

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	30/04/2019 10:58
Date Of Accident	29/04/2019 14:00
Exact Location Of Accident	2985 JALAN BUKITMERAH / SINGAPORE 159457
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBJ3749C
Insured/Policyholder	
Name Of Registered Owner	FOREIGN DOMESTIC WORKER ASSOCIATION FOR SOCAIL SUP
Co Reg No	-
Email Address	C_ALYSTAAW94@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-92320092
Alternative Phone No	OFFICE-65091535

Vehicle Particulars

Manufacturer	NISSAN
Model	NV 200
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?	YES
If No, Please state action to be taken	

Vehicle Category	COMMERCIAL VEHICLE
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Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN1914491900
Cover Note Number	

Driver

Name of Driver	CALYSTA AW HUI QI
NRIC No	S9436868E
Date Of Birth	08/10/1994
Occupation	INDOOR
Date Of Driving Pass	27/10/2015
Driving Experience	3 YEARS AND 6 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-92320092
Fax Number	
Contact Number	OTHERS-92320092
EEmail Address	C_ALYSTAAW94@HOTMAIL.COM

Address	120G TANAH MERAH BESAR LANE
Postcode	498928
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO PARKED VEHICLE
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)	3
Passenger 1	NAME: : NIL GENDER: : FEMALE
Passenger 2	NAME: : NIL 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

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	SMA7765X
Vehicle Make/Model/Colour	HONDA /CIVIC
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	92776292
Address	
Postcode	

Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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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: 29/4/19

5.59pm

[Signature]
Driver's Signature

(If driver is not the policyholder)

Date & Time: 29/4/19

17.41

[Signature]
Reporting Centre Personnel's Signature

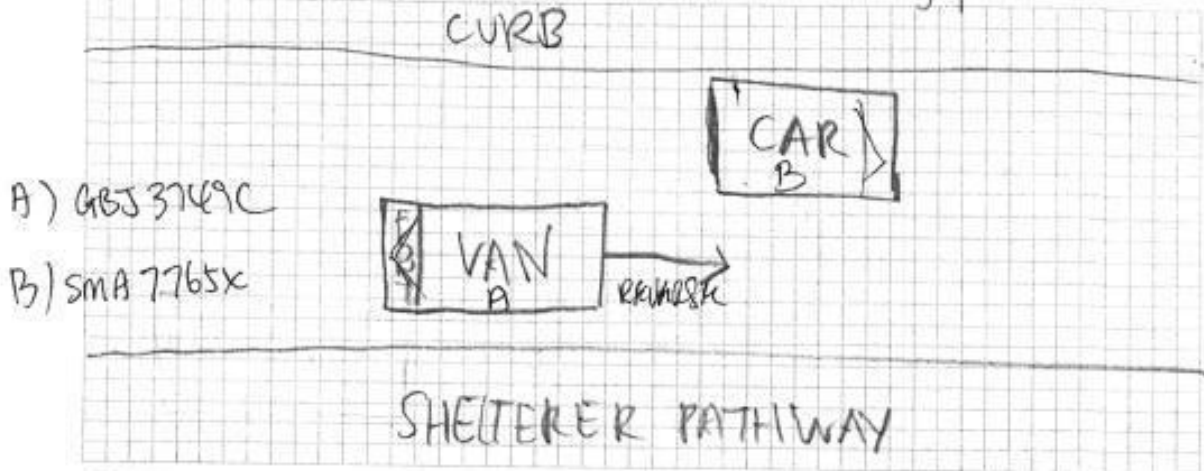
Name:

NRIC/FIN No.:

Sketch Plan #2

2985 Jalan Bukit Merah
Singapore 159457

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

~~Reversing the van into stationary car in carpark.~~
 Reversing the ^{van} to get out of the carpark.
 Hit stationary car.

