

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	17/06/2019 17:47
Date Of Accident	12/06/2019 15:30
Exact Location Of Accident	WHEELLOCK PLACE OPEN CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGT1985M
Insured/Policyholder	
Name Of Registered Owner	GOH CHOR HIAP
NRIC No	S0279601E
Email Address	SEECHIM2012@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97113818
Alternative Phone No	OTHERS-64699944

Vehicle Particulars

Manufacturer	BMW
Model	116D
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VPA/P1763553
Cover Note Number	

Driver

Name of Driver	GOH CHOR HIAP
NRIC No	S0279601E
Date Of Birth	17/12/1933
Occupation	INDOOR
Date Of Driving Pass	03/10/1962
Driving Experience	56 YEARS AND 8 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97113818
Fax Number	
Contact Number	OTHERS-64699944
Email Address	SEECHIM2012@GMAIL.COM

Address	23 VICTORIA PARK ROAD
Postcode	266502
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	COLLIDED INTO PARKED VEHICLE
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	6
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

On 12/06/2019, I was driving my car SGT1985M to park at Wheelock Place Open Carpark. As I was about to enter the carpark, my car surged forward. It hit the entrance barrier followed by a motorcycle. It continued to surge forward hit against the first and second cars' bonnets and came to a stop on the third and fourth cars' bonnets. My car left side was on the ground and my car right side was on the bonnets. I horned for help and saw slight smoke coming out from the front. Some passerby came to assist me and told me to switch off the engine. Thank god I was unhurt and was held by the seat belt. Four SCDF personnel helped me out from the driver's side after SCDF ambulance and police came.

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	FBP5777B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	MUHAMAD OFFILAH BIN ABDUL RASHID
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 SLB4145L
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)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SKQ9G
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)

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number SGS2024K
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)

DETAILS OF OTHER VEHICLE PROPERTY 5

Vehicle Registration Number SLA5554M
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

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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:

17th June 2019

Driver's Signature

(If driver is not the policyholder)

Date & Time:

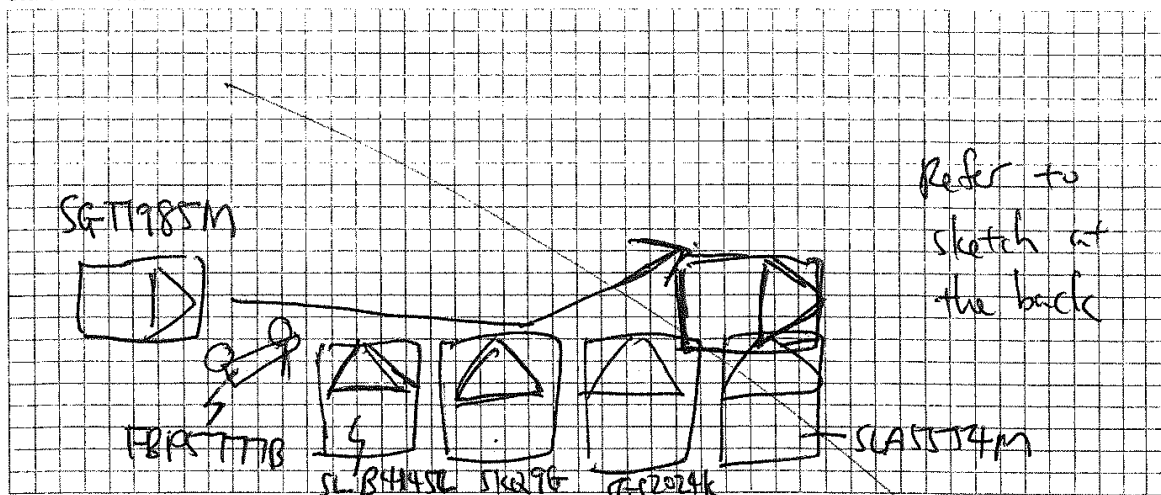


Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 12/6/19 I was driving my car to park at the wheellock Place Open car park. As I was about to ~~enter the~~ enter into the car park entrance, my car surge forward. My car hit against the ~~motorcycle~~ ^{the barrier followed by} motorcycle. It continue to move forward. My car right side was lifted up, tilted and hit against another four cars which are parked. My car came to a stop between the third and fourth row. Some passerby came to assist me and told me to stop my car engine. Shortly police and SCDF Ambulance came to assist me.

top of the barrier

SG-T1985M
On 12/6/19 I was driving my car to park at Wheellock Place Open car park. As I was about to enter the car park, my car surged forward. It hit the entrance barrier followed by a motorcycle. It continued to surge ~~move forward and my car right side was tilted up~~, hit against the first and second cars' bonnets and came to a stop on the third and fourth cars' bonnets. My car left side was on the ground and my right side was on the bonnets. Some passerby came to assist me and told me to switch off ~~the~~ engine. ~~Shortly police and SCDF ambulance came to assist me out from the car.~~ ^{I was held by the seat belt and} SCDF staff helped me out from the driver's side after SCDF ambulance and police came.

I then for help and saw slight smoke coming out from front.

