

Date of Accident : 25/5/19 Accident Time: 19.20hrs (24-HR-Format)  
Accident Place : Along PIE towards Tuas  
Vehicle No. (Car Plate No.) : SFW 7788 Make/Model: BMW  
Insurance Company : Budget Direct Policy No.: \_\_\_\_\_  
Owner or Company Name /IC No. : ong See Kiong / 50683681  
Owner or Company Contact No. : \_\_\_\_\_ Owner's Hp 90051232 Company Tel \_\_\_\_\_  
DRIVER'S Name / IC No. : Ooi Yong Yew Elvis / 582299806  
DRIVER'S Date Of Birth : 15/9/1982 DRIVER'S License Pass Date 21/10/2014  
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: \_\_\_\_\_  
DRIVER'S Address : Blk 242 Jishun Ring Road #08-1132  
DRIVER'S Contact No./ Alt No. : 1) \_\_\_\_\_ 2) 5760242  
DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)  
Email Address : \_\_\_\_\_  
Weather & Road Surface : 2 CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET  
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance  
Number of Passengers (Including Driver): 1 Driver

Was there any video Captured by car camera: YES \ NO  
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose  
Any Injury (If YES, Pls state): NO

**Other Party Driver's Particular (if any)**

|                        |                      |                        |                   |
|------------------------|----------------------|------------------------|-------------------|
| Vehicle No:            | <u>S5F 95922 AXA</u> | Vehicle No:            | <u>SM D 9508T</u> |
| Vehicle Make/Model:    | _____                | Vehicle Make/Model:    | _____             |
| Name Driver:           | _____                | Name Driver:           | _____             |
| IC No. Driver/Contact: | _____                | IC No. Driver/Contact: | _____             |

\* NEW - Passenger's name & gender:

## SKETCH PLAN

### 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. The 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 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.:



A - SFW778Y  
B - SJF9592Z  
C - SMD9508T

on the stated date and time, I was driving along  
PIE towards TNAS. I slow down because in front  
of the vehicle stop. Suddenly vehicle B hit on my  
rear portion. There were 3 cars involved in an  
accident.

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

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

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S8229980G



Name

OOI YONG YEW ELVIS  
(WANG YONGYAO ELVIS)

王 勇 耀

Race

CHINESE

Date of birth

15-09-1982

Country/Place of birth

SINGAPORE

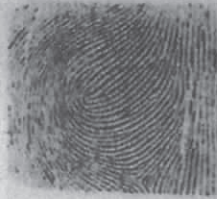
Sex

M

5745231



NRIC No. S8229980G



Date of issue

03-05-2017

Address

APT BLK 242 YISHUN RING ROAD  
#08-1132  
SINGAPORE 760242