

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	07/02/2019 16:14
Date Of Accident	04/02/2019 12:45
Exact Location Of Accident	DUNEARN RD B/F BUS STOP (OPP NEXUS) SERVICE RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDQ200C
Insured/Policyholder	
Name Of Registered Owner	LOO LIP PING
NRIC No	S1669245Z
Email Address	LOO.MAYLIN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92727788
Alternative Phone No	OTHERS-96700788

Vehicle Particulars

Manufacturer	BMW
Model	520I AT
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5081393530
Cover Note Number	

Driver

Name of Driver	LOO QI XUAN, RYAN ELYAS
NRIC No	S9212694C
Date Of Birth	27/03/1992
Occupation	INDOOR
Date Of Driving Pass	09/05/2013
Driving Experience	5 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96700788
Fax Number	
Contact Number	OTHERS-92727788
Email Address	LOO.MAYLIN@GMAIL.COM

Address	235 JALAN KAMPONG CHANTEK
Postcode	587925
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	COLLISION - OPENING DOOR OF VEHICLE
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: : FRIEND GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	RIVER VALLEY NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 4 DELTA AVENUE , POSTCODE: 161004 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2789999 - FAX NO: 62786427
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	SHC2169Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	ONG LIAU LYE
NRIC/Passport Number	S1121069D
Contact Number	91141099
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 1

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: 07/10/2019
11.10 am.



Driver's Signature

(If driver is not the policyholder)
Date & Time:



01/10/2019

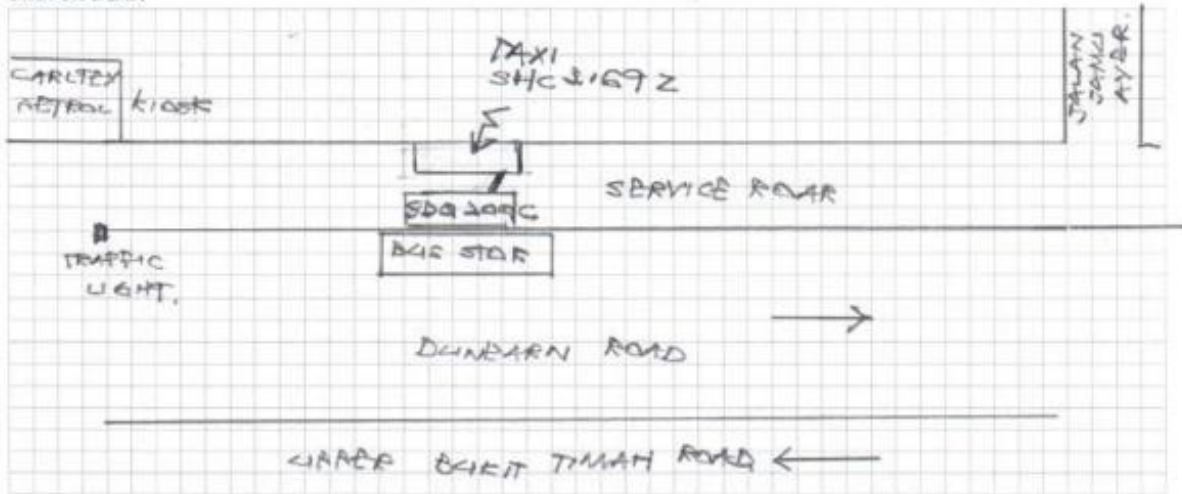
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

We were driving slowly along the service road next to Dunbar Road. As it is a narrow road, we approach the bus stop slowly, trying to alight my friend. I noticed a taxi parked at the left side of the road, but sticking out more than usual, closer to the centre of the road. The taxi driver was standing at the driver door, leaving less space to pass than usual. This was worrying, so we reduced speed further and went all the way to the right to avoid colliding.

The taxi driver saw us and went close to the taxi to avoid being hit. We approached slowly and it was clear that we weren't going to hit him. While I was passing him, he opened the driver door at the same moment and the door hit the side of my car, leaving marks at the side bumper & fender near the front wheel.

DECLARATION

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

[Signature]

Policyholder's Signature
Date & Time:

Ryan Loo

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

[Signature] 07/02/2019
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

POLICE STATEMENT

CONFIDENTIAL

Annex E

NOTICE OF COMPLIANCE

This is to confirm that LOO QI XUAN, RYAN ELYAS, NRIC/FIN S9212694C has reported to the Police a non-injury traffic accident which occurred at Dunearn Road before Bus Stop (Opp Nexus) on 04.02.2019 at about 1245hrs involving the following vehicle:

- 1) SDQ200C (WHITE BMW)
- 2) SHC2169Z (BLUE COMFORT TAXI)

- 2 If this accident was reported to the Police within 24 hours of its occurrence,
Then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: Sgt Jordon Ng Beng Siong

Date: 04.02.2019

Time: 1650hrs

S/D Ref: eSD 29

Police Post/Unit: River Valley NPP

Original - to be issued to informant
Duplicate - to be submitted to Traffic Police

RIVER VALLEY NEIGHBOURHOOD POLICE POST
BLK 4 DELTA AVENUE #01-02
SINGAPORE 161004

CONFIDENTIAL

Version as of 15 Jan 2002

Loo Qi Xuan Ryan Elyas

S9212694C

JP

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

