

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	08/02/2019 18:32
Date Of Accident	02/02/2019 15:00
Exact Location Of Accident	ANG MO KIO CARPARK (AMA61) LOT128
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKM8030L
Insured/Policyholder	
Name Of Registered Owner	SIME DARBY SERVICES PTE LTD
Co Reg No	197501065W
Email Address	JAMESLIMHM@GMAIL.COM
Mobile Phone No	(LOCAL) +65-94907965
Alternative Phone No	OFFICE-94907965

Vehicle Particulars

Manufacturer	BMW
Model	316I
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	COMMERCIAL VEHICLE

Insurance Company

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

Driver

Name of Driver	LIM HONG MONG
NRIC No	S0014136D
Date Of Birth	21/08/1954
Occupation	INDOOR
Date Of Driving Pass	17/03/1972
Driving Experience	46 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94907965
Fax Number	
Contact Number	OTHERS-94907965
Email Address	JAMESLIMHM@GMAIL.COM

Address	67 JALAN TAMBUR
Postcode	576826
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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)	0

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	GZ7072B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	MR. WONG
NRIC/Passport Number	
Contact Number	98381593
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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.



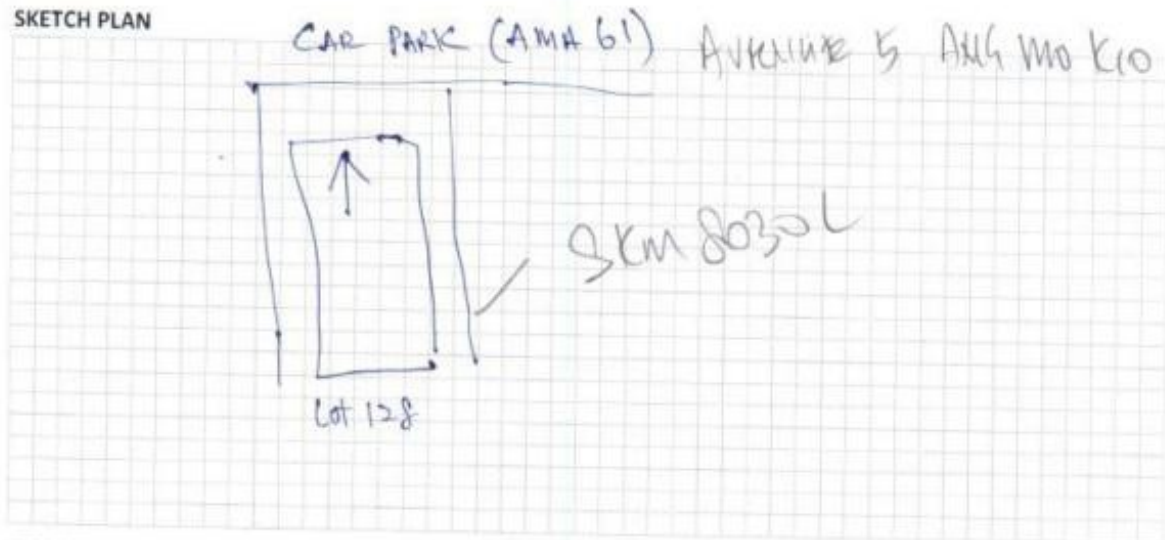
Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 3-2-2019
11:00 am.

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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Car was parked and locked between 1:49 PM and 3:03 pm at Lot 128 in Ang Mo Kio HK 520/534/529 Avenue 5/10 (AMA 61) on 2-2-2019. When I returned at 3pm to collect car, ~~some~~ one bystander came and told me that my car was hit by a goods vehicle. I came out of the car to inspect the damage, one Mr. Wong approached me and told me that it was him who backed his commercial vehicle into the front right side (near the bumper) of my car and gave me his phone number (9838 1593) and car number plate (GZ 7072B). The said vehicle was not seen by me. He did not give me his NRIC ~~and~~ number and offered to repair the car for me.

DECLARATION

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

Policyholder's Signature
Date & Time:

STAMP: SINGAPORE POLICE

Driver's Signature
(If driver is not the policyholder)
Date & Time: 3-2-2019
11:00 a.m.

