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 <u>truthful and accurate</u> 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

aforesaid.			
	ACCIDENT STATEMENT		
Date Of Report	10/06/2019 16:09		
Date Of Accident	09/06/2019 08:30		
Exact Location Of Accident	UPP PAYA LEBAR RD TOWARDS UPP SERANGOON VIADUCT		
Country/State of Loss	SINGAPORE		
	DETAILS OF OWN VEHICLE		
Vehicle Registration Number	SGG3306D		
Insured/Policyholder			
Name Of Registered Owner	QUAH SOON YEE BELINDA		
NRIC No	S7419928C		
Email Address	ABYSSQUAH@GMAIL.COM		
Mobile Phone No	(LOCAL) +65-81261722		
Alternative Phone No	OTHERS-81261722		
Vehicle Particulars			
Manufacturer	NISSAN		
Model	SUNNY-1.6 EX (M)		
Exact Purpose for which vehicle was being used at time of accident			
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	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD		
Type Of Coverage	COMPREHENSIVE		
Fleet Policy	NO		
Policy Number	MT/00239250/03		
Cover Note Number			
Driver			

Driver

Name of Driver QUAH SOON YEE BELINDA

NRIC No S7419928C

Date Of Birth 22/06/1974

Occupation INDOOR

Date Of Driving Pass 22/04/1996

Driving Experience 23 YEARS AND 1 MONTH

Gender FEMALE

Mobile Number (LOCAL) +65-81261722

Fax Number

Contact Number OTHERS-81261722

EMail Address ABYSSQUAH@GMAIL.COM

BLK 372 HOUGANG STREET 31 #14-51 Address

SINGAPORE

Postcode 530372

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

COLLISION - HEAD TO REAR Type Of Accident

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?

Was any injured conveyed to hospital by

ambulance?

NO

NO

NO

YES 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) Passenger 1

2

NAME: : WINNIE QUAH

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?

If Yes, against whom?

NO

Circumstances of Accident

REFER TO THE ATTACH STATEMENT RECORDED BY PEI WEN - PROGRESSIVE CAR CARE PTE LTD TEL 6741 5336

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 **SLU7290E**

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR CHIA YUEN CHE Name of Driver NRIC/Passport Number S7825754G **Contact Number** 97828549

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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- 5. Any false reporting may be referred to the Police for investigation.
- 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.
- 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:
 - 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

NRIC/FIN No.:

Sketch Plan #2

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		3	1	Vehicle Motorcycle
SCRIBE CIRCUMSTANCES OF	THE ACCIDENT			
on 9 June 2019,	8-30 angrox	8-30am		
			/	
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traffic for main	baffic at upper	~ Camadan b	raduct to	nove out
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and the feet	great lay	d to	back of	tur.
My car was stat	tionery at this	t time:		
CLARATION				
Ve declare the foregoing particular use be advised that your insurer may have			olicy must be made within	the stipulated timeframe
				MAD
n the day of occurrence. Kindly check you				
Sele			//	NUO
in the day of occurrence. Kindly check you Sub- licyholder's Signature te & Time:	Driver's Signature (If driver is not the polic		Reporting Centre Pers	dnnel's Signature

DRIVER NRIC & LICENSE Pg. 1



REPUBLIC OF SINGAPORE IDENTITY CARD NO. S7419928C





Name

QUAH SOON YEE BELINDA

Race
CHINESE
Date of birth Sex
22-06-1974 F
Country of birth
SINGAPORE





















