

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	04/12/2018 15:57
Date Of Accident	04/12/2018 08:10
Exact Location Of Accident	SLE TOWARDS CITY B/F UPPER THOMSON EXIT 5 (300M)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJM2828D
Insured/Policyholder	
Name Of Registered Owner	ER CHIANG MENG
NRIC No	S1817462F
Email Address	ER118118@YAHOO.COM
Mobile Phone No	(LOCAL) +65-92965888
Alternative Phone No	OTHERS-92965888

Vehicle Particulars

Manufacturer	BMW
Model	523I
Exact Purpose for which vehicle was being used at time of accident	GOING TO WORK
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 CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5095688391-01
Cover Note Number	

Driver

Name of Driver	ER CHIANG MENG
NRIC No	S1817462F
Date Of Birth	15/04/1967
Occupation	INDOOR
Date Of Driving Pass	06/07/1990
Driving Experience	28 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92965888
Fax Number	
Contact Number	OTHERS-92965888
Email Address	ER118118@YAHOO.COM

Address	2 WOODGROVE DRIVE #04-14
Postcode	738207
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	4
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)	3
Passenger 1	NAME: : WIFE GENDER: : FEMALE
Passenger 2	NAME: : NEIGHBOUR 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

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	SLA8977G
Vehicle Make/Model/Colour	MAZDA 3
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SIM WEI LIANG
NRIC/Passport Number	S8627239C
Contact Number	
Address	
Postcode	

Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver) 2
Passenger 1
NAME: :
GENDER: :

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SLV2705D
Vehicle Make/Model/Colour TOYOTA CHR
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver YEO ENG SENG
NRIC/Passport Number S1661721J
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SJR4126G
Vehicle Make/Model/Colour
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

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: 4/12/18

3:25 pm

Driver's Signature

(If driver is not the policyholder)

Date & Time:

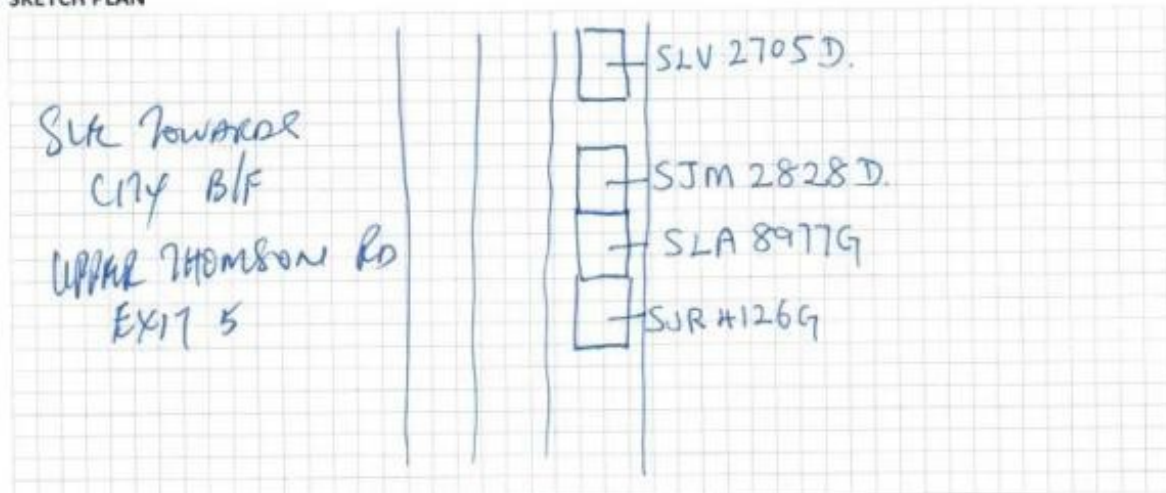
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

While I was travelling along SLE towards city before upp. Thomson Road EXIT 5 300m away, I brake my car as there is a jam in front, and I heard a "bang" on my car and my car moved forward and hit the car in front of my car.

~~After~~ After the accident, there is no injury, but both me & me 2 passenger felt a bit of neck strain.

DECLARATION

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

Policyholder's Signature

Date & Time: 3:30pm
4/12/18.

