#### 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 witholding 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	03/10/2019 15:14	
Date Of Accident	03/10/2019 09:30	
Exact Location Of Accident	ALONG BRADDELL ROAD TOWARDS BARTLEY ROAD	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLM722P	
Insured/Policyholder		
Name Of Registered Owner	TAN JIN LONG (CHEN JINLONG)	
NRIC No	S8607233E	
Email Address	JLTAN86@GMAIL.COM	
Mobile Phone No	(LOCAL) +65-96423566	
Alternative Phone No	OTHERS-96423566	
Vehicle Particulars		
Manufacturer	HONDA	
Model	VEZEL	
Exact Purpose for which vehicle was being used at time of accident	ON THE WAY BACK HOME	
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	SI19V04632/VPE/R00	
Cover Note Number		
Driver		
Name of Driver	TAN JIN LONG (CHEN JINLONG)	

NRIC No S8607233E Date Of Birth 26/03/1986 Occupation **OUTDOOR** 09/02/2009 **Date Of Driving Pass** 

**Driving Experience** 10 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96423566

Fax Number

OTHERS-96423566 Contact Number **EMail Address** JLTAN86@GMAIL.COM

**BLK 42 CHAI CHEE STREET** Address

#06-58

Postcode 461042

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**

**CHAIN COLLISION** Type Of Accident

Weather Conditions **CLEAR** Road Surface DRY

#### Other Information

ambulance?

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

4

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

NO

YES

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO 1

NO

Number of Passengers (Including Driver)

#### **Details of Police Action**

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

#### **Circumstances of Accident**

#### PLEASE REFER TO SKETCH PLAN

#### Attachment(s)

YES Are accident photos available for attachment? Was there any video captured by Car Camera?

Was there any audio recorded?

YES

NΟ

#### **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number GBH4243Z

Vehicle Make/Model/Colour NISSAN NV350

**Details Of Properties** 

Vehicle Category **COMMERCIAL VEHICLE** 

Name of Driver **CHAI MEOW** S2668034D NRIC/Passport Number **Contact Number** 91113919

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

5

Passenger 1

NAME: :

GENDER: :

Passenger 2

NAME: :

GENDER: :

Passenger 3

NAME: :

GENDER: :

Passenger 4

NAME: :

GENDER:

#### **DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number

**GBH1002Y** 

Vehicle Make/Model/Colour

NISSAN NV200

**Details Of Properties** 

COMMERCIAL VEHICLE

Vehicle Category

Name of Driver

TIAN ZHI RONG JOSEPH

NRIC/Passport Number

S9523927G

Contact Number

93827696

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### **DETAILS OF OTHER VEHICLE PROPERTY 3**

Vehicle Registration Number

SLN5040K

Vehicle Make/Model/Colour

TOYOTA SIENTA

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

LIM MING LENG JOYCE

NRIC/Passport Number

S8324056C

Contact Number

96753435

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Sketch Plan

#### SKETCH PLAN

#### **IMPORTANT NOTICE**

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- 5. Any false reporting may be referred to the Police for investigation.
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- 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:
  - 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: 03/10/2019

10 -50 am

Driver's Signature

(If driver is not the policyholder)

Date & Time:

03/10/2019 10:50am Name:

NRIC/FIN No

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# Sketch Plan #2

SKETCH PLAN		
) SIM TOZP	THE PART OF THE PA	ALONER BRADDELL ROAD
		TOWORDS BARREY ROAD
) GBH 42432	I A	bot or a look long i
GBH 10027	1 18	
) SLN 5040K		
	4:11	
DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT	
Saw infront car	(SLN 5040K) braking	sa I start to brake & stopped.
Then Suddenly	Defind you brake	but bong into my car & my car
bony to the	car infront of my c	Ar-
DECLARATION		
	ulars are true in every respect.	1.1
DECLARATION  //We declare the foregoing particu		10/1/018
/We declare the foregoing particle	Ton	a Blobages
/We declare the foregoing particle		Reporting Centre Personnel's Signature Mod































































