**Your NCD will be affected due to late reporting**
**Actual e-Filling Submission Date & Time: 18/02/2019 10:59**

# 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 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 | 16/02/2019 14:23 |
| Date Of Accident | 14/02/2019 19:15 |
| Exact Location Of Accident | HAVELOCK ROAD |
| Country/State of Loss | SINGAPORE |
| **DETAILS OF OWN VEHICLE** | |
| Vehicle Registration Number | SKZ7209C |
| **Insured/Policyholder** | |
| Name Of Registered Owner | LEE TUCK CHEONG |
| NRIC No | S2610342H |
| Email Address | KEVINLYX21@HOTMAIL.COM |
| Mobile Phone No | (LOCAL) +65-94889030 |
| Alternative Phone No | OTHERS-90013273 |
| **Vehicle Particulars** | |
| Manufacturer | MAZDA |
| Model | 6-2.0 4-DOOR SEDAN 2.0L SP.6EAT (A) |
| 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 | GREAT EASTERN GENERAL INSURANCE LIMITED |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | 2019-V8008210-VDP-R002 |
| Cover Note Number | |
| **Driver** | |
| Name of Driver | KEVIN LEE YU XIAN |
| NRIC No | S9306225F |
| Date Of Birth | 21/02/1993 |
| Occupation | INDOOR |
| Date Of Driving Pass | 05/01/2013 |
| Driving Experience | 6 YEARS AND 1 MONTH |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-90013273 |
| Fax Number | |
| Contact Number | |
| EMail Address | KEVINLYX21@HOTMAIL.COM |

| | |
|---|---|
| Address | APT BLK 588B ANG MO KIO STREET 52 #30-217 S562588 |
| Postcode | |
| 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 | -<br>-<br>- |
| Insurance Company of Driver's Own Vehicle | -<br>-<br>- |

**General Information of the Accident**

| | |
|---|---|
| Type Of Accident | COLLISION - CHANGE/CROSS LANE |
| 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) | 1 |

**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**

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 | YN3113T |
| Vehicle Make/Model/Colour | LORRY |
| Details Of Properties | NIL |
| Vehicle Category | COMMERCIAL VEHICLE |
| Name of Driver | RAMAR THANGADARAI |
| NRIC/Passport Number | |
| Contact Number | 90121155 |
| Address | NIL<br>NIL |
| Postcode | NIL |
| Insurance Company Name | |
| Nature Of Damage | NIL |
| No. Of Passenger (Including Driver) | 5 |

| | | |
|---|---|---|
| Passenger 1 | NAME: | : |
| | GENDER: | : |
| Passenger 2 | NAME: | : |
| | GENDER: | : |
| Passenger 3 | NAME: | : |
| | GENDER: | : |
| Passenger 4 | NAME: | : |
| | GENDER: | : |

## SKETCH PLAN

## IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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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:

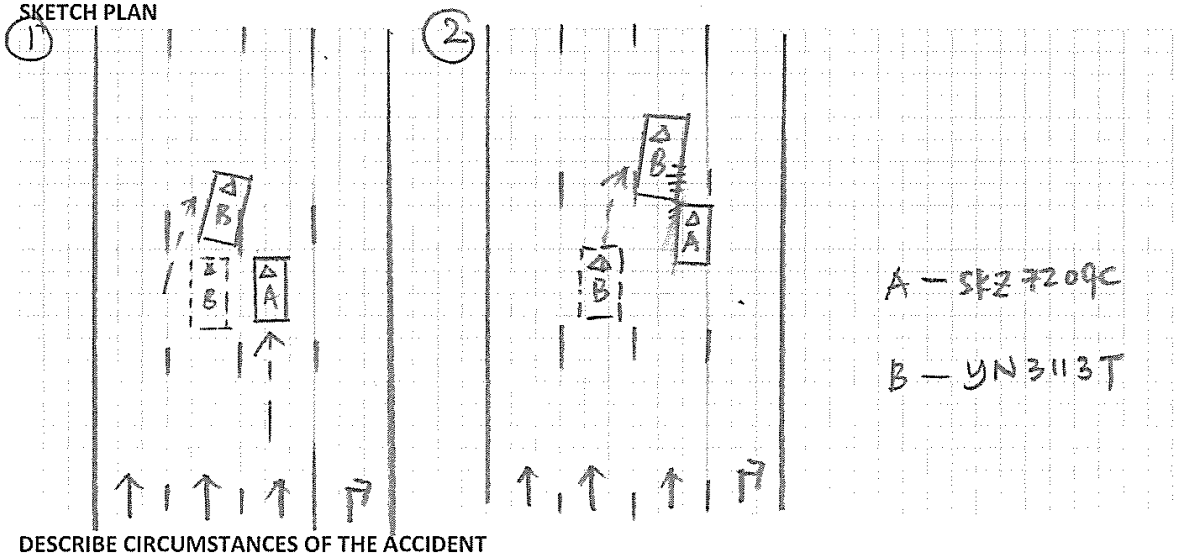
   (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

