

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	29/04/2019 12:42
Date Of Accident	13/04/2019 07:30
Exact Location Of Accident	TUAS CHECKPOINT TWDS MALAYSIA CHECKPOINT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGT3713T
Insured/Policyholder	
Name Of Registered Owner	I DRAGONFLY
Co Reg No	53351959D
Email Address	LIMYEOWLENG38@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91167235
Alternative Phone No	OFFICE-91167235

Vehicle Particulars

Manufacturer	TOYOTA
Model	ESTIMA AERAS 2.4 A
Exact Purpose for which vehicle was being used at time of accident	WORK
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5086891611-02
Cover Note Number	

Driver

Name of Driver	LIM YEOW HENG
NRIC No	S1498406B
Date Of Birth	24/08/1961
Occupation	OUTDOOR
Date Of Driving Pass	29/07/1996
Driving Experience	22 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91167235
Fax Number	
Contact Number	OTHERS-91167235
Email Address	LIMYEOWLENG38@GMAIL.COM

Address	BLK 313 TAMPINES STREET 33 #07-28
Postcode	520313
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	CHAIN COLLISION
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
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

PLS REFER TO THE ATTACHED STATEMENT.

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	SFE2111C
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 OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	UNKNOWN
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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)

Sketch Plan

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 #2

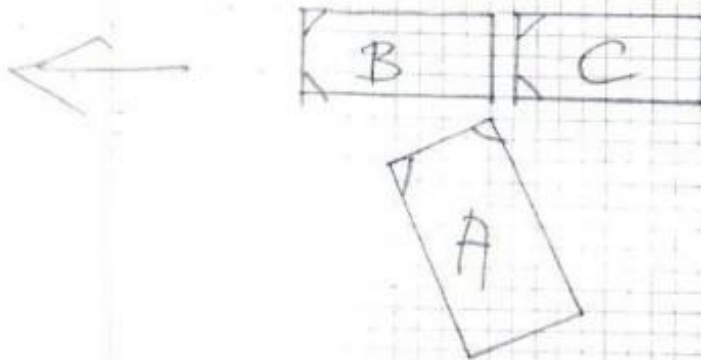
SKETCH PLAN

TUAS CHECKPOINT TOWARDS
MALAYSIA CHECKPOINT

A - SGT 3713 T

B - SFE 211 C

C - UNKNOWN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The traffic was congested on that day.
I intend to litter to the right. Vehicle C
go forward from prevent my from going in.
I was very clear that my vehicle did not
hit vehicle B. Vehicle A have no damages.

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.:

29/4/2019

Sketch Plan #3

Cheonghoh Law Corporation

(Incorporated with limited liability) Blk 53 Chin Swee Road #03-05 Singapore 160053
Co. Reg No. 201108070G Tel: 63378700 Fax: 63373700 E-mail: mail@cheonghoh.sg

In reply, please quote our Reference Number

Our Ref: LCH.my/W1HP-90310.19
Your Ref: To be advised

18 April 2019

CERTIFICATE OF POSTING

I DRAGONFLY
Blk 313 Tampines Street 33
#07-28
Singapore 520313

Dear Sirs

TRAFFIC ACCIDENT INVOLVING YOUR VEHICLE SGT 3713 T AND SFE 2111 C ON 13 APRIL 2019 AT 7:30 AM ALONG TUAS CHECKPOINT TOWARDS MALAYSIA CHECKPOINT

We act for **RAGUVATHI S/O VEERAPPAN**, the owner of the above said motor vehicle no. **SFE 2111 C**.

We understand that you are the owner of motor vehicle **SGT 3713 T** and that your insurers are NTUC Income Insurance Co-Operative Ltd.

On behalf of our client, we had written to the Traffic Police / GIA Record Management Centre (GIA RMC) for a copy of your report on the above accident. We were however informed that you and/or your authorised driver, agent and/or servant had failed to notify your insurers of the accident.

It is in your own interest to forthwith attend at the office of your insurers to make the motor accident report and to notify them of the above accident or to report to the Traffic Police where the accident involved a foreign registered vehicle. Please do so immediately upon receipt of this letter.

If you fail to heed our advice, our client will, in due course, file a claim against you directly for the damages and if necessary, commence legal proceedings against you to recover his losses. In such an event, you will be called upon to pay our client's damages together with interests and legal costs out of your own pocket.

To avoid such a consequence, please report the above accident to the Traffic Police and/or to your insurers immediately upon receipt of this letter. We wish to add that if our inquiry with the Traffic Police and/or the GIA Record Management Office in the next 7 days disclose that you have not reported to the Traffic Police and/or to your insurers the accident and your report has not been forwarded to GIA Record Management Office by your insurers, our client shall proceed to look to you for the satisfaction of his claim.

Kindly ignore this letter if you have already submitted your accident report to your insurers.

Yours faithfully



Lee Cheong Hoh
CHEONGHOH LAW CORPORATION

cc: client (via Fax : 63656101) - SFE 2111 C

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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