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 witholding 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	22/01/2019 12:16
Date Of Accident	21/01/2019 18:00
Exact Location Of Accident	JUNCTION OF DEFU AVENUE 1 AND TAMPINES ROAD
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBA3729H
Insured/Policyholder	
Name Of Registered Owner	UNIVERSAL MOTORS PTE LTD
Co Reg No	19900243E
Email Address	DAVID@UMPL.COM.SG
Mobile Phone No	(LOCAL) +65-93746351
Alternative Phone No	OFFICE-62782029
Vehicle Particulars	
Manufacturer	TOYOTA
Model	DYNA
Exact Purpose for which vehicle was being used at time of accident	ON THE WAY BACK TO OFFICE
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	8VCT1800200
Cover Note Number	
Driver	
Name of Driver	LIM HAN LONG
Passport No/FIN	G7698361K
Date Of Birth	28/03/1986
Occupation	INDOOR
Date Of Driving Pass	25/03/2010
Driving Experience	8 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93746351
Fax Number	
Contact Number	OFFICE-62782029
EMail Address	DAVID@UMPL.COM.SG

Address	BLK 1006 BUKIT MERAH LANE 2 #01-04
Postcode	159762
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	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)	2
Passenger 1	NAME: : CHAN KEE WAI 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

PLEASE REFER TO SKETCH PLAN

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	XE3139D
Vehicle Make/Model/Colour	ISUZU
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	CHONG SIN SIONG
NRIC/Passport Number	S1682170E
Contact Number	96155910
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

SKETCH PLAN

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7. By the lodgment 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.
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.

UNIVERSAL MOTORS PTE LTD

Policyholder's Signature
Date & Time:

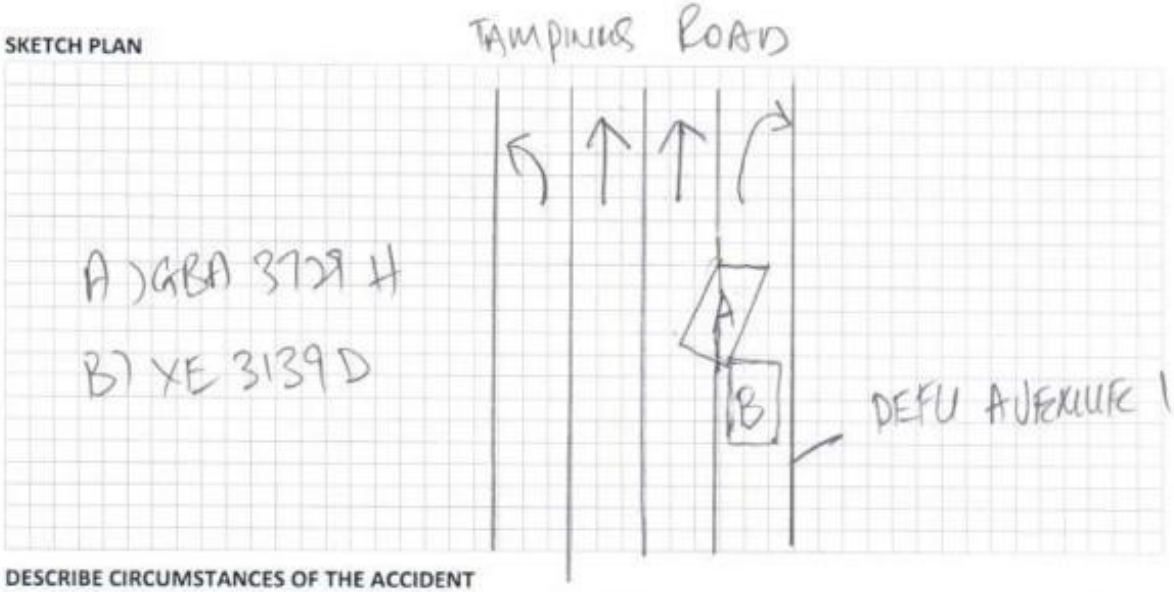
Driver's Signature
(If driver is not the policyholder)
Date & Time:

22/01/2019

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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 21/01/2019 I WAS AT DEFU AVENUE 1 & WANTED TO TURN RIGHT BECOUSE OF HEAVY TRAFFIC SO I SLOW MOVE MY LORRY TO THE RIGHT & SIGNAL WAS ON WHEN I SAW A GAP WHICH I AM ABLE TO MOVE IN. I WAS ALMOST IN THE RIGHT TURN LANE A LORRY XE 3139D HORN BUT DID NOT BRAKE HIS LORRY BUMPER STUCK ON MY LORRY GBA 3729H & THE BUMPER COME OUT & MY LORRY SLIGHT DAMAGE. WE SWP & EXCHANGE PARTICULARS THAT ALL.

DECLARATION

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

Policyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
Date & Time:	(If driver is not the policyholder)	Name:
	Date & Time: 22-01-19	NRIC/FIN No.:

22/01/2019

ACCIDENT SCENE

23/01/2019

ACCIDENT SCENE

22/4/2019

ACCIDENT SCENE

22/01/2019

ACCIDENT SCENE

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ACCIDENT SCENE

22/01/2019

ID

WORK PERMIT

Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer
UNIVERSAL MOTORS PTE LTD

Sector: SERVICE

Name
LIM HAN LONG

Occupation
MOTOR VEHICLE MECHANIC

Work Permit No.
4 01898853

Date of Application
27-04-2015

Date of Issue
20-03-2017

Date of Expiry
03-05-2019

L7740869

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence No./Class G7698361K

Name
LIM HAN LONG

Birth Date 28 Mar 1986

Issue Date 17 Dec 2016

Valid Till 16/12/2021

0002639400G

VISIT PASS

Immigration Regulations

Name
LIM HAN LONG

Date of Birth 28-03-1986

Sex M

Nationality MALAYSIAN

FIN G7698361K

Date of Issue 20-03-2017

Date of Expiry 03-05-2019

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.

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

		EFFECTIVE DATE
Class 2B	Motorcycles =< 200 cc	25 Mar 2010
Class 3 31/05/17	Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg	25 Mar 2010
Class 3C	Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver	17 Dec 2016

Licence No:G7698361K

NP 42SA

Accident Photo

Accident Photo

Accident Photo

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