

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	08/01/2019 15:17
Date Of Accident	07/01/2019 17:40
Exact Location Of Accident	AYER RAJAH EXPRESSWAY TOWARDS CITY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKU6930K
Insured/Policyholder	
Name Of Registered Owner	JENNY ONG
NRIC No	S1776441A
Email Address	YIRU_J73@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-93864551
Alternative Phone No	OFFICE-96327564

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 CVT (A)
Exact Purpose for which vehicle was being used at time of accident	TRAVELLING TO HOME
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 CAR

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	A80459942QMX

Driver

Name of Driver	SILVIA CHOO CHIA HUI
NRIC No	S9407577G
Date Of Birth	07/03/1994
Occupation	INDOOR
Date Of Driving Pass	01/08/2013
Driving Experience	5 YEARS AND 5 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96327564
Fax Number	
Contact Number	
EEmail Address	PRISTINESONATA@HOTMAIL.COM

Address	28 ALEXANDRA VIEW #07-06 ALEX RESIDENCES
Postcode	158744
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	CHAIN COLLISION
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	4
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

ON 07/01/2019 @ 1741HRS, I WAS DRIVING MY CAR SKU6930K ON THE 1ST LANE ALONG AYE TOWARDS CITY. AS I WAS 300M APPROACHING BUONA VISTA EXIT, A CAR SGS147C IN FRONT OF ME SLOWED DOWN AND STOP. I WAS TRAVEL IN SAFE DISTANCE AND I MANAGE TO STOP ON TIME. SUDDENLY, I FELT AN IMPACT AND LOUD BANG SOUND FROM REAR OF MY CAR AND RESULTED MY CAR DASHED AND COLLIDED TO A CAR IN FRONT OF MY CAR (SGS147C). I PULLED UP AND ALIGHTED TO CHECK ON MY CAR CONDITION AND I FOUND A CAR SGY4293E (TOYOTA MARK-X/WHITE) HAD COLLIDED TO REAR OF MY CAR. AFTER THE INCIDENT, WE HAD EXCHANGE PARTICULARS FOR CLAIM PURPOSE. I NOTICED MY CAR HAD MAJOR DAMAGE AT REAR PORTION AND SOME DAMAGES IN FRONT OF MY CAR.

Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGY4293E
Vehicle Make/Model/Colour	TOYOTA/MARK-X/WHITE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	JUN WEI
NRIC/Passport Number	S9546235I
Contact Number	97808567
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver) 2

Passenger 1
NAME: :
GENDER: :

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SGS147C
Vehicle Make/Model/Colour CHEVROLET/OPTRA/WHITE
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver AIDIL
NRIC/Passport Number S9136579J
Contact Number 96460780
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SLK7290H
Vehicle Make/Model/Colour TOYOTA/PRIUS/SILVER
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver CHEW AIK SENG
NRIC/Passport Number S1547209Z
Contact Number 96878189
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: 8/1/19 12.52pm

Driver's Signature

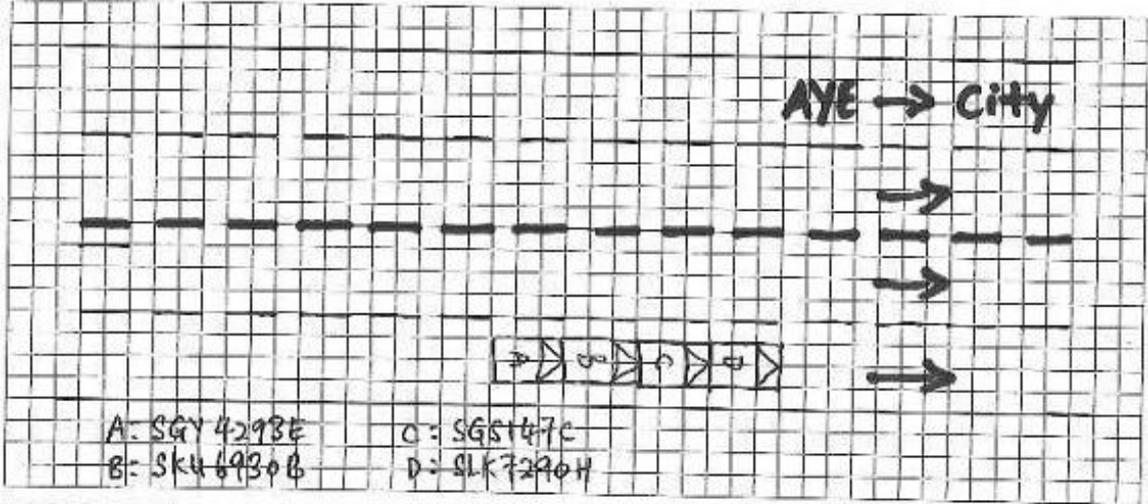
(If driver is not the policyholder)
Date & Time: 8/1/19 12.52pm

Reporting Centre Personnel's Signature

Name: KOH ENG AMIN
NRIC/PIN No.: G7558211R

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Large empty lined area for describing the circumstances of the accident.

DECLARATION

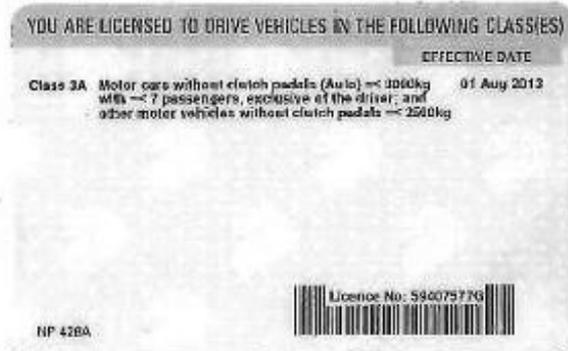
I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time: 8/1/19 12:52 pm

Driver's Signature
(If driver is not the policyholder)
Date & Time: 08/01/19 12:52 pm

Reporting Centre Personnel's Signature
Name: KOH ENG AUN
NRIC/IN No.: G755821K

Driving License



Identification Card

D.

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9407577G



Name
SILVIA CHOO CHIA HUI

朱佳慧

Race
CHINESE

Date of Birth Sex
07-03-1994 F

Country of birth
SINGAPORE

S9407577G

963 27564

pristinesonata@hotmail.com

447748



NRIC No. S9407577G



Date of issue
20-10-2009

2B ALEXANDRA VIEW #07-06
SINGAPORE 158744

NRIC No: S9407577G Date: 01/01/2018

Driving License

REPUBLIC OF SINGAPORE DRIVING LICENCE

Vehicle Number: S 1776441A

JENNY ONG

Birth Date: 03 Jul 1966

Issue Date: 24 Aug 2018

0028331876



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	EFFECTIVE DATE
Class 3 - Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg	17 Oct 1966

NP 428A

Licence No: S1776441A



Identification Card



93864551.

Yiru_j73@hotmail.com



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

