#### SINGAPORE ACCIDENT STATEMENT

## IMPORTANT NOTICE

Mobile Number

Fax Number Contact Number EMail Address

- 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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	26/02/2019 09:50		
Date Of Accident	25/02/2019 18:30		
Exact Location Of Accident	TAMPINES AVE 5 SLIP RD INTO TAMPINES AVE 1		
Country/State of Loss	SINGAPORE		
D	DETAILS OF OWN VEHICLE		
Vehicle Registration Number	GBC9291C		
Insured/Policyholder			
Name Of Registered Owner	MENG TAT HARDWARE COMPANY		
Co Reg No	_		
Email Address	NOEMAIL		
Mobile Phone No			
Alternative Phone No	OFFICE-66356833		
Vehicle Particulars			
Manufacturer	TOYOTA		
Model	HIACE		
Exact Purpose for which vehicle was being used at time of accident	AFTER WORK		
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	COMMERCIAL VEHICLE		
Insurance Company			
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.		
Type Of Coverage	COMPREHENSIVE		
Fleet Policy	NO		
Policy Number	2100365626-04		
Cover Note Number	-		
Driver			
Name of Driver	NG THOR CHING (HUANG TUQIN)		
NRIC No	S7105556F		
Date Of Birth	08/02/1971		
Occupation	OUTDOOR		
Date Of Driving Pass	22/05/1991		
Driving Experience	27 YEARS AND 9 MONTHS		
Gender	MALE		

(LOCAL) +65-97241333

**NOEMAIL** 

**BLK 44 CHAI CHEE ST #04-120** Address

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 **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?

YES

NO

3

Was any other material or property damaged? I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME: : QUAY SIEW MEI

: FEMALE

GENDER: : FEMALE

Passenger 2

NAME: : NG ZOE EN

#### **Details of Police Action**

Was the accident reported to the police?

NO

GENDER:

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

# **Circumstances of Accident**

I STOP AT THE SLIP RD FROM TAMPINES AVE 5 TOWARDS TAMPINES AVE 1, AFTER THE TRAFFIC WAS CLEAR, I WAS ABOUT TO MOVE, ALL OF A SUDDEN, I FELT AN IMPACT FROM BEHIND. AFTER THE INCIDENT, I ALIGHTED FROM MY VEH AND REALIZED VEH B (BEARING NO SJY5378C) FROM BEHIND COLLIDED ONTO MY VEH REAR PORTION.

## 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 SJY5378C

Vehicle Make/Model/Colour

**Details Of Properties** 

PRIVATE CAR Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

#### **Accident Sketch Plan**

#### SKETCH PLAN

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- 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.
- 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:
  - 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.

6 Ubi Road 1, #01-09
Wintech Centre, Singapore 408726
Tet: 5635 6833 Pax: 6747 7654

Policyholder's Signature
Date & Time:

de

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

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

# **Accident Sketch Plan**

ETCH PLAN			
ompines Ave I			
			A = 680 9291C
	6		8 = 53Y 5378C
	1		
		T	
	N. I.	Tampines Ave	2
SCRIBE CIRCUMSTANCES OF TH	HE ACCIDENT		
Mease R	ifer to	Statement	
		./	
		/	
	,	/	
	/		
ECLARATION  We declare the foregoing particulars	are true in every respect.		1 /
Ne declare the ROBWARE COS	1		
cn Centre, Singapore 408726 5635 6833 Pax: 6747.7954 mangiat 38@yaneo.com.so te & lime	000		dust
menotat 38/0 Vaneo.com.sc	Driver's Signature (If driver is not the policyholder		ng Centre Personnel's Signature

## **DRIVING DOC**





