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

ID

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0014136D



NAME
LIM HONG MONG

林 丰 茂

RACE
CHINESE

DATE OF BIRTH
21-08-1954

SEX
M

COUNTRY OF BIRTH
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S0014136D

Name

LIM HONG MONG

Birth Date 21 Aug 1954

Issue Date 22 Mar 2004



2870019

NPIC No. S0014136D



Valid Until
12-08-1996

Address
67 JALAN TAMBUR
SINGAPORE 376826

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

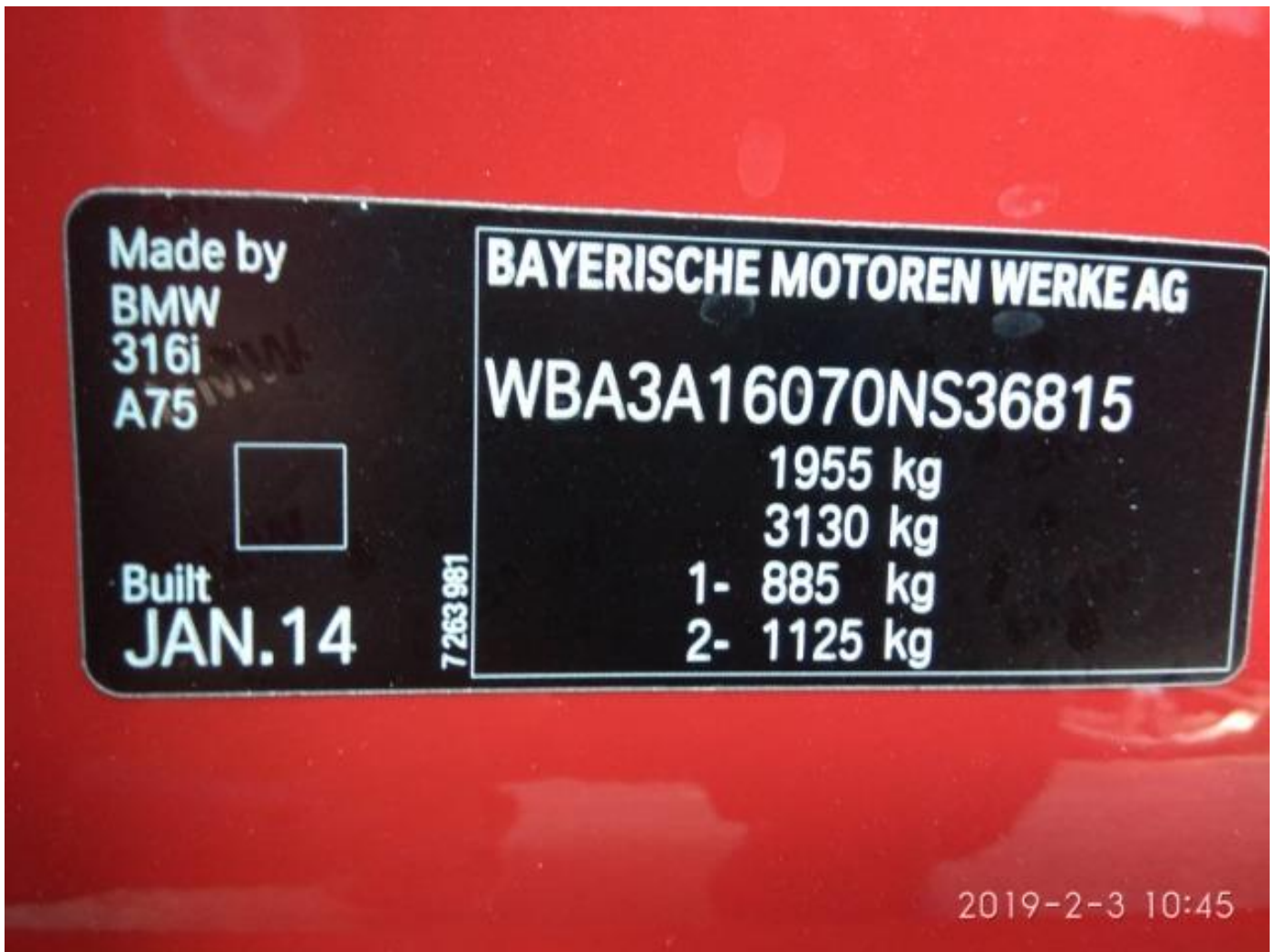
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE
17 Mar 1972



Licence No. S0014136D

NP 425A



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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: S66530200 / GST Reg. No.: M400017735

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 : MMA469017842 Vehicle Registration No: SKM 8030 L
Name (as shown in NRIC) : SIME DARBY SERVICES NRIC/FIN/Passport No : 197501065W
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : 305 ALEXANDRA ROAD #03-01 Singapore (159942)
Contact (Tel) : 64473388 Mobile No. : 85337214
Email Address : operations@hertz-simedarby.com.sg
Date of Accident : 02/02/2019 Time of Accident : 1500 HRS
Place of Accident : ANG MO KIO CP (AMAGI) LOT 128
Insurance Company: MSIG

(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 change from reporting only to claim 3rd
party.



Policyholder / Driver's Signature
Date:


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