DECLARATION

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

Policyholder's Signature
 Date & Time: 29/4/19
 5.50pm

Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 29/4/19
 17.49

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

30/4/2019

Sketch Plan #3

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9436868E



NAME
CALYSTA AW HUI QI
胡 蕙 琦
Race
CHINESE
Date of birth
08-10-1994 F
Country of birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number
S9436868E
Name
CALYSTA AW HUI QI
Birth Date
08 Oct 1994
Issue Date
27 Oct 2015



SG
50



4438517



NRIC No. S9436868E
Date of issue
28-07-2009
Address
120G TANAH MERAH BESAR LANE
SINGAPORE 498928

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

Class	Motor Cars <= 3500kg with <=7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg
Class 2	Motor Cars <= 3500kg with <=7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg

EFFECTIVE DATE
27 Oct 2015

NP 428A



Accident Photo



Accident Photo



Accident Photo



Accident Photo

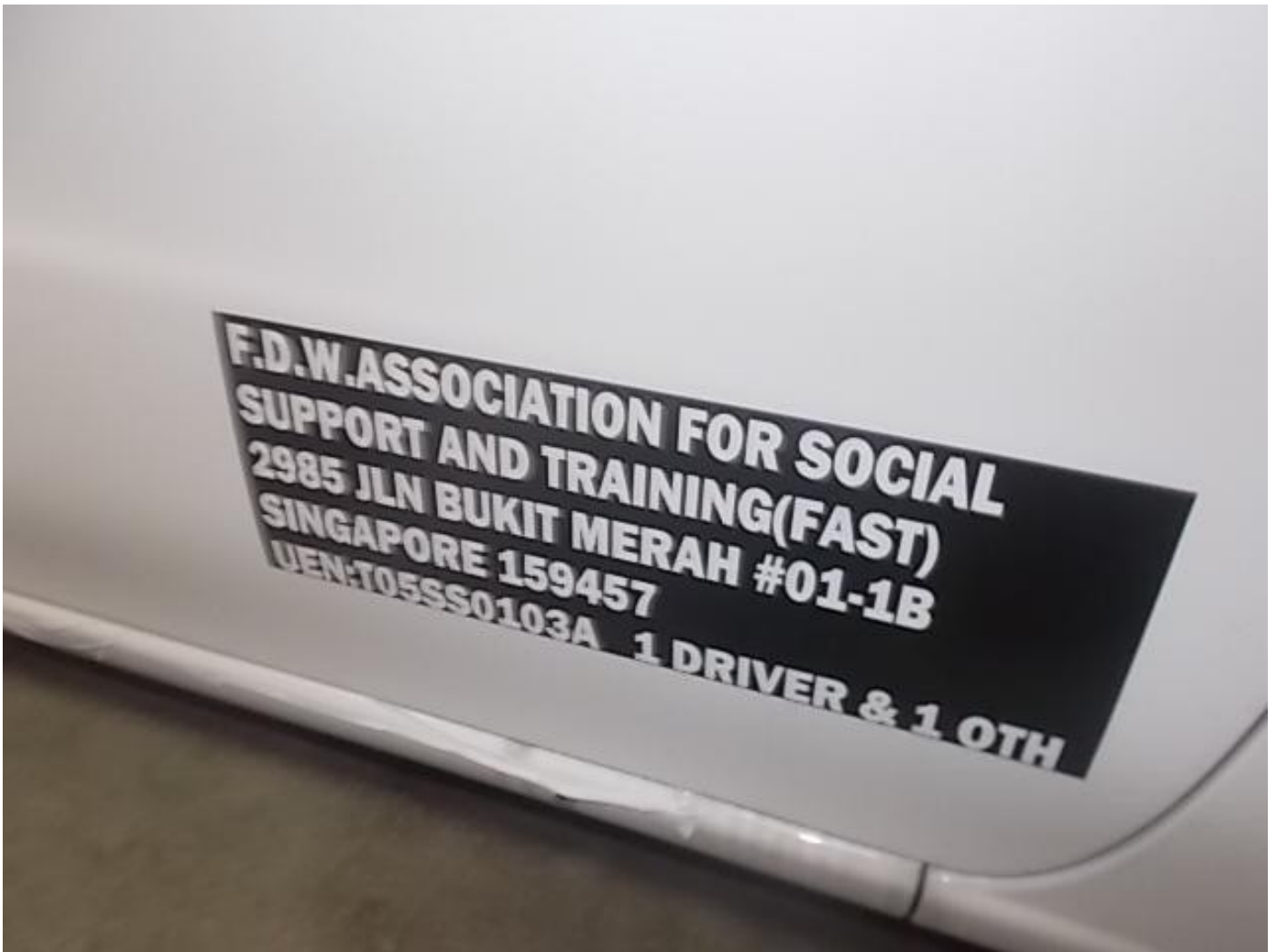


Accident Photo



Accident Photo

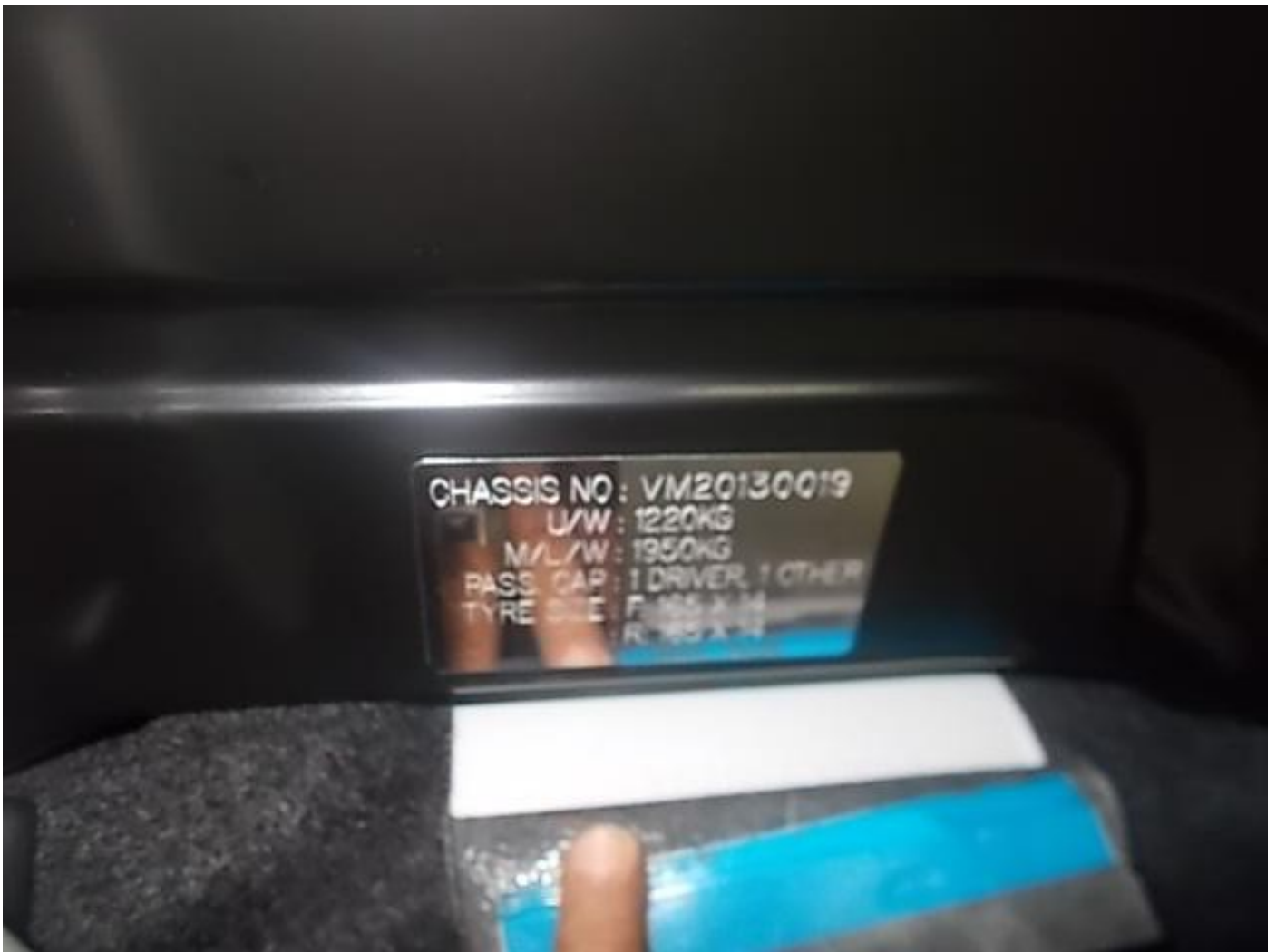




Accident Photo



Accident Photo



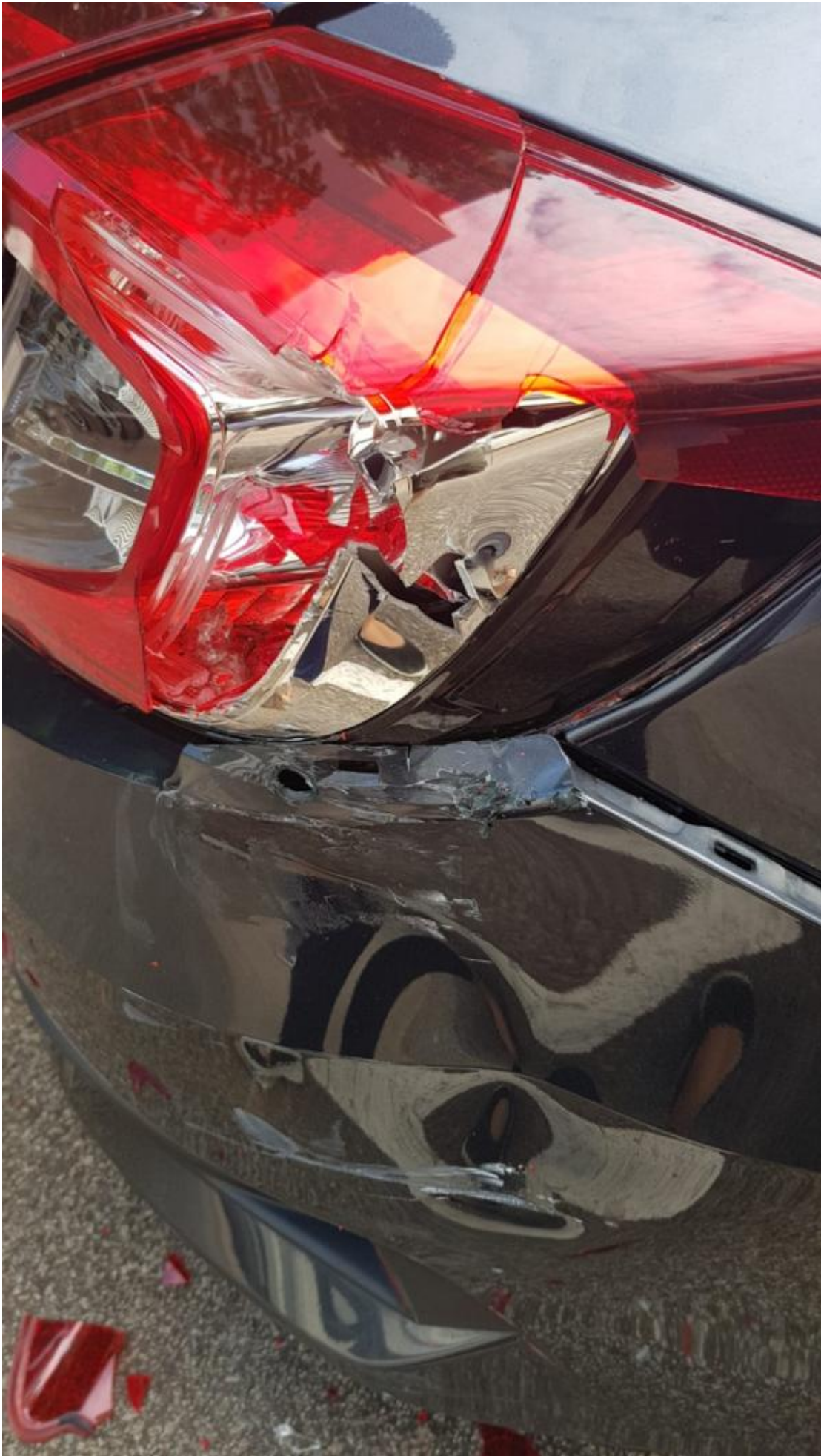
Accident Photo



Accident Photo



Accident Photo



Accident Photo

