

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	20/07/2019 10:49
Date Of Accident	13/07/2019 18:55
Exact Location Of Accident	B4 JUNC OF CRAWFORD ST & BEACH RD
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJJ8186Z
Insured/Policyholder	
Name Of Registered Owner	JTJ LOGISTICS
Co Reg No	53351279D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-90060356
Vehicle Particulars	
Manufacturer	TOYOTA
Model	COROLLA ALTIS
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5103453957
Cover Note Number	-
Driver	
Name of Driver	TAN CHIU LING (CHEN QIULING)
NRIC No	S7934071E
Date Of Birth	26/10/1979
Occupation	OUTDOOR
Date Of Driving Pass	23/05/2002
Driving Experience	17 YEARS AND 1 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-90060356
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 359 CLEMENTI AVE 2 #06-311
Postcode	120359
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?	
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)	5
Passenger 1	NAME: : UNKNOWN GENDER: : MALE
Passenger 2	NAME: : UNKNOWN GENDER: : MALE
Passenger 3	NAME: : UNKNOWN GENDER: : FEMALE
Passenger 4	NAME: : UNKNOWN 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?	NO
If Yes, against whom?	

Circumstances of Accident

I WAS TRAVELLING ALONG CRAWFORD ST B4 JUNC OF BEACH RD, THE TRAFFIC WAS CONGESTED AND THE EXTREME LEFT LANE AND SECOND LANE FROM THE LEFT WAS BLOCK DUE TO NDP REHEARSAL, ALL VEH FILTERING INTO THIRD LANE FROM THE LEFT, AFTER MY VEH FILTERING INTO THIRD LANE FROM THE LEFT, SUDDENLY I FELT AN IMPACT FROM BEHIND, AFTER THE INCIDENT, I ALIGHTED FROM MY VEH AND REALIZED VEH B(BEARING NO SLQ6795T) FROM BEHIND COLLIDED ONTO MY VEH 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	SLQ6795T
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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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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.:

Beach Rd

Crawford St

A= 5JJ 81863

B= 5LQ 6795

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

DECLARATION

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

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MNA119094927 Vehicle Registration No: SJJ8186Z
Name(as shown in NRIC) : JTJ LOGISTICS NRIC/FIN/Passport No : 53351279D
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore()
Contact (Tel) : _____ Mobile No. : 90060356
Email Address : _____
Date of Accident : 13/07/2019 Time of Accident : 18:55
Place of Accident : B4 JUNC OF CRAWFORD ST & BEACH RD
Insurance Company: NTUC

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

AMEND REVERT FROM THIRD PARTY TO REPORTING ONLY

Policyholder / Driver's Signature
Date:



Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Date: 2017/11/9.

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7934071E



Name
TAN CHIU LING
(CHEN QIULING)
陈秋铃

Race
CHINESE

Date of birth
26-10-1979

Sex
F

Country of birth
SINGAPORE

For LKK/NAC Use Only

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S7934071E

Name
TAN CHIU LING
(CHEN QIULING)

Birth Date 26 Oct 1979

Issue Date 28 May 2003

000521149K

Land Transport Authority



VOCATIONAL LICENCE

Licence No S7934071E

Name TAN CHIU LING

Issue Date 7/10/2014

Please visit www.lta.gov.sg to check the status of this vocational licence

For LKK/NAC Use Only

4705287



NRIC No. S7934071E



Date of issue
08-04-2011

Address
APT BLK 359 CLEMENTI AVENUE 2
#06-311
SINGAPORE 120359

For LKK/NAC Use Only

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE 23 May 2002

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

Licence No. S7934071E

NP 428A

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
02	TAXI VL	23/07/2014

For LKK/NAC Use Only



My Desktop
Notice of Loss

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="13/07/2019 10:36"/>
Vehicle No.(For Motor)	<input type="text" value="SJJ8186Z"/>	Certificate Number	<input type="text"/>

