

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	08/04/2019 11:27
Date Of Accident	07/04/2019 14:50
Exact Location Of Accident	JALAN SULTAN ISKANDAR (JB) TWDS CUSTOM
Country/State of Loss	MALAYSIA/JOHOR DARUL TAKZIM

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJU2967T
Insured/Policyholder	
Name Of Registered Owner	TRACY KUEK (GUO HUI JING)
NRIC No	S8111069G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-83321139
Alternative Phone No	OFFICE-83321139

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	PASSAT
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	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5101719541
Cover Note Number	-

Driver

Name of Driver	TRACY KUEK (GUO HUI JING)
NRIC No	S8111069G
Date Of Birth	09/04/1981
Occupation	OUTDOOR
Date Of Driving Pass	09/12/2002
Driving Experience	16 YEARS AND 3 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-83321139
Fax Number	
Contact Number	OFFICE-83321139
EMail Address	NOEMAIL

Address	BLK 484 ADMIRALTY LINK #07-65
Postcode	750484
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

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?	YES
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)	2
Passenger 1	NAME: : MARYSA LIN
	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

I WAS TRAVELLING ALONG JLN SULTAN ISKANDAR TWDS MALAYSIA CUSTOM. SUDDENLY VEH B (BEARING NO SJD2747B) FROM THE RIGHT LANE CUT INTO MY LANE AND HIT ONTO MY VEH RIGHT FRONT 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	SJD2747B
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	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name TRACY KUEK (GUO HUI JING)
Approximate Age
Injuries Sustain BODY
Injured person in which vehicle? SJU2967T
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

DETAILS OF INJURED PERSON 2

Name MARYSA LIN
Approximate Age
Injuries Sustain BODY
Injured person in which vehicle? SJU2967T
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

SKETCH PLAN

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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
Date & Time:

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

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

SKETCH PLAN

Please
Refer
to
Sketch

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to statement

DECLARATION

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

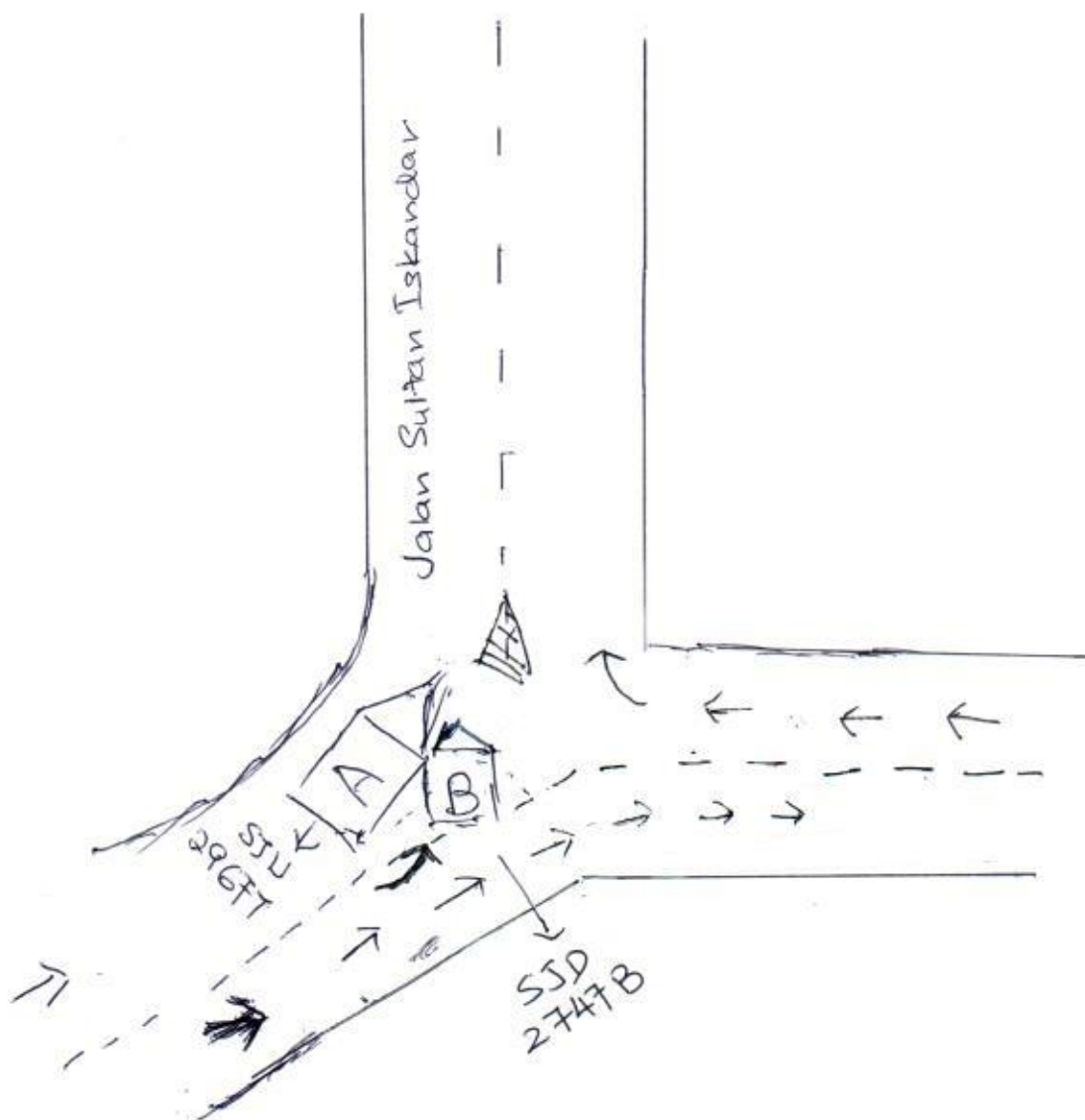
Policyholder's Signature
Date & Time:

