



## 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	14/02/2019 13:26
Date Of Accident	13/02/2019 19:50
Exact Location Of Accident	BUKIT BATOK AVE 6
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJR4216E
Insured/Policyholder	
Name Of Registered Owner	VASRO RENTALS
Co Reg No	53367446L
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-88008855
Vehicle Particulars	
Manufacturer	TOYOTA
Model	COROLLA ALTIS
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5093371571-01
Cover Note Number	-
Driver	
Name of Driver	TAN CHOON BENG
NRIC No	S7379120J
Date Of Birth	16/12/1973
Occupation	OUTDOOR
Date Of Driving Pass	30/04/2005
Driving Experience	13 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97292050
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 77 LOR LIMAU #15-49
Postcode	320077
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	COLLISION - HEAD TO REAR
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?	
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: ; UNKNOWN
	GENDER: ; FEMALE

#### 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 ATTACHED STATEMENT.

#### 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	SLA6746U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN SEAH LONG
NRIC/Passport Number	S1029638B
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

**SKETCH PLAN**

**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. The 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 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.

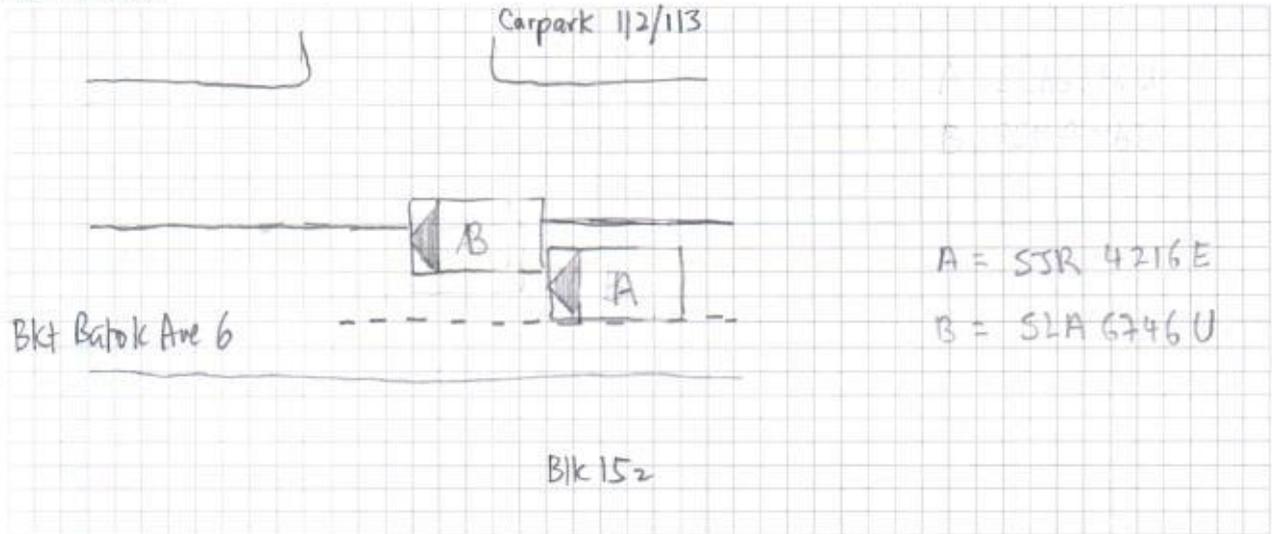


\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

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

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

**SKETCH PLAN**



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

SJR4216E just moved from traffic light along Bkt Batok Ave 6 & Bkt Batok Ave 8  
 A stationary car SLA6746U was turning right without signalling. Trying to stop,  
 the car SJR4216E unable to stop on time, hit the stationary car SLA6746U.  
 Vehicle SJR4216E was driven by TAN CHON BENG S1179120J while SLA6746U  
 was driven by Tan SEAH LONG S1029638B. Incident occurred around 7:50pm.

