

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 17:13
Date Of Accident	05/02/2019 11:40
Exact Location Of Accident	NEW UPPER CHANGI ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKE305P
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Insured/Policyholder

Name Of Registered Owner	ICON ENGINEERING SERVICES PTE LTD
Co Reg No	200719155C
Email Address	ICONCEH@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-96589785
Alternative Phone No	OFFICE-63698468

Vehicle Particulars

Manufacturer	HONDA
Model	JAZZ
Exact Purpose for which vehicle was being used at time of accident	
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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT109794
Cover Note Number	

Driver

Name of Driver	CHUA KHENG TONG WINSON
NRIC No	S7112269G
Date Of Birth	07/04/1971
Occupation	INDOOR
Date Of Driving Pass	15/08/2011
Driving Experience	7 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96589785
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address

APT BLK 681 HOUGANG AVENUE 8 #03-811 S530681

Postcode

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 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 3

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) 3

Passenger 1 NAME: YONG SIEW GUIK

GENDER: FEMALE

Passenger 2 NAME: CHUA SENG LONG

GENDER: MALE

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name BEDOK NORTH NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 30 BEDOK NORTH ROAD, POSTCODE: 469676, COUNTRY: SINGAPORE

Police Station Contact TEL NO: 1800-2449999 - FAX NO: 62447258

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO THE ATTACHED.

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 SHC8140K

Vehicle Make/Model/Colour NIL

Details Of Properties NIL

Vehicle Category TAXI

Name of Driver NIL

NRIC/Passport Number	
Contact Number	NIL
Address	NIL
	NIL
Postcode	NIL
Insurance Company Name	
Nature Of Damage	NIL
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SGR5539C
Vehicle Make/Model/Colour	NIL
Details Of Properties	NIL
Vehicle Category	PRIVATE CAR
Name of Driver	NIL
NRIC/Passport Number	
Contact Number	NIL
Address	NIL
	NIL
Postcode	NIL
Insurance Company Name	
Nature Of Damage	NIL
No. Of Passenger (Including Driver)	

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:

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

Accident Sketch Plan Pg. 1

SKETCH PLAN

SGR 5539C → SHC 8140R → SKG 305P

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Vehicle in front brake. I also followed to brake. Suddenly I felt a great impact from the rear and realised that I was hit at the rear. I got down and realised that I was involved in a 3 or chain collision

TOKIO Marine
 GKE 305P 5.2.2019
☐ Reporting Only
☐ Non Damage Claim
☒ Third Party Claim
☒ Other Workshop
 Tech Group Automotive
 P/L

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:
 NRIC/FIN No.:

ANNEX E

NOTICE OF REPORTING

This is to confirm that Chua Kheng Tong Winson (Cai Qingzhong Winson), NRIC: S7112269G of Blk 681 Hougang Avenue 8 #03-811, Tel:96589785, has reported to the Police a non-injury traffic accident which occurred at New Upper Changi Road towards Bedok, near to bus stop No: 96019 on 05/02/2019 @ 11.40am involving the following vehicles:

- a) SKE 305P (Honda Jazz)
- b) SHC8140K (Hyundai Blue, NTUC Comfort Taxi)

2. If accident was reported to the Police within 24 hrs of its occurrence, then he have complied with Sec 84(2) of the Road Traffic Act, Cap 276.

M.N/

Rank / Name of Issuing officer: SSSgt Muhd Nasser

Date: 05/02/2019

Time: 12.18pm

S/D Ref: 14

Bedok North NPC
No. 30 Bedok North Road
Singapore 469676
Tel: 1800-2449990

Police Post/ Unit: Bedok Police Division/ Bedok North NPC

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