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

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

H/83321139

F/H/2019
14.50 PM
SSU296FT



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S8111069G**

Name

TRACY KUEK
(GUO HUI JING)

Birth Date **09 Apr 1981**

Issue Date **22 Jul 2010**

001870246G



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S8111069G**

Name

TRACY KUEK
(GUO HUI JING)

郭惠菁

Race
CHINESE

Date of birth
09-04-1981

Sex
F

Country/Place of birth
SINGAPORE



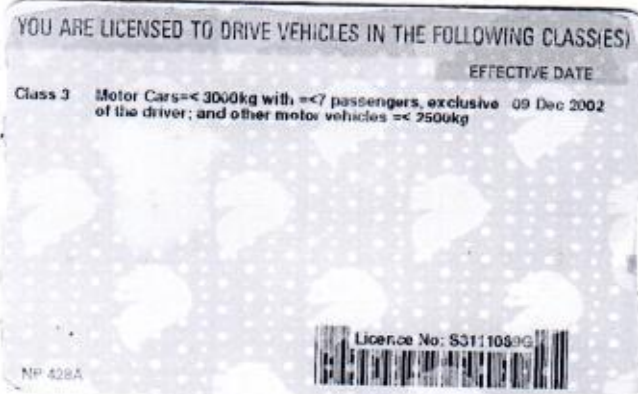

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(S)

EFFECTIVE DATE

Class 3 Motor Cars ≤ 3000kg with ≤ 7 passengers, exclusive of the driver; and other motor vehicles ≤ 2500kg **09 Dec 2002**

Licence No: **S8111069G**

NP 428A



5737191

NRIC No. **S8111069G**

Date of issue
13-04-2017

APT BLK 484 ADMIRALTY LINK #07-65
SINGAPORE 750484

NRIC No: **S8111069G** Date: **02/12/2017**




Hello, NAC_PAYA_UBI_800601

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Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="07/04/2019 11:25"/>
Vehicle No.(For Motor)	<input type="text" value="SJU2967T"/>	Certificate Number	<input type="text"/>
<input type="button" value="Search"/>			

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5101719541		TRACY KUEK (GUO HUI JING)	S8111069G	GPC	drivo CLASSIC	SJU2967T	SJU2967T	03/07/2018	02/07/2019

Claim Handling

Accident MT/1039181

Policy No.	5101719541	Vehicle No.	SJU2967T	GST Registration No.	
Certificate No.					
Policyholder Name	TRACY KUEK (GUO HUI JING)			Policyholder NRIC	S8111069G
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	83321139	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	No Yes	TCA	No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	30	Private Hire	No
Accident Details					
Report Date	08/04/2019 12:07	Accident Report Within 24 hrs	Yes	Accident Type	Collision
Date of Accident	07/04/2019	Time of Accident hh:mm	14:50	Country of Accident	Outside
Reporting Centre		Orange Force		ICM No.	
Accident Location	JALAN SULTAN ISKANDAR (JB) TWDS CUSTOM				
Excess					
Own damage Excess	600.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	600.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		
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 484 #07-65	Address 2	ADMIRALTY LINK	Address 3	SINGAPORE
Address 4		Address Type	Singapore address	Post Code	750486
Unit No.		Related Policy Number	5101719541		
OI Driver Info					
Driver Name	TRACY KUEK	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S8111069G	Driver DOB	09/04/1981
Register Date of Driver License	01/01/2008	Driver Age	37	Driving Experience	11
Contact No.(Mobile)	83321139	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 484 #07-65	Address 2	ADMIRALTY LINK	Address 3	SINGAPORE
Address 4		Address Type	Singapore address	Post Code	750486
Unit No.					
Does he own a Singapore Registered car?	Yes No	Driver Vehicle No.		Driver Insurer Company	
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes No		

Modification History

Claim 001 New

Claim Type *	OD-MX	Insured Name	TRACY KUEK (GUO HUI JING)
Contact No.(Mobile)	83321139	Contact No. (Home)	NIL
Email Address	tracykuek@gmail.com	OI Vehicle Number	SJU2967T
Claim Description	SJU2967T / SJ02747B ON 7 Apr 2019		
Preferred Workshop	0	Insured Liability	Not at Fault
Workshop No.	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Finalisation		GIA report	Received
Date Registered			
Report Taken By			
Print AK letter			

Save Submit

Attachment

Accident No.	MT/1039181	Claim No.	001
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Last Doc: Received

Yes No

Upload Date

08/04/2019 12:14

Path *

Choose File No file chosen

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Message Read

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Confidential

Urgency *

NO

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NO

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NO

Normal

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NO

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Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 08 Apr 2019 12:14	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-4-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 08 Apr 2019 12:14	SAS	Normal	SAS 2019-4-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 08 Apr 2019 12:14	Photos	Normal	Photos 2019-4-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 08 Apr 2019 12:14	Photos	Normal	Photos 2019-4-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 08 Apr 2019 12:14	Photos	Normal	Photos 2019-4-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 08 Apr 2019 12:14	Photos	Normal	Photos 2019-4-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 08 Apr 2019 12:13	Photos	Normal	Photos 2019-4-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 08 Apr 2019 12:13	Photos	Normal	Photos 2019-4-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 08 Apr 2019 12:13	Photos	Normal	Photos 2019-4-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 08 Apr 2019 12:13	Photos	Normal	Photos 2019-4-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 08 Apr 2019 12:13	Photos	Normal	Photos 2019-4-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 08 Apr 2019 12:13	Photos	Normal	Photos 2019-4-8

Video List

Uploaded By/Date

Folder Date

File Name

Source

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