   (ii) for complying with requirements under any regulations, laws or court orders.

| | | |
|---|---|---|
| Policyholder's Signature<br>Date & Time: | Driver's Signature<br>(If driver is not the policyholder)<br>Date & Time: 16/12/2019 2:36pm | Reporting Centre Personnel's Signature<br>Name:<br>NRIC/FIN No.: |

## Accident Sketch Plan Pg. 1

**SKETCH PLAN**




**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

I was moving straight along Havelock Road and the lorry YN3113T cut in from the left. I tried to swerve slightly to the right side and jammed the brake but failed and ~~the~~ damage was done to the fender and as the lorry moved forward it caused damages to the left headlight as well.

Insurance Co. Great Eastern
Vehicle No. SKZ7209C Date of Accident 14.2.2019
☐ Reporting Only
☐ Own Damage Claim
☑ Third Party Claim
☑ Other Workshop

**DECLARATION**

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

| Policyholder's Signature | Driver's Signature | Reporting Centre Personnel's Signature |
|---|---|---|
| Date & Time: | (If driver is not the policyholder) | Name: |
| | Date & Time: 16/2/2019 2:36pm | NRIC/FIN No.: |

KAN FOOK SENG MOTOR WORKSHOP

**driver's nric Pg. 1**

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S9306225F

Name

KEVIN LEE YU XIAN

李 育 贤

Race

CHINESE

Date of birth

21-02-1993

Sex

M

Country of birth

SINGAPORE

S9306225F

**driver's nric Pg. 1**

**driver's license**

**driver's license**

Service please visit
Street
eat Eastern Centre
6248 2888 Fax: +65 6327 3080

# Renewal Certificate

Great Eastern
A member of the OCBC Group

Name/Address
MR LEE TUCK CHEONG

BLK 588B ANG MO KIO STREET 52
#30-217
SINGAPORE 562588

COPY

Policy No. : 2019-V8008210-VDP-R002
Policy Type : Drive And Save Plus
Policy Period : 29-01-2019 to 28-01-2020
Date of Issue : 09-01-2019 Singapore
Agency No. : Z0000097
Gross Premium : SGD**********1,130.98

IMPORTANT NOTICE

We would remind you that you must disclose to us, fully and faithfully, the facts that you know or ought to know, otherwise, you may not receive any benefits from you policy. Please ensure that this document is prepared correctly. If any error is found, please return it immediately to the Company for correction.

.

In consideration of the Insured having applied and having paid or agreed to pay the stated premium herein the insurance is hereby continued inforce for the period shown herein. This document is to be read in conjunction with the Terms, Conditions, Warranties, Clauses and endorsements in your original policy/certificate (unless subsequently amended).

.

This policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact us or visit the General Insurance Association (GIA) or SDIC web-sites (www.gia.org.sg or www.sdic.org.sg)

Details of Coverage :

Business/Profession: Self-employed
of the Insured

Risk Number : 1 Drive And Save Plus

Hire Purchase : UNITED OVERSEAS BANK LIMITED

Particulars of Motor Car:

Registration Number: SKZ7209C
Make : MAZDA6 4-DOOR SEDAN 2.0L SP.6
Cubic Capacity : 1998.00
Year of Manufacture: 2015
Engine Number : PE20712186
Chassis Number : JM6GJ1072G0224338

Sum Insured : Market Value

Type of Cover : Comprehensive

| Description | Annual Premium | Limit |
|---|---|---|
| Basic Premium | SGD 1,615.69 | |
| Less NCB (30.000%) | SGD 484.71 | |
| Total Due: | SGD 1,130.98 | |

Excess Type : SECTION I

| Driver(s) | Standard Excess |
|---|---|
| LEE TUCK CHEONG | SGD 600.00 |



GST Regn No. M90366503P

Great Eastern General Insurance Limited (Reg. No. 1920 00003W)
(A wholly-owned subsidiary of Great Eastern Holdings Limited)
1 Pemimpin Street, #11-01 Great Eastern Centre, Singapore 048659

