

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	02/01/2019 11:12
Date Of Accident	31/12/2018 14:30
Exact Location Of Accident	BKE (RIFLE RANGE FLYOVER)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKH4113J
Insured/Policyholder	
Name Of Registered Owner	NICHOLAS SIM WEI HAN
NRIC No	S8472502A
Email Address	NICKS.SIM@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81390994
Alternative Phone No	OTHERS-81390994

Vehicle Particulars

Manufacturer	KIA
Model	CERATO FORTE-1.6 SX (A)
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	D 27444327 QMY
Cover Note Number	

Driver

Name of Driver	NICHOLAS SIM WEI HAN
NRIC No	S8472502A
Date Of Birth	14/11/1984
Occupation	INDOOR
Date Of Driving Pass	23/02/2011
Driving Experience	7 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81390994
Fax Number	
Contact Number	OTHERS-81390994
Email Address	NICKS.SIM@GMAIL.COM

Address	BLK 258B PUNGGOL FIELD #10-03
Postcode	822258
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	HIT BY FALLEN TREE / OTHER OBJECTS
Weather Conditions	DRIZZLING
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	1
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : WIFE 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?	YES
Was there any audio recorded?	NO

Accident 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:

02/11/19 @ 0945h02

Driver's Signature

(If driver is not the policyholder)

Date & Time:

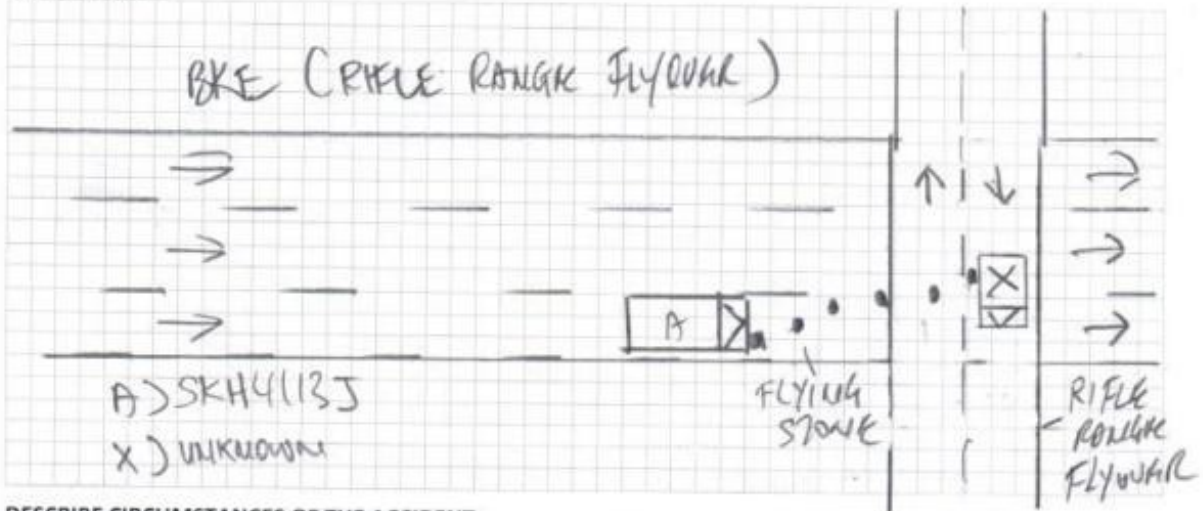
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving home with my pregnant wife in the ~~same~~ car. I exited PIE to take BKE (towards woodlands) ~~just~~ was about to approach Rifle Range Flyover when a large concrete rock suddenly smashed through my windscreen, struck my top part of steering wheel with such force that my steering wheel was bent inwards. Glass shards and particles clouded the interior of the car momentarily as I tried to drive to Road shoulder. The road prior to being struck, was clear of my heavy vehicle, and it was a light drizzle at that time. It seemed like the rock came flying from the sky. After EMAS brought us and the car to a safe zone (Dairy Farm Nature Centre) I searched my vehicle and found the rock in the back seat, on the floor behind my driver's seat. Rock size approx. 15cm x 6cm x 9cm. My wife and I suffered some scratches on the hands and legs. I also have a dashcam recording of when the incident happened.

DECLARATION

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

Policyholder's Signature

Date & Time:

02/01/19 @ 0945hrs

SPARKS Sketch Plan Form V3

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. **S8472502A**



Name

NICHOLAS SIM WEI HAN

Race

CHINESE

Date of birth

14-11-1984

Country/Place of birth

MALAYSIA

Sex

M



5895580

NRIC No. **S8472502A**



Date of issue

20-03-2018

Address

**APT BLK 258B PUNGGOL FIELD
#10-03
SINGAPORE 822258**



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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