

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	28/01/2019 15:25
Date Of Accident	27/01/2019 00:10
Exact Location Of Accident	NEO TIEW RD HEADING NORTH/AFTER NEO TIEW LANE 1
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLJ2808D
Insured/Policyholder	
Name Of Registered Owner	SNG CHEN YANG PATRICK (SUN ZHENGYANG PATRICK)
NRIC No	S7314136B
Email Address	RICHARDHARJANTO@EUROSPORTSAUTO.COM.SG
Mobile Phone No	(LOCAL) +65-91013030
Alternative Phone No	OTHERS-91013030

Vehicle Particulars

Manufacturer	LOTUS
Model	ELISE 1.8 (134HP)
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN1901751900
Cover Note Number	

Driver

Name of Driver	SNG CHEN YANG PATRICK (SUN ZHENGYANG PATRICK)
NRIC No	S7314136B
Date Of Birth	28/04/1973
Occupation	INDOOR
Date Of Driving Pass	02/07/2003
Driving Experience	15 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91013030
Fax Number	
Contact Number	OTHERS-91013030
Email Address	RICHARDHARJANTO@EUROSPORTSAUTO.COM.SG

Address	1A PARRY AVENUE
Postcode	547217
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	NO 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	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)	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

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

Accident Sketch Plan

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.

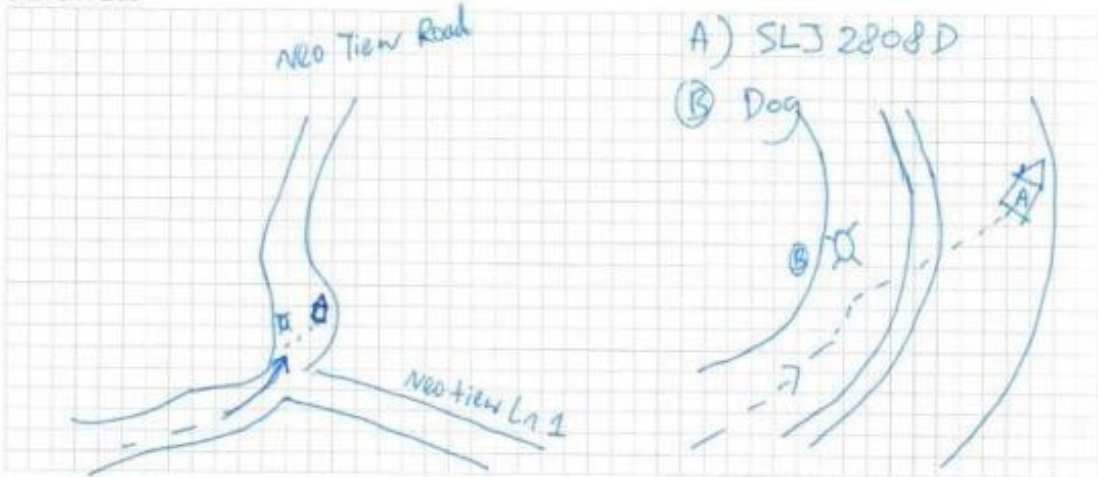

Policyholder's Signature
Date & Time:


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



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


On Sunday 27/01/19 at 12:10 AM. I was travelling along Neo Tiew Rd near Neo Tiew Lane 1, when a black stray dog suddenly appeared out of nowhere from a round the bend on my left and ran onto my lane.

It caught me by surprise, and forced me instinctively to swerve hard right to avoid hitting the dog, and my car veered off the road to the right side, sustaining damage to my car.

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: Rosa
NRIC/FIN No.:

ID



ID



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Addendum Sheet

GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

IMPORTANT NOTE : Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

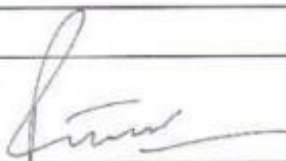
(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: MNA 419013169 Vehicle Registration No: SLJ 2808D
Name(as shown in NRIC): SNG CHEN YANG
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
NRIC/Passport No: S7314136B
Address: 1A PARRY AVENUE S (1951)
Contact (Tel): 91013030 (H/P): _____
(Email): RICHARDHARGANTO@EXPRESSPORTS.COM.SG
Date of Accident: 27/01/19 Time of Accident: 00:10
Place of Accident: NEOTIEW Rd. (after NEOTIEW Ln 1)
Insurance Company: CHINA TAIPING

(B) ADDITIONAL INFORMATION / AMENDMENTS:

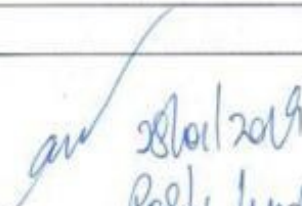
I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

PLEASE AMEND THE
CAR MODEL TO LOTUS ELISE 1.8 (134HP.)
Postal Code TO S(547217)



Signature of Vehicle Owner / Driver

Date: 28/1/19


28/01/2019
Rosli Wapah

10 Anson Road #06-16 International Plaza Singapore 079903 Phone : + 65 6224 0010 Fax : +65 6224 0030
Operating Hours : Monday to Friday 9am to 5pm

Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 - 17:00
UEN: S665500200 / GST Reg. No: M400017733

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MMA419013169-01 Vehicle Registration No: SGJ 2808D
Name (as shown in NRIC) : See Ahn Yong Patrick NRIC/FIN/Passport No : S7314136B
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore ()
Contact (Tel) : _____ Mobile No. : 91013030
Email Address : _____
Date of Accident : 27/01/2019 Time of Accident : 00:10
Place of Accident : MAO TAN RD HENDONG NORTH / AFTER LKCO TAN LONK /
Insurance Company : CELESTIA TROPICAL

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

To upload picture with number plate & chassis number

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name: Poh H. Worfors
NRIC/FIN No.: 14/02/2019
Date: