

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	10/12/2018 13:02
Date Of Accident	27/11/2018 09:50
Exact Location Of Accident	KIM SENG ROAD TRAFFIC LIGHT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP3513R
Insured/Policyholder	
Name Of Registered Owner	KENETTE LENON
NRIC No	G5328961X
Email Address	LENONKENTTE@YAHOO.COM
Mobile Phone No	(LOCAL) +65-98365814
Alternative Phone No	OFFICE-92342351

Vehicle Particulars

Manufacturer	KIA
Model	FORTE K3-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
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 HIRE

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	B 29100055
Cover Note Number	

Driver

Name of Driver	KENETTE LENON
NRIC No	G5328961X
Date Of Birth	26/04/1990
Occupation	INDOOR
Date Of Driving Pass	26/06/2014
Driving Experience	4 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98365814
Fax Number	
Contact Number	OFFICE-92342351
Email Address	LENONKENTTE@YAHOO.COM

Address	21 FEE=RNVALE CLOSE #08-02
Postcode	797460
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	COLLISION - HEAD TO REAR
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	
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.	YES
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : UNKNOW 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

Refer to accident report .

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	SDR388P
Vehicle Make/Model/Colour	PORSCHE SILVER
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LEE KIM SHIN
NRIC/Passport Number	
Contact Number	96300023
Address	ONE MARINA BLVD #28-00
Postcode	018989
Insurance Company Name	
Nature Of Damage	FRONT
No. Of Passenger (Including Driver)	2

Passenger 1

NAME: :

GENDER: :

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(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.



07/12/18

Witnessed by Reporting Centre
Personnel

Hand-drawn map on graph paper showing a road layout. At the top, "HAYSTACK RD" is written. Below it, a vertical line has an arrow pointing down, with a small house icon and the letter "A" in a box. To the left of this line are the labels "SLP351R" and "SDR38P". To the right of the vertical line, the text "CIM SENG RD" is written vertically. Further right, there are three arrows pointing right, separated by vertical lines.

Describe Circumstances of the Accident

(SLP3473)
 On the 27th Nov. 2018 @ 0948 hrs, I was at Kimbley Rd traffic light turning left onto Havelock Road. When the traffic light turned green, my car & other cars in front of me were cautiously & slowly turning left due to pedestrians crossing. Suddenly, I was hit from the rear ~~in~~ by motor car SDR388P. No serious injuries from both parties. He provided his contact details & mentioned to call him for any damage rectification.

Declaration

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

Witnessed by Reporting Centre Personnel