

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	18/05/2019 09:11
Date Of Accident	20/04/2019 14:05
Exact Location Of Accident	SENGKANG W RD TURNING RIGHT TWDS SENKANG W WAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLS4816U
Insured/Policyholder	
Name Of Registered Owner	PETRINA LEONG MAE-YEE
NRIC No	S7828777B
Email Address	PETRINA_LEONG@JLTGROUP.COM
Mobile Phone No	(LOCAL) +65-85222240
Alternative Phone No	OFFICE-63336311

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	ATTRAGE
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	B 29027502 QMY
Cover Note Number	

Driver

Name of Driver	PANG KIM CHOO JUNEE@THERESA
NRIC No	S0742501E
Date Of Birth	30/10/1940
Occupation	INDOOR
Date Of Driving Pass	27/12/1967
Driving Experience	51 YEARS AND 3 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90184258
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 513 HOUGANG AVE 10 #11-241
Postcode	530513
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	SIDE SWIPE
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	HOGANG N.P.C
Police Station Address	ROAD: 60 HOUGANG AVE 9 SINGAPORE 538775 , POSTCODE: 538775 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT:T/20190420/2097

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	SHD2363Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

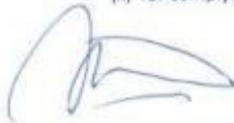
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8. Consent under the Personal Data Protection Act (PDPA)

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:

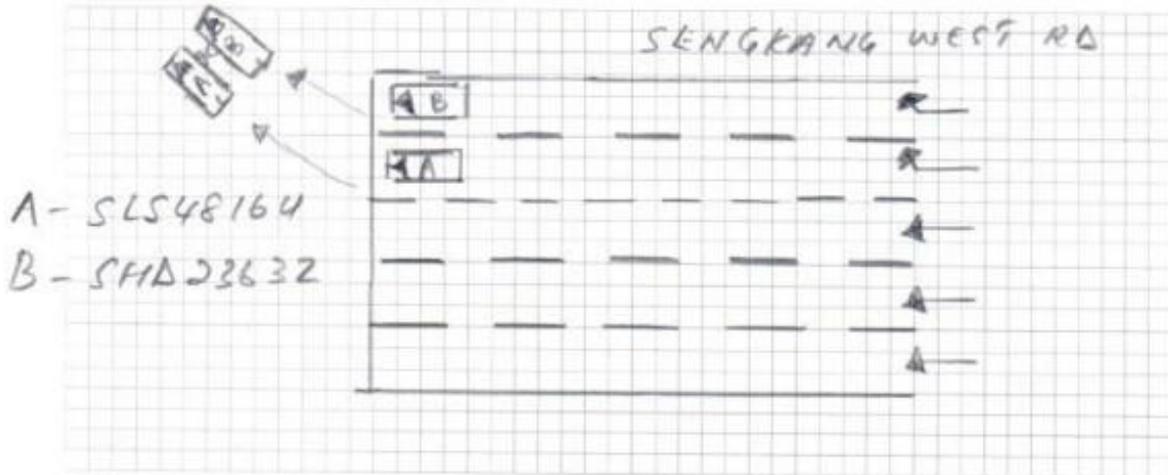
Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

Accident Sketch Plan

SENGKANG
WEST WAY
SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

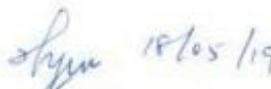
Pls refer to the police report: T/20190420/6097

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.:

Individual Statement



**SINGAPORE
POLICE FORCE**



T/20190420/2097

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

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Report No. T/20190420/2097

CONTINUATION OF REPORT

Driver			
Name	PANG KIM CHOO JUNEE		ID No. S0742501E
Related Vehicle	SLS4816U (Car)		Contact No. 90184258
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the 20/04/2019 at about 1405hrs, I was driving my vehicle - One Mitsubishi Attrage (Registration plate Number: SLS4816U) along Sengkang West Road. I had wanted to make a right turn towards Sengkang West Way. As I was turning right, my vehicle's side mirror (right-side) had slightly grazed against the left side mirror of the vehicle on my left - One Honda Prime taxi (Registration Plate Number: SHD2363Z). I wish to state that there was a slight paint damage to my vehicle. There was slight scratch on the other vehicle which is not deep.

Subsequently, I parked to one side and spoke to the other driver (no particulars available) who demanded that I call his taxi company to explain that my side mirror grazed against his side mirror. I tried calling the taxi company. however, there was no answer. The taxi driver informed that he will inform his taxi company who will liaise with my insurance company. Subsequently, both of us got back into our respective vehicles and went off.

I wish to state that nobody got injured as a result of the accident. There is no CCTV in my vehicle. I am not sure if the other vehicle had any in-vehicle CCTV. I am not sure whether there is any CCTV at the accident location which might secure footage of the accident.

I am lodging this police report for my record purpose should my insurance company require it.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T120190420/2087

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 8 SINGAPORE 538775
Tel No. 1800-4890899

2 of 3

Report No. T120190420/2087

CONTINUATION OF REPORT

Driver			
Name	PANG KIM CHOO JUNEE		ID No. S0742501E
Related Vehicle	SL54816U (Car)		Contact No. 90184258
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the 20/04/2018 at about 1405hrs, I was driving my vehicle - One Mitsubishi Attrage (Registration plate Number: SL54816U) along Sengkang West Road. I had wanted to make a right turn towards Sengkang West Way. As I was turning right, my vehicle's side mirror (right-side) had slightly grazed against the left side mirror of the vehicle on my left - One Honda Prime taxi (Registration Plate Number: SHD2363Z). I wish to state that there was a slight paint damage to my vehicle. There was slight scratch on the other vehicle which is not deep.

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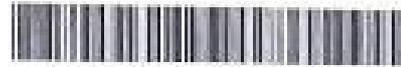
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Police Report



SINGAPORE
POLICE FORCE



T/2019/420/2097

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No. 1800-4890899

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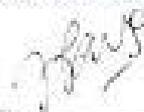
Report No. T/2019/420/2097

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference

Signature Of Officer Recording The Report: F / Sgt 2 MOHAMAD ZULHIZWAN AQMA BIN MOHD ZULKEFLEE	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 20/04/2019 16:51
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp  Singapore Police Force	

Identification Card

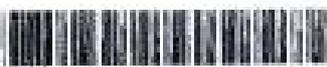
REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0742501E



PANG KIM CHOO JUNE
@THERESA

NAME
DANCE
Date of birth 02-10-1994 F
Country of Birth SINGAPORE

0000100



IDENTITY CARD NO. S0742501E

Date of birth 02-10-1994

Address
APT BLK 513 HOUDAWS AVENUE 10, #11-301
SINGAPORE 500513
NRIC No: S0742501E Date: 03/03/2010 No: 02112642

Driving License

REPUBLIC OF SINGAPORE DRIVING LICENCE

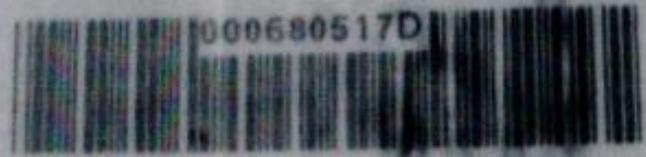


License Number S07A2501E

Name
PANG KIM GHOO JUNEE

Birth Date: 30 Oct 1946

Issue Date: 24 Jul 2003



Driving License

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

Class 3

Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE

27 Dec 1967

NP 425A

