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 <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.	foresaid.	
	ACCIDENT STATEMENT	
Date Of Report	06/04/2019 14:27	
Date Of Accident	05/04/2019 21:20	
Exact Location Of Accident	IN FRONT OF GOLDEN MILE COMPLEX	
Country/State of Loss	SINGAPORE	
DETAILS OF OWN VEHICLE		
Vehicle Registration Number	SJV8273S	
Insured/Policyholder		
Name Of Registered Owner	ZHONG XIANSHU	
NRIC No	S2741739F	
Email Address	SAMSUZHONG@YAHOO.COM.SG	

(LOCAL) +65-82220072

HOME-82220072

Alternative Phone No Vehicle Particulars

Mobile Phone No

Manufacturer CITROEN

Model C4 SX 1.6L VTI AT ABS D/AB P-SR 5DR 2WD

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 REPORTING ONLY Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company FWD SINGAPORE PTE. LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number PNCV2019-00000171

Cover Note Number

Driver

Name of Driver ZHONG XIANSHU

NRIC No S2741739F
Date Of Birth 29/07/1966
Occupation INDOOR
Date Of Driving Pass 29/04/2005

Driving Experience 13 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-82220072

Fax Number

Contact Number HOME-82220072

EMail Address SAMSUZHONG@YAHOO.COM.SG

197B BOON LAY DRIVE #16-99 SINGAPORE 642197

Address Postcode

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 DARK DRY Road Surface

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

NO

YES Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

1

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

NO

NO

Circumstances of Accident

REFER TO SKETCH PLAN

Attachment(s)

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

Was there any audio recorded?

YES

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

SJU8035T Vehicle Registration Number Vehicle Make/Model/Colour NISSAN

Details Of Properties

PRIVATE CAR Vehicle Category KHOR JIA MIN Name of Driver

NRIC/Passport Number

Contact Number 98373962

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)



CERTIFICATE OF INSURANCE

Please call +65-6322-2072 for FWD Emergency Assistance if Your Car breaks down or is involved in an accident.

All accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

POLICY NUMBER: PNCV2019-00000171

Car plate number

: SJV8273S

Coverage start date: 06/03/2019

Coverage end date: 05/03/2020

Who is insured to drive: You and any Authorised Driver

Covered Geographical Area: Singapore, West Malaysia and Southern Thailand

About you (the Policyholder)

Name: ZHONG XIANSHU

NRIC/FIN: S2741739F

Address: 197B Boon Lay Drive 16-99 Boon Lay Fields Singapore 642197

Email: samsuzhong@yahoo.com.sg

Mobile Number: 82220072

Date of Birth: 29/07/1966

Gender: Male

Marital status: Married

Certificate of Merit: No

Current no claims discount: 0%

Years of driving experience: Three or more

About your car and policy

Car make and model: CITROEN C4 1.6

Year of first registration: 2010

Plan type: Comprehensive

Standard Excess: S\$2,000

NCD protector: Not Applicable

Your preferred workshop: Not Applicable

Overseas Booster: Yes

Premium paid (Inclusive of GST): \$\$2,486.93

REPUBLIC OF SINGAPORE

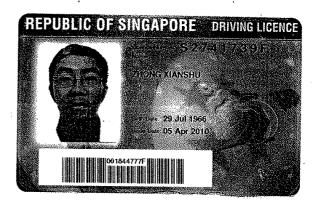
IDENTITY CARD NO. \$2741739F



ZHONG XIANSHU

CHINESE Date of birth 29-07-1966 Country of birth

CHINA



20-03-2009 APT BLK 197B BOON LAY DRIVE #16-99 SINGAPORE 642197

NRIC No: \$2741739F

Date: 31/10/2014

SKETCH PLAN	
rite & CARB ENTEX 1000 CARC ALL	2725 30397 av Cs stopped and way to cav A
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	
CARA: Bxiting from Golden or tile Com Stopped in front of transic ligh CARB Rushed towards the transic ligh Right - in front.	ht creds.
Important: You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a FOURTEEN (14)	- Reporting Only - Claim OD
DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame from the day of the occurrence.	- Claim TP - Claim OD/ TP at other workshop
DECLARATION	- Claim OD/ IP at other Workshop

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

Policyholder's signature

Date & Time

Driver's Signature

(if driver not the policyholder)

Date & Time

Reporting Centre Personnel's Signature Name:

Nric/Fin No.

Sketch Plan Pg. 4

SKETCH PLAN

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 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 enquines 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.
- 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 & Tames

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

WEIL WAY

ersonnet's Signature

> Back to OneMotoring

Vehicle Details			
Vehicle No.:	SJV8273S	en e	
Vehicle Type :	Z10 - Private Hire (Chauffeur) Moto		
Vehicle Attachment 1:	With Sun Roof	r Car	
Vehicle Scheme :	Normal	the control of the second of t	
Vehicle Make :	CITROEN	the state of the s	
Vehicle Model :	C4 SX 1.6L VTI AT ABS D/AB P-SR 5	DB 9Wb	
Chassis No.:	VF7LC5FWF9Y589300		
Propellant:	Petrol	the second secon	Process of the second participation of the second particip
Engine No. :	10FHBV0666688	er er en	
Engine Capacity:	1598 cc	The second secon	9.4
Maximum Power Output:	88.0 kW (118 bhp)	and the second of the second o	
Maximum Laden Weight:	1761 kg	The state of the s	NAME OF THE OWNER O
Unladen Weight :	1273 kg		
Year Of Manufacture :	2009		
Original Registration Date:	10 Feb 2010	e e e e e e e e e e e e e e e e e e e	
Lifespan Expiry Date:			
COE Category:	A - Car (1600cc & below)	the state of the s	
Quota Premium :	\$18,502.00		
COE Expiry Date :	09 Feb 2020	and the second s	
Road Tax Expiry Date :	09 Aug 2019		
PARF Eligibility Expiry Date :	09 Feb 2020	the control of the second of t	
nspection Due Date :	09 Feb 2021		The state of the s
ntended Transfer Date:	08 Apr 2019		
O2 Emission :	00 Apr 2019	***	
O Emission :	The second secon		
IC Emission :			energe continues and descriptions decreased and a second
IOx Emission :			The second of th
M Emission :			
	different to the second to the	the state of the s	and the same and the same and the
oad tax, including Over Payment	if road tax / lay up has expired. Please use	Enquire Road Tax Payable for fee(s) paya	ble.
mount Payable	(if any), of a vehicle will follow the vehicle t	o the new registered owner when its owne	ership is being transferred.
	Amount Before GST	GST Amount	
	(S\$)	(S\$)	Amount After GS
ansfer Fee :	25.00		(S\$
tal Amount Payable :			25.00

OK

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