**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.:

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7379120J



Name  
**TAN CHOON BENG**



Race  
**CHINESE**

Date of Birth **16-12-1973** Sex **M**

Country of Birth  
**MALAYSIA**

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: **S7379120J**  
Name  
**TAN CHOON BENG**



Birth Date **16 Dec 1973**  
Issue Date **30 Apr 2005**

001338988G



8357456



NRIC No. **S7379120J**



Nationality  
**MALAYSIAN**

Blood Group **O+** Date of Issue **13-05-2000**

APT BLK 77 LORONG LIMAU #15-49  
SINGAPORE 320077

NRIC No: **S7379120J** Date: **19/09/2008** No: **6087632**

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

Class	Description	PASS DATE
Class 2B	Motorcycles =< 200 cc	30 Apr 2005
Class 3	Motor cars =< 3000 kg with =< 7 passengers, exclusive of the driver; and motor tractors /vehicles =< 2500 kg	30 Apr 2005

NP 428A

License No: S7379120J



Hello, NAC\_PAYA\_UBI\_800601

Change Language Change Password Log Out

My Desktop

Notice of Loss

Policy Query

Policy No.  Date of Accident

Vehicle No.(For Motor)  Certificate Number

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="checkbox"/>	5093371571-01		VASRO RENTALS	53367446L	GFT	drive CLASSIC	SJR4216E	SJR4216E	07/08/2018	

Continue

▼ **Policy Information**

Policy No.	5093371571-01	Policyholder Name	VASRO RENTALS	Policyholder NRIC	53367446L
Certificate No.					
Address	BLK 272 #03-22 TAMPINES STREET 22 SINGAPORE 520272				
Product Name	FLEET INSURANCE	Plan			
Group Policy Flag			N		
Policy Issue Date	02/08/2018	Effective Date	07/08/2018 00:00	Expiry Date	06/08/2019 23:59
Third Party Excess	1500.00	Own damage Excess	2000.00	Windscreen Excess	100.00
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	2000.00	Outside Singapore TP Excess	1500.00		
Agent	IVAN INSURANCE AGENCY PTE.	Agent Tel.	64400220	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ **Policyholder Mailing Address**

Address 1	BLK 272 #03-22	Address 2	TAMPINES STREET 22	Address 3	SINGAPORE 520272
Address 4		Address Type	Singapore address	Post Code	520272
Unit No.	03-22	Related Policy Number	5093371571-01		

▶ **Insured Object: SJR4216E**

▼ **Endorsements**

Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
1	16/08/2018 00:00	Basic Information Endorsement	000001286883419	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that from 16 Aug 2018, the Hire Purchase Company is amended as follows for vehicle no SLQ5737T & SJX3638X: HIRE PURCHASE COMPANY: TAI THONG LEE TRADING PTE LTD
2	30/08/2018 00:00	Basic Information Endorsement	000001286892444	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that the following vehicle(s) has/have been deleted from this policy: VEHICLE NUMBER CANCELLATION DATE REFUND PREMIUM (INCL GST) 1. SJJ7335S 24-08-2018 \$1,430.78 2. SJJ8772G 24-08-2018 \$1,196.65 3. SJH8158R 25-08-2018 \$1,193.21 4. SJJ334R 25-08-2018 \$1,305.61 In view of this amendment, a refund of \$5,126.25 (inclusive of GST) will be adjusted against the outstanding premium.
3	05/09/2018 00:00	Basic Information Endorsement	000001286895928	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that the following vehicle(s) has/have been deleted from this policy: VEHICLE NUMBER CANCELLATION DATE REFUND PREMIUM (INCL GST) 1. SJJ1448P 31-08-2018 \$1,172.58 In view of this amendment, a refund of \$1,172.58 (inclusive of GST) will be adjusted against the outstanding premium.