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5103453957		JTJ LOGISTICS	53351279D	GPC	drivo CLASSIC	SJJ8186Z	SJJ8186Z	01/09/2018	31/08/2019

Continue

Claim Handling

Accident MT/1053704

Policy No.	5103453957	Vehicle No.	SJJ8186Z	GST Registration No.
Certificate No.				
Policyholder Name	JTJ LOGISTICS			Policyholder NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading
Contact No.(Mobile)	NA	Contact No.(Office)		Contact No.(Home)
Email Address		Special Remark		eCode
KFK	<input type="radio"/> No <input checked="" type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	10	Private Hire

▼ Accident Details

Report Date	16/07/2019 17:47	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	13/07/2019	Time of Accident hh:mm	18:55	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	ALONG CRAWFORD STREET TWDS BEACH ROAD			

▼ Excess

Own damage Excess	2,000.00	Additional Excess	0	Windscreen Excess
Unnamed Driver Excess		Outside Singapore OD Excess	2,000.00	
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00	

▼ Benefits

▼ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History	16/07/2019 17:49:11 System changed GST Status Verified from No to Yes		

▼ Policyholder Mailing Address

Address 1	BLK 359 #06-311	Address 2	CLEMENTI AVENUE 2	Address 3
Address 4	SINGAPORE 120359	Address Type	Singapore address	Post Code
Unit No.		Related Policy Number	5103494707	

▼ OI Driver Info

Driver Name		Driver Type		Driver DOB
Unnamed driver Name		Driver NRIC		Driving Experience
Register Date of Driver License		Driver Age		Contact No.(Home)
Contact No.(Mobile)		Contact No.(Office)		Address 3
Address 1		Address 2		Post Code
Address 4		Address Type	Foreign address	
Unit No.				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Comp.

Modification History

Claim 002 **New**

Claim Type *	OD-MX	Insured Name	JTJ LOGIS
Contact No.(Mobile)		Contact No. (Home)	
Email Address		DI Vehicle Number	SJJ8186Z
Claim Description	SJJ8186Z / SLQ6795T ON 13 Jul 2019		
Preferred Workshop	0	Insured Liability	Not at Fault
Consent No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Date Registered		GIA report	Received
Report Taken By		Claim Close Date	20/07/2019 15:17
			LIEW SHAN HUI

☒ Print AK letter

Save Submit

Attachment

Accident No. MT/1053704 Claim No. 002
Last Doc. Received ☒ Yes ☐ No Upload Date 20/07/2019 15:18

Path *

[Choose File](#) No file chosen[Choose File](#) No file chosen[Choose File](#) No file chosen[Choose File](#) No file chosen[Choose File](#) No file chosen[Choose File](#) No file chosen[Message Read](#)[Clear](#)[Clear](#)[Clear](#)[Clear](#)[Clear](#)[Clear](#)[Clear](#)

Category *

Confidential

[Please Select](#) NO [Please Select](#) NO [Please Select](#) NO [Please Select](#) NO [Please Select](#) NO [Please Select](#) NO [Please Select](#) NO

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Descr
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 20 Jul 2019 15:18	NRJC/ Driving License	Normal	NRJC/ Driving Li
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 20 Jul 2019 15:18	SAS	Normal	SAS 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 20 Jul 2019 15:18	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 20 Jul 2019 15:18	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 20 Jul 2019 15:18	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 20 Jul 2019 15:18	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 20 Jul 2019 15:18	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 20 Jul 2019 15:18	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 20 Jul 2019 15:18	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 20 Jul 2019 15:18	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 20 Jul 2019 15:18	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 20 Jul 2019 15:18	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 20 Jul 2019 15:18	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 20 Jul 2019 15:18	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 20 Jul 2019 15:18	Photos	Normal	Photos 2

Video List

Uploaded By/Date Folder Date File Name

[Display in New Window](#)[Scan and uploading](#)