A told Car B to lay down his license on the chair since Car B did not want me to touch it. Car B started taking pictures of Car A owner for no reason. So car A told him to stop taking

Page (1)

DECLARATION

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

Policyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
Date & Time: 3 Dec 2018	(If driver is not the policyholder) Date & Time:	Name: NRIC/FIN No.: 04/12/2018

Accident Sketch Plan

SKETCH PLAN

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

photos which is irrelevant to the accident. So Car A tried to stop him from taking pictures. Car B owner then used his hands and fist to push Car A back and started shouting agressively. Car A knew that she was in danger from Car B aggressive behaviour. So Car A told him to calm down but he refused to and insisted that car A show the license. So Car A ask car B to lay down license on chair so that Car A. do not touch his license. So when car A try to lift the license to take picture, car B snatched it back and warned Car A not to touch it. After that, car B stormed off and said he will report police. Nothing was settled.

DECLARATION

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

Page (2)

Policyholder's Signature
Date & Time: 3 Dec 2018

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

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

ID


REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7346627Z

Name
LOKE PUI WAI CYNTHIA

陆 佩 慧

Race
CHINESE

Date of birth
20-12-1973

Sex
F

Country of birth
SINGAPORE


REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S7346627Z

Name
LOKE PUI WAI CYNTHIA

Birth Date 20 Dec 1973

Issue Date 28 Nov 2003


3457732

NRIC No. S7346627Z

Date of issue
16-01-2004

26 JALAN RENDANG
SINGAPORE 428357

NRIC No: S7346627Z Date: 22/12/2011 No: 6897967


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

PASS DATE

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms 06 Dec 1996

Licence No: S7346627Z

NP 428A

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

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Accident Photo

Accident Photo

Accident Photo

Accident Photo

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.: M400017735

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 : MAIA[illegible]56662 Vehicle Registration No: SLH3201H

Name(as shown in NRIC) : LOKE PEI WAI CYNTHIA NRIC/FIN/Passport No : S7346627Z

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

Address : _____ Singapore( )

Contact (Tel) : _____ Mobile No. : 98154677

Email Address : _____

Date of Accident : 17/11/2018 Time of Accident : 14:30

Place of Accident : ALONG EAST COAST ROAD

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:

ACCIDENT TIME FROM THE FIRST ACCIDENT TO 14:20HRS.

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name: KOH LIP MING
NRIC/FIN No.:
Date: 06/12/2018