DECLARATION

We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Date & Time:

Mon. 17th June

2019

16.35 Hours

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

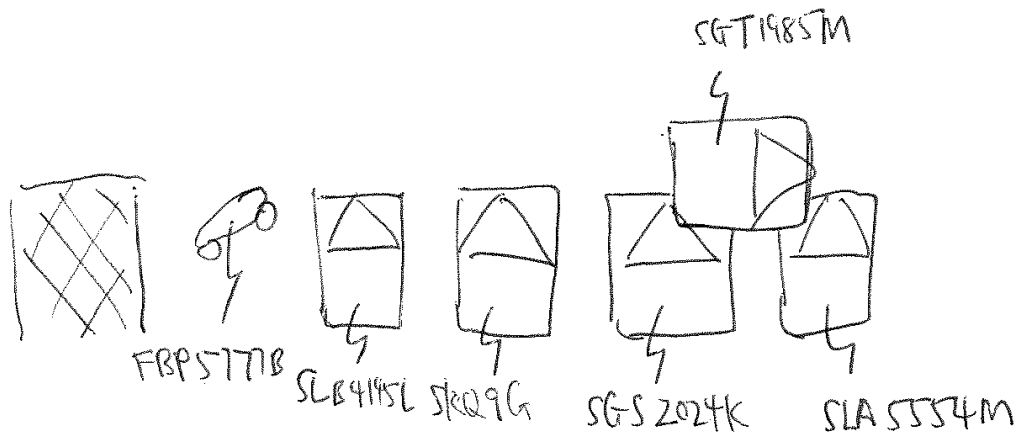
Name:

NRIC/FIN No.:

[Signature]

Keith Ho (Chi Yung)

Wheel/Place
lock Open Carpark



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



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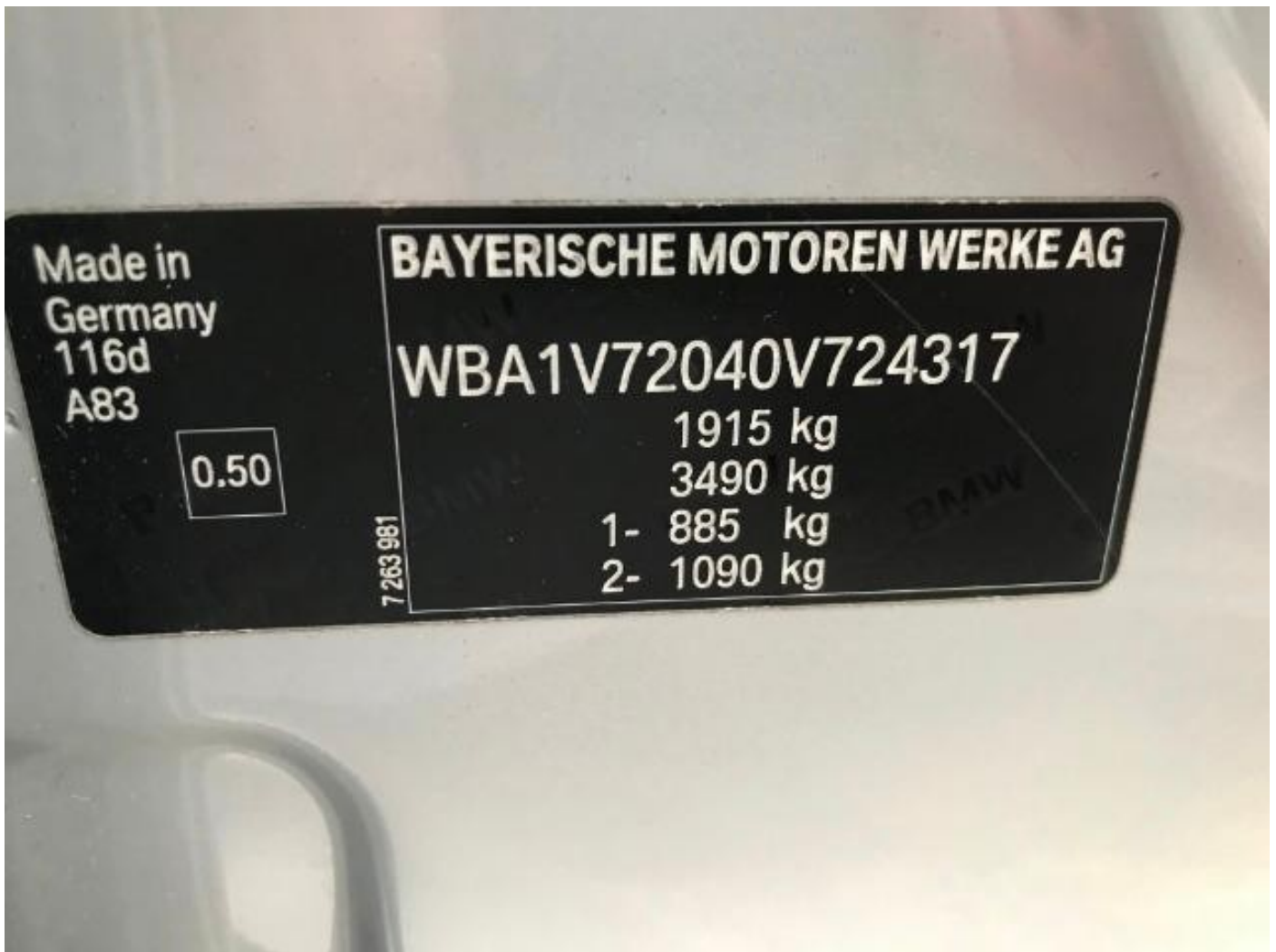


Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo

