

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	27/06/2019 11:43
Date Of Accident	27/06/2019 08:45
Exact Location Of Accident	SLE (NEE SOON)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP1681B
Insured/Policyholder	
Name Of Registered Owner	KHOO BOO LENG
NRIC No	S1657374D
Email Address	KHOUBL@SINGNET.COM
Mobile Phone No	(LOCAL) +65-96471176
Alternative Phone No	OTHERS-96471176

Vehicle Particulars

Manufacturer	BMW
Model	216D
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD19V05334/VPC2/R01/MX1
Cover Note Number	

Driver

Name of Driver	KHOO BOO LENG
NRIC No	S1657374D
Date Of Birth	03/03/1964
Occupation	INDOOR
Date Of Driving Pass	25/11/2005
Driving Experience	13 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96471176
Fax Number	
Contact Number	OTHERS-96471176
Email Address	KHOUBL@SINGNET.COM

Address	BLK 419 CHOA CHU KANG AVENUE 4 #12-306
Postcode	680419
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	CHAIN COLLISION
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	5
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.	YES
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 ATTACH.

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	SLR2896G
Vehicle Make/Model/Colour	HONDA CIVIC BLUE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHEUNG KWOK SANG ALLEN
NRIC/Passport Number	S7978683G
Contact Number	91292225
Address	BLK 410B FERNVALE ROAD #24-108
Postcode	792410
Insurance Company Name	AVIVA LTD
Nature Of Damage	
No. Of Passenger (Including Driver)	1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLG9191T
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Vehicle Make/Model/Colour	HONDA CIVIC BLACK
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LIM SOON HO
NRIC/Passport Number	S1380813I
Contact Number	91349191
Address	BLK 202 MARSILING DRIVE #14-148
Postcode	730202
Insurance Company Name	
Nature Of Damage	REAR
No. Of Passenger (Including Driver)	1

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SJY1178P
Vehicle Make/Model/Colour	MAZDA RED
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	DERRICK GOH JUN KIAT
NRIC/Passport Number	S9329042I
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	FRONT & REAR
No. Of Passenger (Including Driver)	2
Passenger 1	NAME: : GENDER: :

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number	SFA585C
Vehicle Make/Model/Colour	HYUNDAI GREY
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SOH KOH PENG DESMOND
NRIC/Passport Number	S7333160I
Contact Number	97691820
Address	BLK 315C ANCHORVALE ROAD #06-186
Postcode	543315
Insurance Company Name	
Nature Of Damage	FRONT & REAR
No. Of Passenger (Including Driver)	


SKETCH PLAN

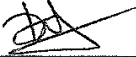
IMPORTANT NOTICE

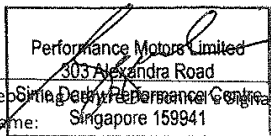
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

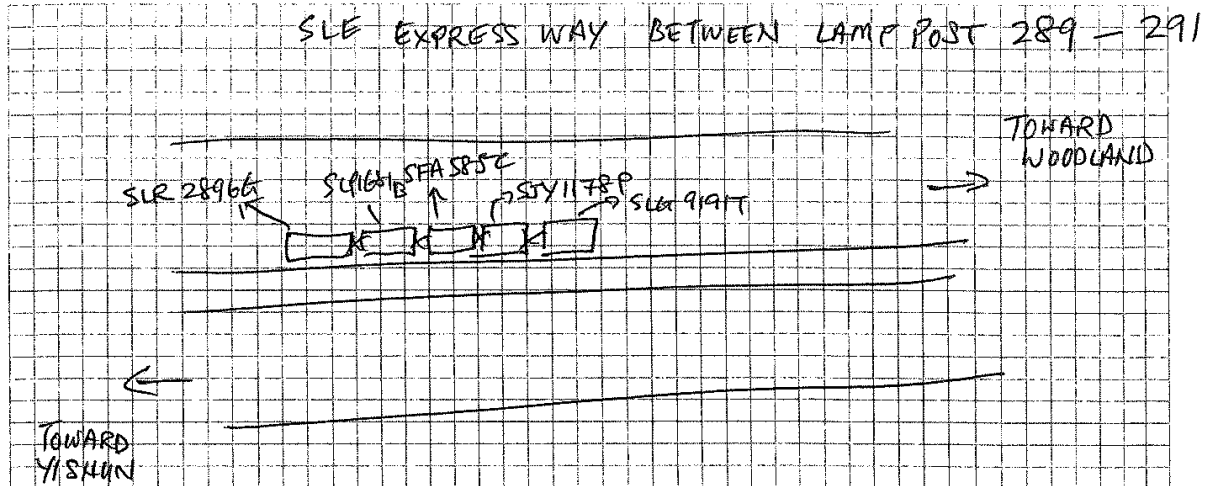
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "**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:


Performance Motors Limited
303 Alexandra Road
Rep. Singapore Performance Centre
Name: Singapore 159941
NRIC/FIN No.:

SKETCH PLAN





DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

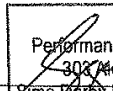
Driving along right lane toward Woodland on the SLE highway, kept a distance and cruising when saw front car SFA 585C break and heard the impact hitting the car in front. Managed to break and stop behind SFA 585C, but the back car SLR 2896G was too close and late to break hitting into my car pushing it to hit SFA 585C.

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:


Performance Motors Limited
302 Alexandra Road
Singapore 159941
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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