### 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	05/12/2018 19:49
Date Of Accident	04/12/2018 19:05
Exact Location Of Accident	AYE(MCE) BEFORE ALEXANDRA ROAD EXIT
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKN3363D
Insured/Policyholder	
Name Of Registered Owner	TOKYO CENTURY LEASING (SINGAPORE) PTE. LTD.
Co Reg No	197901535G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62208751
Vehicle Particulars	
Manufacturer	NISSAN
Model	SYLPHY 1.6 CVT ABS D/AIRBAG 2WD 4DR
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	MSD/VPCP/13-009073
Cover Note Number	
Driver	

Name of Driver NAGOYA HIDEYUKI

NRIC No G3116306X Date Of Birth 09/01/1966 Occupation **INDOOR Date Of Driving Pass** 08/10/2015

**Driving Experience** 3 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-97918161

Fax Number **Contact Number** 

**EMail Address** HIDEYUKI NAGOYA@CANON.COM.SG Address NIL

Postcode

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 2
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.

NO
Number of Passengers (Including Driver)

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

### **Circumstances of Accident**

I was traveling along AYE(City) on the 2nd lane from the right. Traffic was heavy and slow moving. I signal right to change to the right lane. After checking my right mirror and blindspot, i change lane to the right lane when i noticed car SLD68S had stopped without any hazard light on. I managed to brake but my car skidded forward due to wet road surface and my car collided onto the rear of car SLD68S.

Attachment(s)

Are accident photos available for attachment? NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT

Was there any video captured by Car Camera? NO Was there any audio recorded? NO

## **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number SLD68S

Vehicle Make/Model/Colour AUDI/A5 CABRIOLET 2.0 TFSI QUATTRO

**Details Of Properties** 

Vehicle Category PRIVATE CAR
Name of Driver NG POH SOON
NRIC/Passport Number S1769265H
Contact Number 81231100

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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### SKETCH PLAN

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  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 before made available afforcased.
- 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 (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
- (ii) 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.

**VERIFIED BY AJAX MARS** REPORTING OFFICER

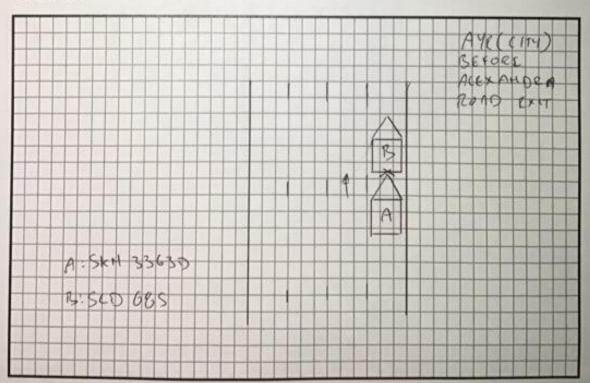
Muhammad Faizal

Bin Pabila

Witnessed by Reporting Centre Personnel

Policyholder's Signature / Date & Time Driver's Signature / Date & Time

#### Sketch Plan



### **Common Statement**

# **ACCIDENT STATEMENT (2000 characters)**

2nd lane from the right. Traffic was heavy and the right lane. After checking my right mirror at lane when i noticed car SLD68S had stopped to brake but my car skidded forward due to wet the rear of car SLD68S.
rided above are true in every aspect
Thomas
Registered Owner or Driver's Signature  Date/Time:
5 December 2018 at 5:12 PM

### **Identification Card**



### **Identification Card**



**Driving License** 



**Driving License** 