**Accident Photo**

**Accident Photo**

**Accident Photo**

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**Accident Photo**

**Accident Photo**

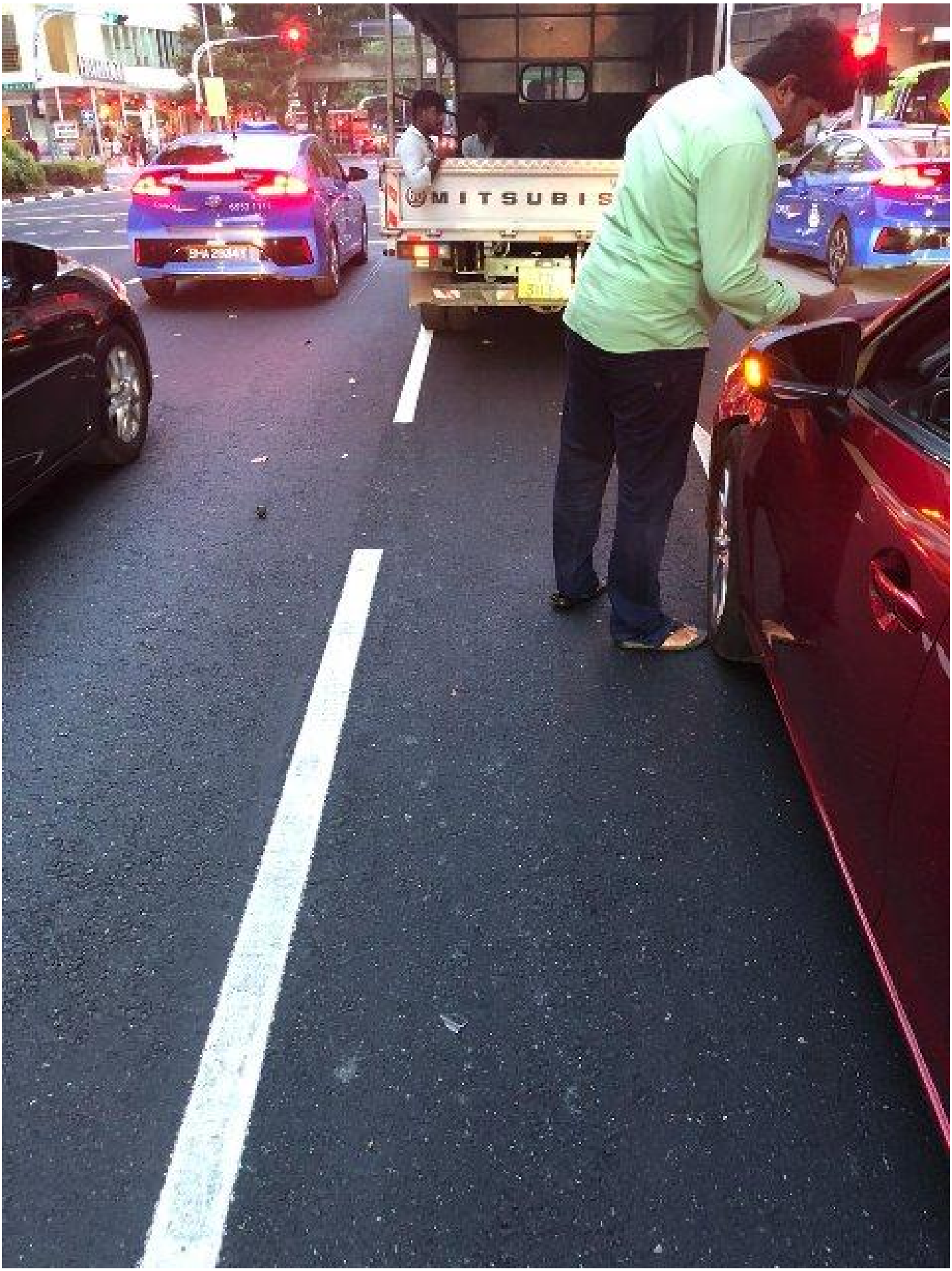
**Accident Photo**

**Accident Photo**

**Accident scene**

**Accident scene**

**Accident scene**



**Accident scene**

**Accident scene**

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**Accident scene**

**Accident scene**

**Accident scene**