

## 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	13/04/2019 11:47
Date Of Accident	13/04/2019 09:05
Exact Location Of Accident	UPP SERANGOON RD -INFRONT OF BLK 1 LEW LIAN GARDEN
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLE5808K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	WONG WAI HON (HUANG WEIHONG)
NRIC No	S7319317F
Email Address	WAIHON73@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91516086
Alternative Phone No	OTHERS-91516086

### Vehicle Particulars

Manufacturer	MAZDA
Model	5-2.0 SP.6EAT SUNROOF (A)
Exact Purpose for which vehicle was being used at time of accident	PTE 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	5092167046-01 DC
Cover Note Number	27/07/2019 - 26/07/2019

### Driver

Name of Driver	WONG WAI HON (HUANG WEIHONG)
NRIC No	S7319317F
Date Of Birth	22/05/1973
Occupation	INDOOR
Date Of Driving Pass	25/10/1999
Driving Experience	19 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91516086
Fax Number	
Contact Number	OTHERS-91516086
EMail Address	WAIHON73@GMAIL.COM

Address	BLK 317A ANCHORVALE ROAD #08-220
Postcode	541317
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?	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

I WAS TRAVELLING ALONG UPPER SERANGOON ROAD UNDER SERANGOON VIADUCT. AFTER LORONG LEW LIAN INFRONT OF BLOCK 1 (LEW LIAN GARDENS) THERE WAS A STATIONARY TAXI STOPPING TO PICK UP A PASSENGER. CAR SLP6160E SLOWING DOWN AS I WAS PASSING BY BOTH CARS. UNFORTUNATELY SLP6160E BEGAN TO CUT INTO 2ND LANE AND HIT MY CAR SLE5808K AT THE SIDE AFTER THE PASSENGER SLIDING DOOR AND THE RIGHT REAR TYRE LEAVING BEHIND WHITE PAINT ON BOTH THE CAR BODY, RIM & TYRE.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	SEND DIRECT TO INSURANCE COMPANY
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLP6160E
Vehicle Make/Model/Colour	HYUNDAI
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ONG KANG SHENG
NRIC/Passport Number	S8315041F
Contact Number	98272885
Address	
Postcode	
Insurance Company Name	AXA INSURANCE PTE LTD
Nature Of Damage	



**SKETCH PLAN**

VEHICLE NO.: SLE 5808K  
INSURER : HTUC Insurance 5092167046-C  
DATE & TIME: 13/4/2019 9.05am

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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 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:

13/4/2019 11.30am

Driver's Signature

(If driver is not the policyholder)

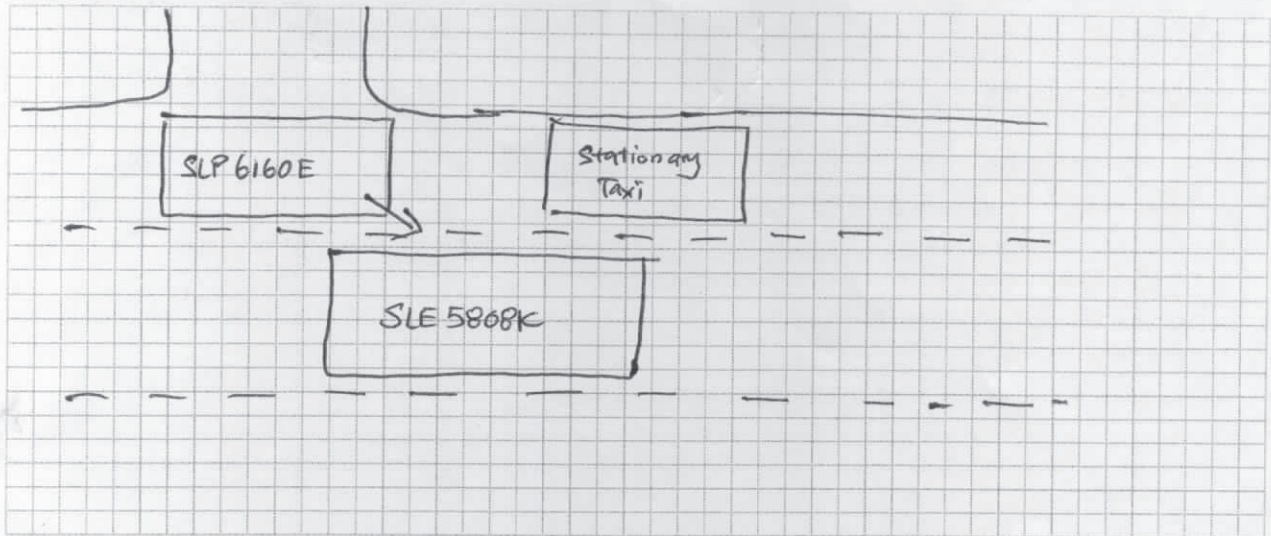
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


I was travelling along Upper Serangoon Road under Serangoon Viaduct. After Lorong Lew Lian in front of Block 1 (Lew Lian Gardens) there was a stationary taxi stopping to pick up a passenger. Car SLP 6160E slowing down as I was passing by both cars. Unfortunately SLP 6160E began to cut into 2nd lane and hit my car SLE 5808K at the side after the passenger sliding door and the right rear tyre leaving behind white print on both the car body, rim and tyre.

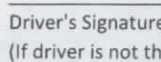
Vehicle No: SLE 5808K (NTUC)  
Date & Time: 13/04/19 @ 0905 (clearing)


Note : Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information.

## DECLARATION

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

  
Policyholder's Signature  
Date & Time:  
13/4/2019 11.30am  
GIARMC SketchPlanForm\_V3

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

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

( ) Claim Own Policy (X) Claim Third Party ( ) Reporting Only  
( ) Claim OD/TP at other workshop ( )