

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	08/03/2019 15:25
Date Of Accident	07/03/2019 18:15
Exact Location Of Accident	TURNING OUT FROM CARPARK OF CYCLE & CARRIAGE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLT4841R
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Insured/Policyholder

Name Of Registered Owner	PNG MARIA THERESE
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Vehicle Particulars

Manufacturer	MAZDA
Model	MAZDA 2
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3065671800
Cover Note Number	

Driver

Name of Driver	PNG MARIA THERESE
NRIC No	S0426350B
Address	BLK 116 CLEMENTI ST 13 #10-80

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	NO
Was any other material or property damaged?	YES
Number of Passengers (Including Driver)	1

Circumstances of Accident

REFER TO POLICE REPORT

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGU5096Y
Vehicle Make/Model/Colour	
Name of Driver	CHOON JOOT CHYE
Insurance Company Name	

SKETCH PLAN

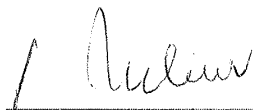
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8. Consent under the Personal Data Protection Act (PDPA)

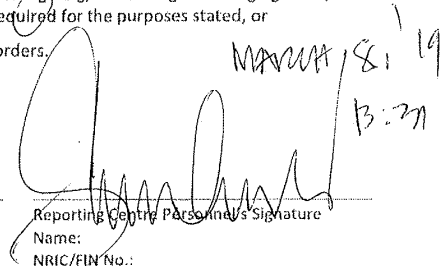
I understand, acknowledge, agree and consent that:

- (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 claim's 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

SEE POLICE REPORT

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

SEE POLICE REPORT

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.:

GAARM, Sketch Plan (on 1/1/13)

**POLICE FORCE**

T/20190307/2164

Police Station Of Origin:
 Clementi N.P.C
 20 Clementi Avenue 5 SINGAPORE 129858
 Tel No: 1800-8729999

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Report No. T/20190307/2164

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/03/2019 22:48		Vide Report No.:		Station Diary No.: 187	
Informant's Particulars					
Name of Informant: PNG MARIA THERESE			Address: APT BLK 116 CLEMENTI STREET 13 #10-80 SINGAPORE 120116		
ID Type / ID No.: NRIC NO / S0426350B			Contact No.: Home/Office: Mobile: 92765766		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 78	Date of Birth: 14/04/1940	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Secretary			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 07/03/2019 18:15	Type of Location: Straight Road
Location: Along Road 1 LENG KEE ROAD Along Leng Kee Road Near Lamp Post No. 16 Lamp Post Number: 16				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No	Type	Make	Model	Color	Condition	No of Passenger
SGU5096Y	Car	TOYOTA	VIOS	Silver	Slightly Damaged	1
SLT4841R	Car	MAZDA	MAZDA2 5-DOOR HATCHBACK 1.5L SP.6EAT	Red	Slightly Damaged	0



POLICE FORCE



T/20190307/2164

Police Station Of Origin:
 Clementi N.P.C
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Report No. T/20190307/2164

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
SLT4841R	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSN30656718 00	30/10/2018	29/10/2019

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	PNG MARIA THERESE		ID No. S0426350B
Related Vehicle	NIL		Contact No. 92765766
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave		NIL	Degree of Injury NIL

Brief Details.

On 07/03/2019 at about 1815hrs, I was turning out from Cycle & Carriage Building Carpark. I was driving my vehicle a Red Mazda with registration number SLT4841R onto Leng Kee Road. I intended to turn right and had signalled right. I stopped at the junction to check if my right and left lane was clear to move out. When I was turning right onto the main road, a Silver Toyota Vios Car with registration plate number SGU5096Y had come from unknown direction hit onto me. I lost control and then hit onto the metal railings on the opposite side of the road.

Due to the impact of the accident, the whole front bumper of my car had totally came off, both headlights were damaged and right front tyre was punctured. The towing crew had towed away my car as it could not be driven.

For the other car, the right side mirror was broken and right side bumper is dented in. The other driver had called for the Police and traffic Police attended to us. The ambulance also came down to scene however it left after knowing no party was injured.

I have exchange particulars with the other driver whom is a GoJek driver together with a female passenger. I do not have any injury and I am unsure if the other party has any injury.

I have an in-vehicle camera and the officer had taken my memory card with him for investigation purpose.



POLICE FORCE



T/20190307/2164

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 20 Clementi Avenue 5 SINGAPORE 129858
 Tel No: 1800-8729999

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Report No. T/20190307/2164

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: D / Sgt 3 NURAISHAH BINTE OSMAN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 07/03/2019 22:48
Officer In Charge Of Case: TP / GIT / SI YEO CHUN JIAN Contact No.: 65476213	Classification Of Case:
Authentication Stamp NP168	SN 37
SIGNATURE	

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

