

## 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	21/06/2019 14:29
Date Of Accident	20/06/2019 20:30
Exact Location Of Accident	AT THE EXIT OF BCA ACADEMY
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF5841B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SUPERSONIC MAINTENANCE SERVICES PTE LTD
Co Reg No	198401352W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-97611160

### Vehicle Particulars

Manufacturer	MITSUBISHI
Model	CANTER FEA01BR1SDEB
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5077575702-03
Cover Note Number	

### Driver

Name of Driver	LIM BENG HOCK
NRIC No	S7701130G
Date Of Birth	13/01/1977
Occupation	OUTDOOR
Date Of Driving Pass	13/04/2013
Driving Experience	6 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97611160
Fax Number	
Contact Number	
EMail Address	AHHOCK2009@HOTMAIL.COM

Address	APT BLK 491 JURONG WEST AVE 1 #10-173
Postcode	64049
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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

REFER TO SKETCH PLAN

#### Attachment(s)

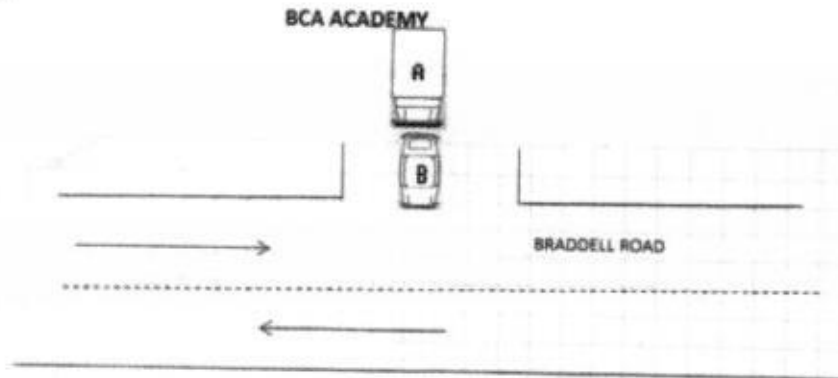
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLS9102M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	96549651
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

# Sketch Plan

## SKETCH PLAN



VEHICLE A: GBF5841B

VEHICLE B: SL59102M

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 20/06/2019, AT AROUND 8.30PM, I WAS AT BCA ACADEMY EXIT GANTRY TOWARDS THE MAIN ROAD OF BRADDELL ROAD.  
THE VEHICLE "B" SL59102M IN FRONT OF ME WAS BLOCKING THE MAIN ROAD TRAFFIC, WHEN I HEARD A VEHICLE ON THE MAIN ROAD HORN  
THE VEHICLE "B" STARTED TO REVERSE WITHOUT CHECKING BEHIND CONDITION. AS A RESULT, VEHICLE "B" HIT ONTO MY VEHICLE FRONT PORTION  
CAUSED DAMAGE.

## REMARKS

REPORTING ONLY	<input type="checkbox"/>
OWN DAMAGED CLAIM	<input type="checkbox"/>
THIRD PARTY CLAIM	<input checked="" type="checkbox"/>

## REMARKS

You had been advised by the workshop that in the event that you wish to claim against your own policy (OD Claim), there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.

## DECLARATION

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



Policyholder's Signature  
Date & Time

*[Signature]*

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

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

## Common Statement

### 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.:

## Enquire Transfer Fee

### Vehicle Details

Vehicle No.:	GBF5841B
Vehicle Type:	B31 - Goods (Open) Lorry (Metal Body)/Pickup
Vehicle Attachment 1:	With Hood
Vehicle Scheme:	Normal
Vehicle Make:	MITSUBISHI
Vehicle Model:	CANTER FEA01BR1SDEB (CBU)
Chassis No.:	FEA01BA20448
Propellant:	Diesel
Engine No.:	4P10C43772
Engine Capacity:	2998 cc
Maximum Power Output:	-
Maximum Laden Weight:	3500 kg
Unladen Weight:	1800 kg
Year Of Manufacture:	2016
Original Registration Date:	23 Dec 2016
Lifespan Expiry Date:	22 Dec 2036
COE Category:	C - Goods Vehicle & Bus
PQP Paid:	\$41,408.00
COE Expiry Date:	22 Dec 2026
Road Tax Expiry Date:	05 Dec 2019
Inspection Due Date:	05 Jun 2020
Intended Transfer Date:	21 Jun 2019
CO2 Emission:	259.00 (g/km)
CEV/VES Rebate Utilised Amount:	-
CO Emission:	-
HC Emission:	-
NOx Emission:	-
PM Emission:	-

Late renewal fee(s) will be imposed if road tax / lay-up has expired. Please use Enquire Road Tax Payable for fee(s) payable.

Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.

### Amount Payable

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee:	25.00	-	25.00
<b>Total Amount Payable:</b>			<b>25.00</b>

You may print this page for reference.

OK

Print