

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	27/09/2019 09:32
Date Of Accident	27/09/2019 08:50
Exact Location Of Accident	NORTH BRIDGE ROAD CROSS JUNCTION
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGM8016B
Insured/Policyholder	
Name Of Registered Owner	CHUA BOK CHENG
NRIC No	S7019250J
Email Address	POHYIN1021@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97650229
Alternative Phone No	OFFICE-97650229

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	PASSAT COMFORTLINE 1.8 L TSI 132KW DSG
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	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VA1/ GA78841
Cover Note Number	

Driver

Name of Driver	CHUA BOK CHENG
NRIC No	S7019250J
Date Of Birth	07/06/1970
Occupation	INDOOR
Date Of Driving Pass	23/04/1993
Driving Experience	26 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97650229
Fax Number	
Contact Number	OFFICE-97650229
Email Address	POHYIN1021@GMAIL.COM

Address	57A EDGEFIELD PLAINS #07-24
Postcode	828682
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 - CHANGE/CROSS LANE
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)	2
Passenger 1	NAME: : LEONG POH YIN 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

refer to sketch plan

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	SJJ2297B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHRISTIBE PUEY - KHENG CHEN
NRIC/Passport Number	S2204901A
Contact Number	9776 4923
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

SKETCH PLAN

Refer to the attachment:

Chua Bok Chery

Deslany

27 Sep 2019

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Vehicle No: SGM 8016 B
1. At 08.50 am, vehicle SGM 8016 B right turn at traffic junction from North Bridge Road into Stamford Road 2nd lane (in front of Capital Building).
2. A Mercedes vehicle No: SJS 2297 B collided on SGM 8016 B resulted at tendered and big scratches at the back of the car (next to the rear tyre at right side)
3. At that time, the driver from vehicle SJS 2297 B said sorry to driver of SGM 8016 B that she admitted her mistake by turning her car into wrong lane and hit vehicle SGM 8016 B at the traffic junction in front of Capital Building.
This driver SJS 2297 B told my wife that she should turn into the 1st lane instead of the 2nd lane and hit SGM 8016 B.
4. The driver SJS 2297 B agreed to pay for the damages by claiming against her insurance.
5. Contact - SJS 2297 B - Mrs Christine Puy-Kheng Chen I/C: S 2204901 A
Mobile No: 9776 4923

DECLARATION

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

Deslany

Policyholder's Signature
Date & Time:

Deslany

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

E

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

ATTACHMENT



Chua Bk Cheung

[Signature]

27 Sep 2019

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.



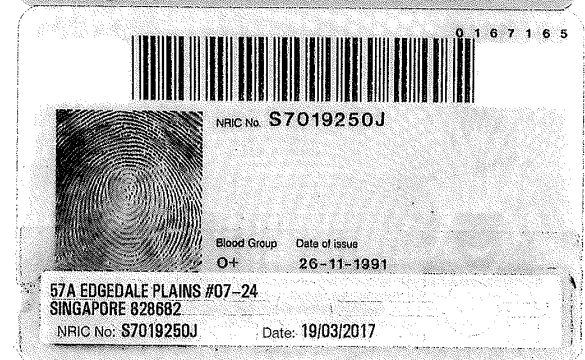
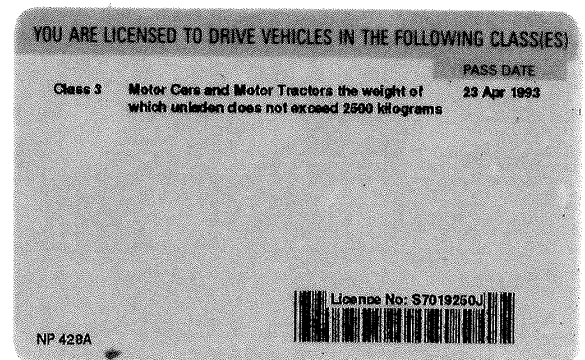
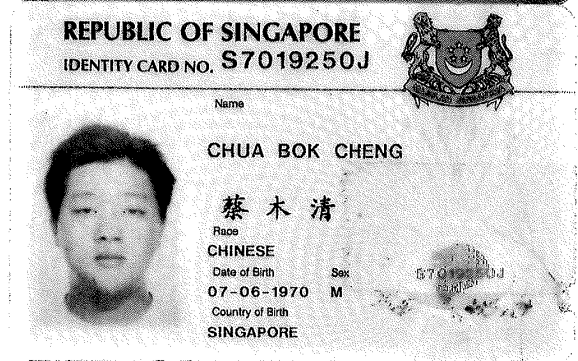
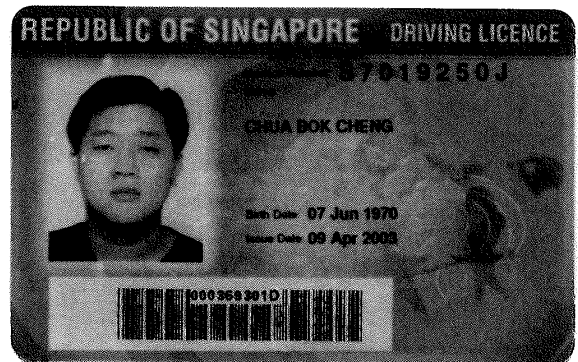
Policyholder's Signature
Date & Time:



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



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



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

