

## 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	29/12/2018 15:43
Date Of Accident	06/12/2018 10:20
Exact Location Of Accident	BLK 811 HOUGANG CENTRAL CARPARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJC3578X
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MS YEO I YOK
NRIC No	S0713483E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97436653
Alternative Phone No	OTHERS-97436653

### Vehicle Particulars

Manufacturer	PERODUA
Model	KELISA GX M
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	18-MV007512-R01
Cover Note Number	

### Driver

Name of Driver	MS YEO I YOK
NRIC No	S0713483E
Date Of Birth	26/01/1941
Occupation	INDOOR
Date Of Driving Pass	24/06/1959
Driving Experience	59 YEARS AND 5 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97436653
Fax Number	
Contact Number	OTHERS-97436653
Email Address	NOEMAIL

Address	BLK 467 HOUGANG AVE 8 #11-1520
Postcode	530467
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 (including own vehicle) involved in the accident	2
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

PLS REFER TO THE ATTACHED STATEMENT.

#### 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	SJJ9543U
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:

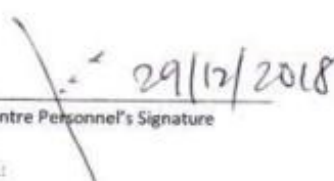
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

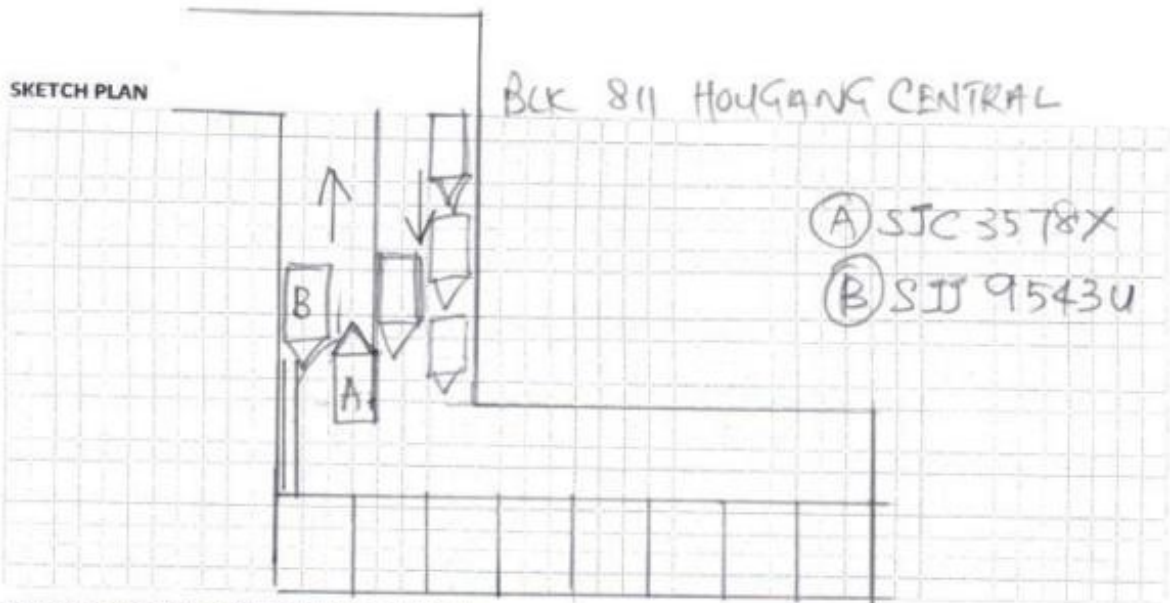


Driver's Signature  
(if driver is not the policyholder)  
Date & Time:

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

# Sketch Plan #2

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

AFTER MY SHOPPING, AS I WAS LEAVING THE CAR PARK AT THE CURVED LANE, THERE WERE SEVERAL CARS PARKED ILLEGAL ON BOTH SIDES OF THE LANE. AS I PROCEEDED TO MOVE STRAIGHT, I HAD TO AVOID INCOMING TRAFFIC WHICH WAS MOVING TOWARDS ME IN BETWEEN THE TWO LANES. IT WAS VERY SUDDEN AND I TRIED TO MOVE SLIGHTLY TO THE LEFT TO AVOID CRASHING WITH THE INCOMING LORRY. MY FRONT PORTION OF I ACCIDENTLY HIT ON THE ~~FRONT~~ VEHICLE B WHICH WAS ILLEGALLY PARKED ALONG THE YELLOW LINE. IT WAS A MILD SCRATCH WHEN I OFFERED TO SETTLE PRIVATE BUT THE YOUNG CAR OWNER WAS VERY ARROGANT AND RUDE. SO I LEFT THE SCENE WHEN HE DIDNT WANT TO SETTLE.

## DECLARATION

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

楊愛乙  
Policyholder's Signature  
Date & Time:

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

29/12/2018  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



Sketch Plan #3



#11-1520

Sketch Plan #4



CONFIDENTIAL

Annex E

NOTICE OF COMPLIANCE

This is to confirm that **YEO I YOK**, NRIC No.: **S0713483E** has reported to the Police a non-injury traffic accident which occurred at the service road of Blk 811 Hougang Central on 06/12/2018 at 1020hrs, involving the following vehicles:

SJC3578X

SJJ9543U

楊愛兒

2. If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

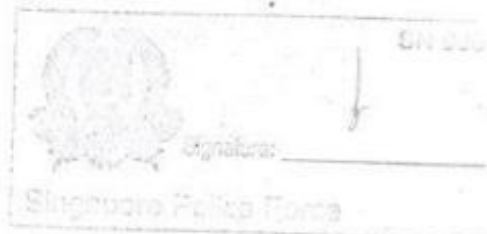
Rank/Name of Issuing Officer: Mohamed Azmi Bin Mohamed Riduan

Date: 06/12/2018

Time: 1245hrs

S/D Ref: 4

Police Post/Unit: Hougang Neighbourhood Police Post



Original – to be issued to informant  
Duplicate – to be submitted to Traffic Police

Version as of 15 Jan 2002

CONFIDENTIAL

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