**Claim Handling**

Accident MT/1032062

Policy No.	5093371571-01	Vehicle No.	SJR4216E	GST Registration No.	
Certificate No.					
Policyholder Name	VASRO RENTALS			Policyholder NRIC	53367
Product Code	FLEET INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	88008855	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	<input type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	Yes

▼ **Accident Details**

Report Date	14/02/2019 16:18	Accident Report Within 24 hrs	Yes	Accident Type	Collision
Date of Accident	13/02/2019	Time of Accident hh:mm	19:50	Country of Accident	Singap
Reporting Centre		Orange Force		ICM No.	
Accident Location	BUKIT BATAK AVE 6				

▼ <b>Excess</b>					
Own damage Excess	2,000.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess	2,000.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		

▼ **Benefits**

▼ **GST Registered Information**

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

▼ **Policyholder Mailing Address**

Address 1	BLK 272 #03-22	Address 2	TAMPINES STREET 22	Address 3	SINGAI
Address 4		Address Type	Singapore address	Post Code	52027
Unit No.	03-22	Related Policy Number	5093371571-01		

▼ **OI Driver Info**

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	TAN CHOON BENG	Driver NRIC	S7379120J	Driver DOB	16/12/
Register Date of Driver License	30/04/2005	Driver Age	45	Driving Experience	13
Contact No.(Mobile)	97292050	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 77 #15-49	Address 2	LORONG LIMAU	Address 3	WHAMI
Address 4	SINGAPORE 320077	Address Type	Singapore address	Post Code	32007
Unit No.	15-49				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No
-------------------------------------	------	-------------	---------------------------------------------------------------

Modification History

Claim 001 **New**

Claim Type *	OD-MX	Insured Name	VASRO RENTALS
Contact No.(Mobile)	90187349	Contact No.(Home)	
Email Address		OI Vehicle Number	SJR4216E
Claim Description	SJR4216E / SLA6746U ON 13 Feb 2019		
Preferred Workshop	0	Insured Liability	Partially at Fault
Workshop No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Date Registered	14/02/2019 16:22	GIA report	Received
Report Taken By	LIEW SHAN HUI		
Claim Close Date			

Print AK letter

Save Submit

Attachment

Accident No. MT/1032062 Claim No. 001

Last Doc. Received

Yes  No

Upload Date

14/02/2019 16:23

Path \*

- Choose File No file chosen
- Message Read

Clear	Category *	Confidential	Urgency *
Clear	Please Select ▼	NO ▼	Normal ▼
Clear	Please Select ▼	NO ▼	Normal ▼
Clear	Please Select ▼	NO ▼	Normal ▼
Clear	Please Select ▼	NO ▼	Normal ▼
Clear	Please Select ▼	NO ▼	Normal ▼
Clear	Please Select ▼	NO ▼	Normal ▼
Clear	Please Select ▼	NO ▼	Normal ▼

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
 NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o	14 Feb 2019 16:23	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-2-14
 NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o	14 Feb 2019 16:23	SAS	Normal	SAS 2019-2-14
 NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o	14 Feb 2019 16:23	Photos	Normal	Photos 2019-2-14
 NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o	14 Feb 2019 16:22	Photos	Normal	Photos 2019-2-14
 NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o	14 Feb 2019 16:22	Photos	Normal	Photos 2019-2-14
 NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o	14 Feb 2019 16:22	Photos	Normal	Photos 2019-2-14
 NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o	14 Feb 2019 16:22	Photos	Normal	Photos 2019-2-14
 NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o	14 Feb 2019 16:22	Photos	Normal	Photos 2019-2-14
 NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o	14 Feb 2019 16:22	Photos	Normal	Photos 2019-2-14
 NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o	14 Feb 2019 16:22	Photos	Normal	Photos 2019-2-14
 NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o	14 Feb 2019 16:22	Photos	Normal	Photos 2019-2-14
 NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o	14 Feb 2019 16:22	Photos	Normal	Photos 2019-2-14
 NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o	14 Feb 2019 16:22	Photos	Normal	Photos 2019-2-14
 NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o	14 Feb 2019 16:22	Photos	Normal	Photos 2019-2-14
 NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o	14 Feb 2019 16:22	Photos	Normal	Photos 2019-2-14
 NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o	14 Feb 2019 16:22	Photos	Normal	Photos 2019-2-14
 NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o	14 Feb 2019 16:22	Photos	Normal	Photos 2019-2-14

Video List

Uploaded By/Date	Folder Date	File Name	Source
		<input type="button" value="Display in New Window"/> <input type="button" value="Scan and uploading"/>	