### 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.

aloresalu.	
	ACCIDENT STATEMENT
Date Of Report	24/04/2019 15:53
Date Of Accident	23/04/2019 09:30
Exact Location Of Accident	JUNCTION OF OLD TOH TUCK ROAD AND TOH TUCK LINK
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SMC8187Y
Insured/Policyholder	
Name Of Registered Owner	TAN YONG JIE (CHEN YONGJIE)
NRIC No	S8319366B
Email Address	YJTAN29@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91832683
Alternative Phone No	OTHERS-91832683
Vehicle Particulars	
Manufacturer	HONDA
Model	JAZZ
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN1823271800
Cover Note Number	
Driver	
Name of Driver	TAN YONG JIE (CHEN YONGJIE)

NRIC No S8319366B
Date Of Birth 29/06/1983
Occupation INDOOR
Date Of Driving Pass 07/09/2004

Driving Experience 14 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91832683

Fax Number

Contact Number OTHERS-91832683
EMail Address YJTAN29@GMAIL.COM

**BLK 275B JURONG WEST STREET 25** Address

#09-107

Postcode 642275

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**

**CHAIN COLLISION** Type Of Accident

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

3 NO

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

NO YES

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO 1

NO

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? NO

If Yes, against whom?

## **Circumstances of Accident**

## PLEASE REFER TO SKETCH PLAN

### Attachment(s)

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

## **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number SHD81A

Vehicle Make/Model/Colour RENAULT LATITUDE

**Details Of Properties** 

Vehicle Category TAXI

Name of Driver SIM BEE CHYE S1844389I NRIC/Passport Number 94576132

**Contact Number** 

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

### **DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number

GBH3080H

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

Name of Driver

NRIC/Passport Number

**Contact Number** 

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

TOYOTA

COMMERCIAL VEHICLE

GOH DHEH

S1323794H

#### Sketch Plan

## SKETCH PLAN

## IMPORTANT NOTICE

- 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
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The 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 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:

- 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)
  - (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
- 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:

23/04/2014 1700 hrs Driver's Signature (If driver is not the policyholder)

Date & Time:

2411 Reporting Centre Pers

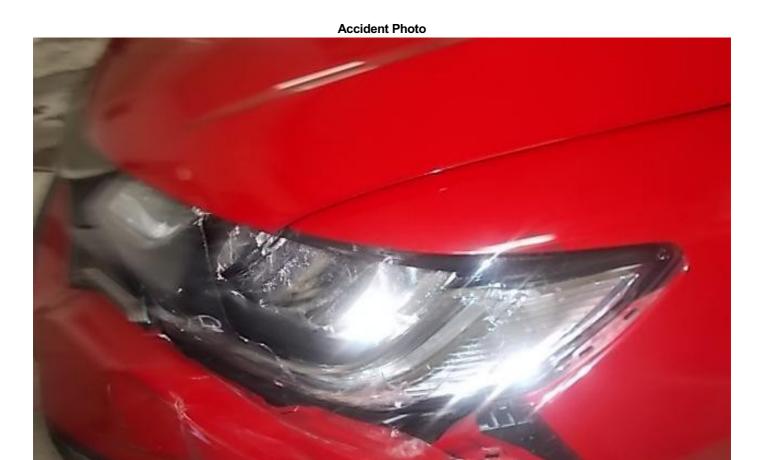
SKETCH PLAN		
Old 7-h Ti	ute Road >	B) B) E)
4		
A) SMC 81874		O [82]
B) SHO 81A		16-past B3
C) GBH 3680H	111	3 B
DESCRIBE CIRCUMSTANCE	ES OF THE ACCIDENT	78
I was driving an impact on	MC81874 (A) on Old my left by Transcub SHO81A	(B) on 23 April 2019, 9-32am.
I want to assist	the front, before mountary the dower of SHD814 (B) Mr	Sim and GRH 2080 H (C) Mr Gan.
After resting, be ambulance attended police help.	th drivers said they are oldo lance. I offered to Call the	Police but they said they need not
Afterwards, 2 porticulars. After The AETOS off	r multing stere both divines one	came by and took down over olary. I provided on my way.
DECLARATION /We declare the foregoing pan	ticulars are true in every respect.	(nobodonic
olicyholder's Signature	Driver's Signature (If driver is not the policyholder)	Reporting Centre Bensannel's Signature