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



A close-up photograph of a car's instrument cluster. On the left is a large speedometer with a black face and white markings, ranging from 0 to 260 km/h. The needle is positioned at approximately 10 km/h. To its left is a smaller circular gauge, likely for fuel level, with markings for 1/2 and 1. To the right of the speedometer is a tachometer with a black face and white markings, ranging from 0 to 5, representing 0 to 5000 RPM. The needle is at 0. The instrument cluster has a silver-colored bezel. A car key with a red and silver fob is resting on the dashboard in front of the speedometer. The background is dark and out of focus.

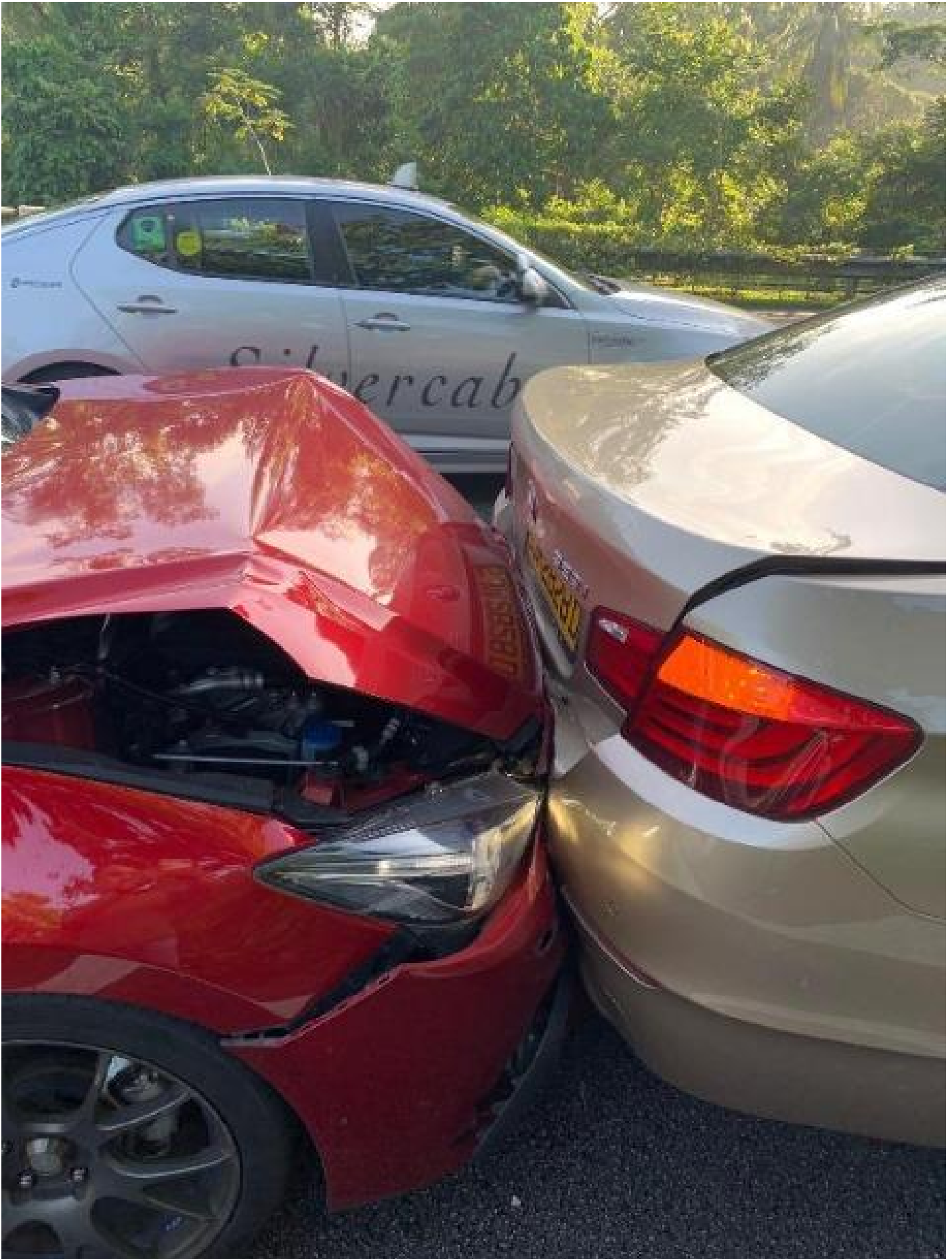
Accident Photo



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