

## 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	11/01/2019 14:52
Date Of Accident	12/11/2018 10:15
Exact Location Of Accident	PIE TWDS JURONG AT THE SLIP RD EXIT TO JLN ANAK BT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	YM8101A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ASSOCIATIONS FOR PERSONS WITH SPECIAL NEEDS
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-63462425

### Vehicle Particulars

Manufacturer	MITSUBISHI
Model	-
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	GREAT AMERICAN INSURANCE COMPANY
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MOMVC000007315-00-000
Cover Note Number	-

### Driver

Name of Driver	PANG CHONG TONG
NRIC No	S1467655D
Date Of Birth	24/09/1961
Occupation	OUTDOOR
Date Of Driving Pass	03/06/1980
Driving Experience	38 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97390245
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 396 TAMPINES AVE 7 #12-301
Postcode	520396
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
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?	
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: : UNKNOWN GENDER: : MALE
Passenger 2	NAME: : UNKNOWN GENDER: : MALE

#### 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

I WAS TRAVELLING ALONG PIE TWDS JURONG AT THE SLIP RD EXIT TO JLN ANAK BUKIT, I WAS ON THE LEFT LANE, SUDDENLY VEH B (BEARING NO SFB2323Z) FROM THE RIGHT LANE CUT INTO MY LANE, AS THE RESULT, MY VEH RIGHT HAND SIDE HIT ONTO THE VEH B LEFT SIDE MIRROR. AFTER THE INCIDENT, THRU OUR COMMUNICATION ON WHATAPPS (PLEASE REFER TO ATTACHMENT), DRIVER OF VEH B TOLD ME DON'T HAVE TO FILE ANY ACCIDENT REPORT ON THIS MATTERS BUT ON THE JANUARY 2019, I WAS SURPRISE RECEIVED AN INSURANCE LETTER FROM MY INSURANCE COMPANY REQUEST TO FILE AN ACCIDENT REPORT.

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SFB2323Z
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)

## 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:

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

A= YM 8101A  
B= SFB 2323Z.

PIG twds Jurong at the Slip Rd Exit to  
Jln Anak Bukit


### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to statement

### DECLARATION

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

  
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.:

Form 104 (Rev. 10/2017) (English) - 02

2



Hi Mr Pang, I've access my car at Mercedes center and this is the invoice, I know it's not totally your fault and we don't wish to claim either party insurance. So wondering u ok to share half of the repairing fee and we just close this case. If not we have to go through insurance and need to take



close this case. If not we have to go through insurance and need to take quite a while for the claim

12:00

Hi Mr Pang, ok we not go to claim u and the insurance as we just found out that we still have credits with Mercedes. My aunt say forget it and hope u can be more careful next time with the blind spot

12:22

We will drop this case, so u don't have to report also to speed up our process

12:22

Hi Mr Chua  
Thanks for your advise. So sorry for e incident.

12:39

No problem :) 12:43



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



WT : FE84HE A 10141  
EN WT : 2440  
R CAP : 6700 KG  
: 1 DRIVER 2 OTHER  
: (F) 700K 16 12 PK  
(R) 700K 16 12 PK