

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	17/09/2019 15:29
Date Of Accident	06/07/2019 16:30
Exact Location Of Accident	SLE (TPE) BEFORE WOODLANDS AVE 12 EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBA5364M
Insured/Policyholder	
Name Of Registered Owner	L&D INTERIOR CONTRACTOR PTE LTD
Co Reg No	201322575Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90052763
Alternative Phone No	OFFICE-90052763

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA 150 MANUAL
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5108292356
Cover Note Number	

Driver

Name of Driver	VAITHINATHAN VENKATESAN
Passport No/FIN	F8412625W
Date Of Birth	09/06/1976
Occupation	OUTDOOR
Date Of Driving Pass	14/10/2008
Driving Experience	10 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82355850
Fax Number	
Contact Number	OFFICE-82355850
Email Address	NOEMAIL

Address	BLK 930 TAMPINES STREET 91 #09-459
Postcode	520930
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	CHAIN COLLISION
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	3
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

REFER TO STATEMENT. VEHICLE HAS BEEN SOLD.

Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	XD4735G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2

Passenger 1

NAME: :
GENDER: :

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration NumberSKV6667R

Vehicle Make/Model/Colour

Details Of Properties

Vehicle CategoryPRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

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.:

Accident Sketch Plan

SKETCH PLAN

A: 15A536UM
B: 154735G
C: 151V667R

154735G

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Antennas.

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.:

Accident Sketch Plan

ON STATED DATE AND TIME, I WAS TRAVELLING ALONG THE STATED VENUE. SUDDENLY VEHICLE B JAMMED BRAKE. I BRAKE MY VEHICLE HOWEVER MY VEHICLE SKIDDED TO THE FRONT AS ROAD SURFACE WAS WET. AS A RESULT, MY VEHICLE HIT ONTO VEHICLE B REAR PORTION. THERE WERE 3 VEHICLES INVOLVED IN THIS ACCIDENT.

Others

Enquire Transaction History

Transaction History Details

Log Date/Time:	13 Jul 2019 / 22:38:26	Receipt No.:	STDG3-00000-190713-000263
Asset Type:	Vehicle	Transaction Amount:	\$25.00
Asset ID:	GBA5364M	Channel:	AA Counterless - U E MOTOR
Transaction Type:	05.17.2 Temporary Transfer (AA)	Business Transaction Reference No.:	20190713132443623260
User ID:	AAN59006 - NG SENG HUAT		

Current Vehicle No.:	GBA5364M
Previous Vehicle No.:	GBA5364M
IU Label No.:	1043247634
First Registration Date:	23 Aug 2007
Original Registration Date:	23 Aug 2007
Previous Effective Ownership Date/Time:	06 Apr 2019 10:21:19
Current Effective Ownership Date/Time:	13 Jul 2019 22:38:26
Vehicle Type:	831 - Goods (Open) Lorry (Metal Body)/Pickup
Vehicle Scheme:	Normal
Actual ARF paid:	-
Vehicle Model:	DYNA 150 MANUAL
Engine No.:	1KD1662930
Motor No.:	-
Trailer Chassis No.:	-
Passenger Capacity:	1
Engine Capacity:	2982
Power Rating:	-
Unladen Weight:	1800
Maximum Laden Weight:	3500
Manufacturing Year:	2007
Open Market Value:	34,285.00
Minimum PARF Benefit:	0.00
Temporary Transfer Start Date:	13 Jul 2019
Temporary Transfer End Date:	12 Oct 2019
Maximum Temporary Ownership Period:	12 months
No. of Transfer:	3
COE No.:	20070801010001130
COE Bid Category:	C - Goods Vehicle & Bus
Vehicle Make:	TOYOTA
Propellant:	Diesel
Primary Color:	Silver
Secondary Color:	-
PARF Eligibility:	No
Actual GRYPQ Paid Amount:	17,035.00
Chassis No.:	JTFAT35Y703001194
COE Expiry Date:	31 Jul 2022
Owner ID Type:	Company
Owner ID:	201322573Z
Owner Country/Region:	Singapore
Owner Name:	L&D INTERIOR CONTRACTOR PTE. LTD.
Next Owner ID Type:	Business
Next Owner ID:	43880900M
Next Owner Country/Region:	Singapore
Next Owner Name:	U E MOTOR
Next Owner Registered Address Type:	Private Residential (Condo Apt or House) / Shopping / Office Complexes
Next Owner Registered Block/House No.:	3006
Next Owner Registered Street Name:	UBI ROAD 1
Next Owner Registered Floor No.:	01
Next Owner Registered Unit No.:	334
Next Owner Registered Building Name:	-
Next Owner Registered Postal Code:	408700
Transfer coupled with:	-
Status:	The vehicle has been transferred successfully
Information displayed is correct as at the log date and time.	

Enquire Related Logs OK