

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	26/04/2019 13:40
Date Of Accident	25/04/2019 12:00
Exact Location Of Accident	HOUGANG AVE 9 NEAR BLK 917
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLZ6539U
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Insured/Policyholder

Name Of Registered Owner	XOD BOX PTE LTD
Co Reg No	200406647E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-67474712

Vehicle Particulars

Manufacturer	KIA
Model	CERATO K3 1.6 EX
Exact Purpose for which vehicle was being used at time of accident	DRIVING TO LUNCH
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

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800051469
Cover Note Number	

Driver

Name of Driver	NG CHIN HWA
NRIC No	S8231436I
Date Of Birth	23/09/1982
Occupation	INDOOR
Date Of Driving Pass	24/03/2007
Driving Experience	12 YEARS AND 1 MONTH

Gender	MALE
Mobile Number	(LOCAL) +65-96839918
Fax Number	
Contact Number	
E-Mail Address	DARREN@XODBOX.COM.SG
Address	94 EDGEDALE PLAINS #10-32
Postcode	828687
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	COLLISION - HEAD TO REAR
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)	5
Passenger 1	Name: : LYSANDRA Gender: : Female
Passenger 2	Name: : JAE Gender: : Female
Passenger 3	Name: : PORTIA Gender: : Female
Passenger 4	Name: : SHAREE Gender: : Female

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	HOUGANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 60 HOUGANG AVE 9 , POSTCODE: 538775 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4890999 - FAX NO: 63128989
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHMENT

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	GBB7447P
Vehicle Make/Model/Colour	WHITE LORRY
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	SONG YANG
NRIC/Passport Number	
Contact Number	86478217
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	SLIGHT DENT ON BACK CARPLATE
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:



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



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

Diagram illustrating a car at a traffic light:

- A horizontal line represents the road.
- A vertical line represents the traffic light pole.
- The intersection is labeled "traffic light." with an upward arrow.
- A rectangle labeled "my car" is positioned at the intersection.
- To the left of the car, the text "Hanging Out 9" is written.
- To the right of the car, an arrow points to the word "bunny".

I was approaching a traffic light along Highway Ave 9 near
bik 917 when the lorry in front suddenly jam brake.
~~The~~ The lorry was half way across the traffic light junction
when the vehicle came to a stop.

It was sudden and I could not brake in time.

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

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Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Police Report

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Annex E

NOTICE OF COMPLIANCE

This is to confirm that Ng Chin Hwa 

NRIC/FIN S82314361, has reported to the Police a non-injury traffic accident

which occurred along Hougang Avenue 9 near Blk 917 Hougang Avenue 9

on 25/04/2019 at 12.00 am/pm Involving the following vehicles:

Informant: SLZ6539U, Black Kia Cerato

Other Party: GBB7447P, White Lorry HP: 96478217

- 2 If this accident was reported to the Police within 24 hours of its occurrence,
Then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SGT ASHLEY

Date: 25/04/2019

Time: 1335 hrs

S/D Ref: 99

HOUGANG NEIGHBOURHOOD POLICE CENTRE
TEL: 1000-880000

Police Post/Unit: HOUGANG NEIGHBOURHOOD POLICE CENTRE

Original - to be issued to informant
Duplicate - to be submitted to Traffic Police

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Version as of 15 Jan 2002

Identification Card

