





## 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 13:27
Date Of Accident	19/07/2019 18:10
Exact Location Of Accident	INFRONT BLK 11 UPPER BOON KENG ROAD TRAFFIC JUNC
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKC8667C
<b>Insured/Policyholder</b>	
Name Of Registered Owner	DARREN NG WEE BOON
NRIC No	S9334506A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-86113736
Alternative Phone No	OFFICE-86113736

### Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	SCIROCCO
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	THIRD PARTY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5106596575
Cover Note Number	-

### Driver

Name of Driver	DARREN NG WEE BOON
NRIC No	S9334506A
Date Of Birth	22/09/1993
Occupation	OUTDOOR
Date Of Driving Pass	04/10/2013
Driving Experience	5 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86113736
Fax Number	
Contact Number	OFFICE-86113736
EMail Address	NOEMAIL

Address	BLK 2B UPPER BOON KENG RD #20-690
Postcode	382002
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)	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 STOP AT THE JUNC OF UPPER BOON KENG RD & LOR 1 GEYLANG DUE TO RED LIGHT, ALL OF A SUDDEN, I FELT AN IMPACT FROM BEHIND, AFTER THE INCIDENT, I ALIGHTED FROM MY VEH AND REALIZED VEH B HIT ONTO MY VEH REAR PORTION.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	HAVENT RETRIEVE
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMB89E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	BUS
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	



## SKETCH PLAN

### IMPORTANT NOTICE

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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.



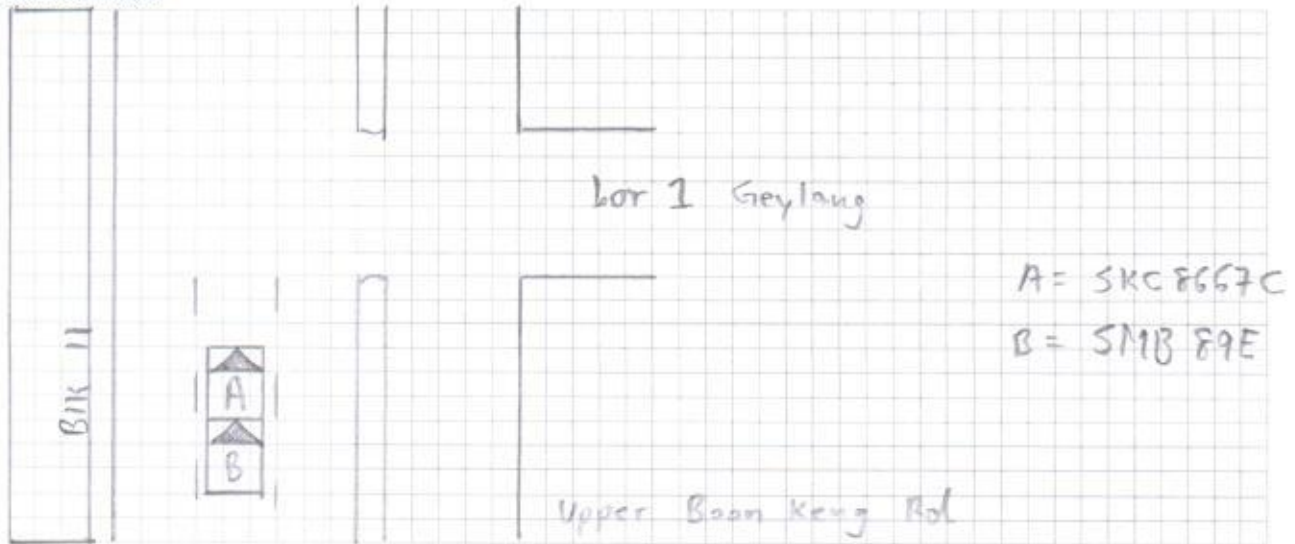
Policyholder's Signature  
Date & Time:

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



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

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to statement

## DECLARATION

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

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.:

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S9334506A

Name: DARREN NG WEE BOON

Birth Date: 22 Sep 1993

Issue Date: 04 Oct 2013

002231356G

For LKK/NAC Use Only

SINGAPORE ARMED FORCES  
IDENTITY CARD

Name: DARREN NG WEE BOON

NRIC No: S9334506A

This card is the property of the Singapore Armed Forces. Any person finding this card is requested to forward it without delay to Central Manpower Base or any Police Station.

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

EFFECTIVE DATE: 04 Oct 2013

Class 3A Motor cars without clutch pedals (Auto) =< 3000kg with =< 7 passengers, exclusive of the driver; and other motor vehicles without clutch pedals =< 2500kg

NP 428A

Licence No: S9334506A

For LKK/NAC Use Only

00000050239482

NRIC No/Colour: S9334506A/ PINK

Race: CHINESE

Date Of Birth: 22/09/1993

Service Status: REGULAR

Address: Blk 2B UPPER BOON KENG ROAD #20-690 SINGAPORE 382002

Blood Group: B (+)

Country Of Birth: SINGAPORE

Military Rank Status: OFFICER

Sex: M



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Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="19/07/2019 13:25"/>
Vehicle No. (For Motor)	<input type="text" value="SKC8667C"/>	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"/>	S106596575		DARREN NG WEE BOON	S9334506A	GPC	drivo CLASSIC	SKC8667C	SKC8667C	24/12/2018	23/12/2019

Continue

Claim Handling

Accident MT/1054287

Policy No.	S106596575	Vehicle No.	SKC8667C	GST Registration No.
Certificate No.				
Policyholder Name	DARREN NG WEE BOON			Policyholder NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading
Contact No.(Mobile)	86113736	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(%)	0	Private Hire

▼ Accident Details

Report Date	20/07/2019 15:24	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	19/07/2019	Time of Accident hh:mm	18:10	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	INFRONT BLK 11 UPPER BOON KENG ROAD TRAFFIC JUNC			

▼ Excess

Own damage Excess	600.00	Additional Excess	0	Windscreen Excess
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	600.00	
Third Party Excess	0.00	Outside Singapore TP Excess	0.00	

▼ Benefits

▼ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

▼ Policyholder Mailing Address

Address 1	BLK 2B #20-690	Address 2	UPPER BOON KENG ROAD	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	20-690	Related Policy Number	S106596575	

▼ OI Driver Info

Driver Name	DARREN NG WEE BOON	Driver Type	Main Driver	
Unnamed driver Name		Driver NRIC	S9334506A	Driver DOB
Register Date of Driver License	04/10/2013	Driver Age	25	Driving Experience
Contact No.(Mobile)	86113736	Contact No.(Office)		Contact No.(Home)
Address 1	BLK 2B #20-690	Address 2	UPPER BOON KENG ROAD	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	20-690			
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		Driver Insurer Comp.

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any Injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No
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Modification History

Claim 001 New

Claim Type *	OD-MX	Insured Name	DARREN NG
Contact No.(Mobile)	86113736	Contact No. (Home)	
Email Address		OI Vehicle Number	SKC8667C
Claim Description	SKC8667C / SMB89E ON 19 Jul 2019		
Preferred Workshop	0	Insured Liability	Not at Fault
Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Date Registered	20/07/2019 15:26	GIA report	Received
Report Taken By	LIEW SHAN HUI	Claim Close Date	
<input checked="" type="checkbox"/> Print AK letter			



