

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Fax Number

Contact Number

EMail Address

- 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 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.

	ACCIDENT STATEMENT
Date Of Report	03/05/2019 13:43
Date Of Accident	02/05/2019 15:00
Exact Location Of Accident	121 BISHAN ST 12 OPEN AIR CARPARK
Country/State of Loss	SINGAPORE
percent with the property of the percent of the per	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SKU4373G
Insured/Policyholder	
Name Of Registered Owner	CHUA BENG CHYE, JOSEPH (CAI MINGCAI, JOSEPH)
NRIC No	S8035854G
Email Address	JOSEPHCHUABC80@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97440410
Alternative Phone No	OTHERS-97440410
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	LANCER EX 1.6 AT LED TAIL LAMP
Exact Purpose for which vehicle was being used at time of accident	PARKED
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	5082251451-02
Cover Note Number	
Driver	
Name of Driver	CHUA BENG CHYE, JOSEPH (CAI MINGCAI, JOSEPH)
NRIC No	S8035854G
Date Of Birth	13/11/1980
Occupation	INDOOR
Date Of Driving Pass	08/03/2001
Driving Experience	18 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-97440410

OTHERS-97440410

JOSEPHCHUABC80@GMAIL.COM

Address BLK 470B UPPER SERANGOON CRESCENT #13-328

NO

YES

NO

0

NO

NO

Postcode 532470

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 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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

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?

If Yes, against whom?

Circumstances of Accident

ON 02/05/19, MY CAR SKU4373G WAS PARKED STATIONARY AT THE BLOCK 121 BISHAN STREET 12 OPEN AIR CARPARK. AROUND 3PM PLUS IN THE AFTERNOON, MY MUM HEARD A LOUD BANG, SHE LOOKED OUT THE WINDOW AND NOTICED MY CAR SKU4373G WAS INVOLVED IN A CHAIN COLLISION. SHE INFORMED MY DAD AND MY DAD CONFIRMED THAT MY CAR WAS INVOLVED. MY DAD WENT DOWN TO TAKE A LOOK AND REALISED THAT CAR SLG9487R HAS BANGED ONTO MOTORCYCLE FBF886E WHICH THEN BANGED INTO MY CAR SKU4373G. THE IMPACT FORCED MY CAR SKU4373G TO HIT ANOTHER STATIONARY CAS SGG5845B. REMARKS: VEHICLE SKU4373G, FBF886E, SGG5845B WERE PARKED AT REST BEFORE THE ACCIDENT.

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 FBF886E

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category MOTORCYCLE

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

SLG9487R

Vehicle Make/Model/Colour

Details Of Properties

Vohiolo Catagoni

PRIVATE CAR

Vehicle Category Name of Driver

NASIR BIN MOHD

NRIC/Passport Number

S1671191H

Contact Number

81864925

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number

SGG5845B

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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- 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 :
 - 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

Sign Committee of the state of the

Date & Time:

3/5/19

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

A. SKU 43736

B. FBF 8 86 E

C. SLG 9 487R

D. SGG 5 8 45 B

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 08/05/19, my cor SKU 43736 WOT	s parked stationary at the Block 121
BISHAN STREET IS open oir carpark Aroun	d 3 plus in the offernoon, my mum
heard a loud being the looked out the	windows and motived my car SKU 43736
was involved in a chain collision. She in	offermed my dood and my dood confirmed
that my ar was involved the dood we	ent down to take a look and realised
that car 5169487R has benged on	notoraycle FBF 886 E which
then borged into my cast SKU 4373 G	. The impact forced my our SKU4373
to hit another stationary car 5665945	В.
Remarks Vehicle SKU43736 FBF886 Out less before the occide	

DECLARATION

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

TA

Policyholder's Signature
Date & Time: 3/5/19

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

NRIC/FIN No :