MPA219048112 / Progressive Car Care Pte Ltd - HQ ENTRY DATE & TIME: 13/04/2019 11:07 SUBMITTED BY: Soo Leong Keat

### SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

**Date Of Driving Pass** 

**Driving Experience** 

Mobile Number

Fax Number
Contact Number
EMail Address

Gender

- 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	13/04/2019 11:07
Date Of Accident	21/03/2019 09:20
Exact Location Of Accident	ALONG LOWER DELTA RD NEAR JLN BUKIT MERAH JUNCT
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKT3255B
Insured/Policyholder	
Name Of Registered Owner	JIANG XINMING
NRIC No	S2743272G
Email Address	XMPPSS@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-98007927
Alternative Phone No	OFFICE-98007927
Vehicle Particulars	
Manufacturer	VOLKSWAGEN
Model	JETTA-1.4 TSI (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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 CAR
Insurance Company	
Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPPHQ18-003185
Cover Note Number	
Driver	
Name of Driver	ZHANG JUPING
NRIC No	S7065146G
Date Of Birth	26/12/1970
Occupation	INDOOR

25/09/2012

**FEMALE** 

6 YEARS AND 5 MONTHS

(LOCAL) +65-93868236

XMPPSS@HOTMAIL.COM

Address BLK 967 HOUGANG AVENUE 9

#08-610

Postcode 530967

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

**General Information of the Accident** 

Type Of Accident SIDE SWIPE
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

NO

ambulance?
Was any other material or property damaged?

YES

I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance.

...

Number of Passengers (Including Driver)

2

Passenger 1

NAME: : JIANG XINMING

GENDER: : MALE

**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** 

STATEMENT RECORDED BY LEONG KEAT - PROGRESSIVE CAR CARE PTE LTD (6741 5336)

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 SJE9634S

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

**Contact Number** 

Address

Postcode

Insurance Company Name

Nature Of Damage

Page 2 of 12

No. Of Passenger (Including Driver)

#### Sketch Plan

### SKETCH PLAN

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  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:
  - 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,

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 #2

	Vehicle
	A-2×T3
, \	B-51E9
- 1 V	
\ \\\ \\ \\ \=	Legend
M	
1/21	
	Vehicle Motorcy
ESCRIBE CIRCUMSTANCES OF THE ACCIDENT	1000
ESCRIBE CIRCUISTANCES OF THE ACCIDENT	
I was travelly along Lower Delta 121 .	near Jln Butt
The state of the s	Luca Condider
merch Innetion. When I proceed to let	turn turn
a viblide & from my rear over take	and cut into my
lane and hot my left front portion.	J
J	
DECLARATION	1
/We declare the foregoing particulars are true in every respect.  Mease be advised that your insurer may have a fourteen (14) days clause whereby the claim against own policy to	must be made within the stipulated timetra
from the day of occurrence. Kindly check your policy for more details.	
XXX	000
Oliochafder's Signature Driver's Signature Rep Date & Time: (If driver is not the policyholder) Nan	orting Centre Personnel's Signature

## DRIVER IC/DL Pg. 1

# REPUBLIC OF SINGAPORE





IDENTITY CARD NO. \$7065146G

Name

ZHANG JUPING

张菊萍

Race CHINESE

0ate of birth Sex 26-12-1970 F

570651450

Country of birth CHINA





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

EFFECTIVE DATE

Class 3A Motor cars without clutch pedals (Auto) =< 3000kg with =< 7 passengers, exclusive of the driver; and other motor vehicles without clutch pedals =< 2500kg

NP 428A











