

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	18/06/2019 10:45
Date Of Accident	17/06/2019 16:05
Exact Location Of Accident	ALONG WOODLANDS AVE 12
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLE7778A
Insured/Policyholder	
Name Of Registered Owner	TAN BOON KHUNG
NRIC No	S1510190C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96738613
Alternative Phone No	OFFICE-96738613

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	GLC250
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3004911900
Cover Note Number	

Driver

Name of Driver	TAN BOON KHUNG
NRIC No	S1510190C
Date Of Birth	01/11/1961
Occupation	INDOOR
Date Of Driving Pass	22/03/1979
Driving Experience	40 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96738613
Fax Number	
Contact Number	OFFICE-96738613
Email Address	NOEMAIL

Address	32 VERDE VIEW
Postcode	688670
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	COLLISION - HEAD TO REAR
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

I WAS SLOWING MY CAR, CAR B (SMK1036D) CANT STOP IN TIME HIT MY CAR REAR PORTION.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMK1036D
Vehicle Make/Model/Colour	MAZDA BLACK
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	AXA INSURANCE PTE LTD
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

Driver's Signature

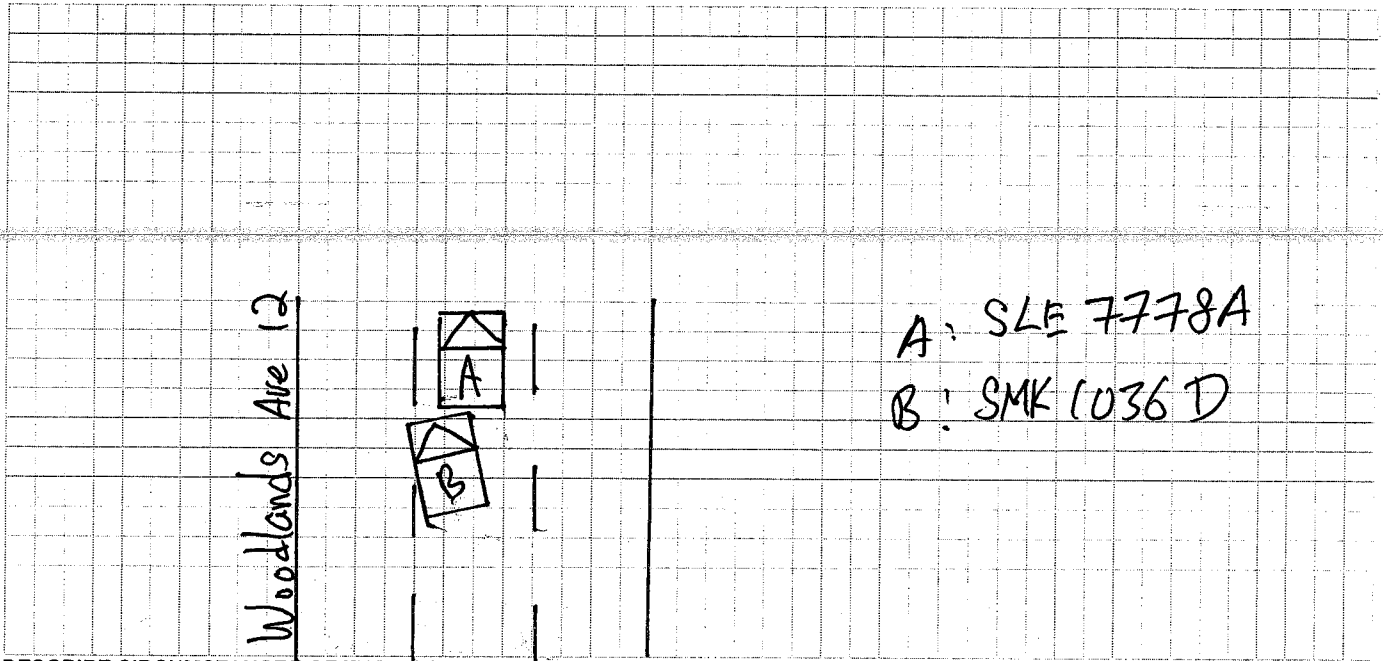
(If driver is not the policyholder)

Date & Time

Go Chee Han
DID : 6771 4336 HP : 9181 7717
Email : cheehan.go@cyclecarrage.com.sg
Cycle & Carriage Industries Pte Ltd
Customer Service Centre - Pandan Loop
Reporting Centre Personnel's

Name:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was slowing my car, car "B" can't stop in time
hit my car rear portion.

DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

Policyholder's Signature
Date & Time

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

Go Chee Han
DID : 6771 4336 HP : 9181 7717
Email : cheehan.go@cyclecarriage.com.sg
Cycle & Carriage Industries Pte Ltd
Customer Service Centre - Pandan Loop
Reporting Centre Personnel's
Name:



Mercedes-Benz

Cycle & Carriage
Industries Pte Limited
Authorised Dealer
Company No. 196400367W
GST Reg No. MR-8500111-X

ESTIMATE FOR SLE7778A

Tan Boon Khung

32 Verde View
Singapore 688670

Mobile: 96738613

Vehicle & Document Information

WIP No **34352**
Reg No/Reg Date **SLE7778A / 27/02/2017**
Date In/Mileage **0**
Chassis No **WDC2533462F178881**
Engine No **27492030881622**
Make/Model **MB/MB GLC 250 4MATIC COUPE (C253)**
Colour/Trim **028 890 Cavansite B/ 041 101 Leather Bla**

Account No	Terms	Date/Time Printed	CSE	Operator			
CSI00001	Cash	18/06/2019/ 17:59	CH	371 / Go Chee Han			
Description of Goods / Services				Qty	Unit Price	Disc%	Amount

Z REQUEST

Customer Request

M BPNSUN

POLICY NO/ACC DATE : DMPCSN3004911900 // 17-6-2019

DRIVE IN/TP VEH NUMBER : 18-6-2019 // SMK1036D - AXA

DATE IN/DATE SURVEY:

BY/AUTHORIZED ON :

A BPILAB

DISASSEMBLE AND REPLACE ATTACHED DAMAGED PARTS & REFINISH.

A BPIRES

RESPRAY REAR BUMPER

A BPILAB

USING XENTRY DIAGNOSTIC TO CHECK ON CONTROL UNIT RESET MEMORY TO IDENTIFICATION STANDARD. NETT

A BPILAB

CHECK REAR LIGHTING SYSTEM AND WATER TEST FOR ANY LEAKAGE. NETT

M REAR BUMPER**M REAR LEFT SIDE BUMPER BRACKET****M LH BASIC MOUNTING FOR BUMPER****M LH TAIL PIPE CHROME COVER****M LEFT TAIL PIPE BRACKET****M REAR BOTTOM TRIM BUMPER****M REAR BUMPER CHROME MOULDING****M DISTANCE SENSOR****M SPACER RING****M LEFT LOWER BRACKET BUMPER****M LEFT REFLECTOR LENSE****M LOWER LEFT BRACKET, BUMPER****M IMPACT ABSORBER****M LEFT BRACKET BUMPER****M ELECTRICAL WIRING HARNESS**

Go Chee Han
DID : 6771 4336 HP : 9181 7717
Email : cheehan.go@cyclecarrriage.com.sg
Cycle & Carriage Industries Pte Ltd
Customer Service Centre - Pandan Loop

Confirmed & accepted by

Nett 6,303.73
7% GST on 6303.73 441.26

Authorized signatory and company stamp

Total Payable 6,744.99

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required.

Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.



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