SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Mobile Number

Contact Number EMail Address

Fax Number

- 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 <u>truthful and accurate</u> 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	06/12/2018 17:32
Date Of Accident	06/12/2018 13:30
Exact Location Of Accident	JUNC OF TAMPINES AVE 5 & TAMPINES AVE 2
Country/State of Loss	SINGAPORE
C	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJQ136J
Insured/Policyholder	
Name Of Registered Owner	TAN PANG TONG
NRIC No	S0045578D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-82989046
Alternative Phone No	OFFICE-82989046
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	CLA180 (R18 BI)
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 CAR
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D 71536840 QMY
Cover Note Number	-
Driver	
Name of Driver	TAN PANG TONG
NRIC No	S0045578D
Date Of Birth	09/10/1951
Occupation	INDOOR
Date Of Driving Pass	17/11/1971
Driving Experience	47 YEARS AND 0 MONTHS
Gender	MALE

(LOCAL) +65-82989046

OFFICE-82989046

NOEMAIL

Address 63 TAMPINES AVE 1 #08-03

Postcode 529777

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

-

NO

2

NO

General Information of the Accident

Type Of Accident HIT BY FALLEN TREE / OTHER OBJECTS

Weather Conditions DRIZZLING
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?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME: : NG HWEE CHOO

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name TAMPINES N.P.C

Police Station Address ROAD: TAMPINES N.P.C , POSTCODE: 529682 , COUNTRY: SINGAPORE

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Remarks/ Reasons: TP TOOK THE MEMORY CARD

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBG4279B

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SJK877K

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)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number GBD2762B

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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- 5. Any false reporting may be referred to the Police for investigation.
- 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)

l 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:
 - processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations rolating 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:
 - 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.

Palicyholder's Signature Date & Time:

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

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

Accident Sketch Plan

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Please	Refer to she Police Report	
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	ticulars are true in every respect. Driver's Signature (If driver is not the policyholder) Reporting Centre Personnel's Signature Name:	

POLICE REPORT





Police Station Of Origin: Tampines N.P.C 6 Tampines Avenue 4 St

6 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

1 of 3 Report No. T/20181206/2102

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/12/2018 15:22		Made:	Vide Report No.:	Station Diary No. 59	
Informa	nt's Partic	ulars		Service of the servic	
	Informant: NG TONG		Address: 63 TAMPINES AVENUE 1 #08-03 SINGAPORE 529777		
ID Type / ID No.: NRIC NO / S0045578D		78D	Contact No.: Home/Office: Mobile: 82989046		
National SINGAP	ity: ORE CITIZ	EN	Email:		
Sex: Male	Age: 67	Date of Birth: 09/10/1951	Type of Informant: Driver		
Race: Chinese		1	Language:	Institution / School Name:	
Occupation: TRAINER SECURITY		TY	Driving Licence Informatio Class: 3	Date of Expiry:	

Type of Accident:	Non-Injury Government Prope	erty Drink Drive: No	Date/Time of Accident: 06/12/2018 13:30	Type of Location X-Junction	
Weather:	VENUE 5 NES AVENUE 5 toward	Road Surface:	direction	Road Speed Limit:	
Drizzling		Wet			
T		Traffic Control: Traffic Light - W	orking	Traffic Volume: Moderate	
-	on:			Anyone conveyed by	

Details of Vehicle Involved						
Vehicle No.		Make	Model	Color	Condition	No of Passenger
GBD2762B	Lorry				Slightly Damaged	0
GBG4279B	Lorry				Seriously Damaged	0
SJK877K	Car				Slightly Damaged	0
SJQ136J	Car				Slightly Damaged	1

POLICE REPORT



T/20181206/2102

Police Station Of Origin: Tampines N.P.C 6 Tampines Avenue 4 SINGAPORE 529682 Tel No: 1800-5871999

2 of 3 Report No. T/20181206/2102

CONTINUATION OF REPORT

Brief Details.

On the above mentioned date, time and said location, I was driving my MERCEDES BENZ, SJQ136J, grey in colour along Tampines Ave 5 turning towards Tampines Ave 2 with one passenger beside me. Initially I was stationary at the extreme right lane queuing behind one vehicle car. In less than 30 second, suddenly I heard a loud sound from my rear and subsequently felt an impact from my right rear passenger side door. I then turn my head to take a look and saw one green in colour railing had dislodge and landed onto my vehicle rear passenger door area. After which I proceed out of my vehicle and saw a total of 4 vehicle car involved including mine with the railing landed onto the vehicle. The sequence as follow: 1st veh: SJQ136J, 2nd veh: SJK877K, 3rd veh: GBD2762B, last veh: GBG4279B. I wish to state the last vehicle is the cause of this accident as the vehicle front portion directly collided onto the railing causing it to dislodge. There is no collision between each vehicle.

Subsequently ambulance and police came and I was informed by the police to lodge a traffic accident report. No one was conveyed due to the accident and no one was injured. Due to the accident, my vehicle damages is there is some dent and scratches on the right portion of my vehicle. I wish to state I have in car camera and it capture the accident.





Police Station Of Origin: Tampines N.P.C 6 Tampines Avenue 4 SINGAPORE 529682 Tel No: 1800-5871999

3 of 3 Report No. T/20181206/2102

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: G / Staff Sgt TAN YI KUN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 06/12/2018 15:22
Officer In Charge Of Case: TP / AEIT / Sgt 2 SHARIFAH NOR FARIZAN BINTE SYED MOHD SAID	Classification Of Case:
Contact No.: 65476172 Authentication Stamponics	





