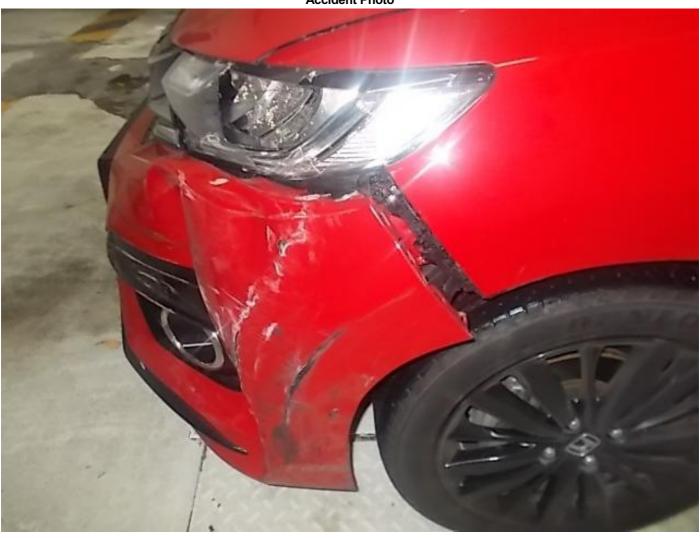
Date & Time:

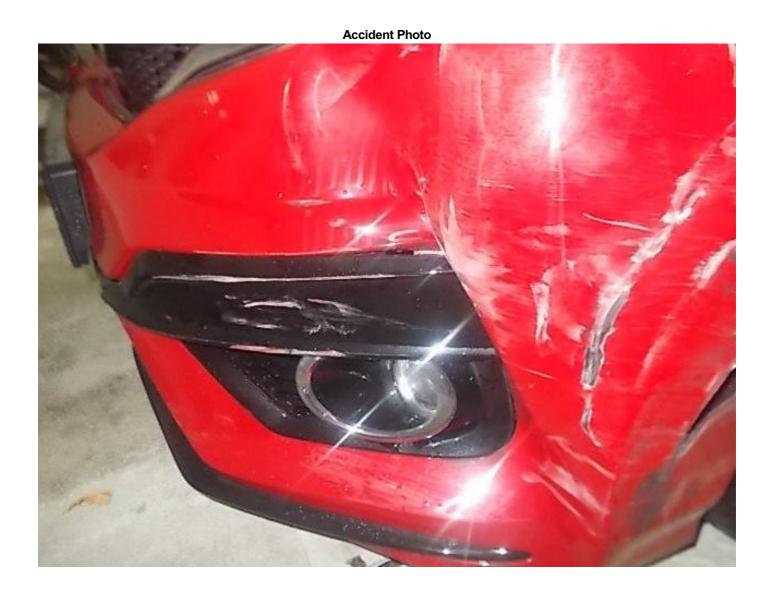








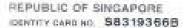








## **Identification Card**







TAN YONG JIE (CHEN YONGJIE)



CHINESE. 20-00-1983

SINGAPORE



5899996





14-02-2018

APT BLK 3788 JURONG WEST STREET 35 859-157 5858PORE 642275

YOU ARE LICENSED TO DRIVE VCHICLES IN THE FOLLOWING CLASSIES! ENDICTOR DATE

Clears 3 - Roder Care = 5000 kg with = 7 percentages, acclusive 67 Sep 2004 of the clears; and other autor remotes = 8000 kg.

HP 428A