

## 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	07/10/2019 12:42
Date Of Accident	05/10/2019 11:05
Exact Location Of Accident	JALAN BUKIT MERAH AND HOY FATT ROAD JUNCTION
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMM5397A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHAMPION SPORTS PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98279099
Alternative Phone No	OFFICE-63366276

### Vehicle Particulars

Manufacturer	TOYOTA
Model	CAMRY
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 29129868 ATM
Cover Note Number	

### Driver

Name of Driver	MRS NINA SACHDEVA @ NEENA NANDA
NRIC No	S2555856A
Date Of Birth	17/10/1957
Occupation	INDOOR
Date Of Driving Pass	14/01/1988
Driving Experience	31 YEARS AND 8 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98279099
Fax Number	
Contact Number	OFFICE-63366276
Email Address	NOEMAIL

Address	22 SIGLAP ROAD
Postcode	455861
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	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?	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)	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

PLEASE REFER TO SKETCH PLAN

#### 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	GBF3981T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	UNKNOWN
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2
Passenger 1	NAME: :
	GENDER: :

## 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

CHAMPION SPORTS PTE LTD

3 Coleman Street #04-38/39  
Peninsula Shopping Centre  
Singapore 179004  
Tel: (65) 63361059, (65) 63366276  
Email: [champion@sportmel.com.sg](mailto:champion@sportmel.com.sg)

Policyholder's Signature

Date & Time: 7/10/2019

Driver's Signature

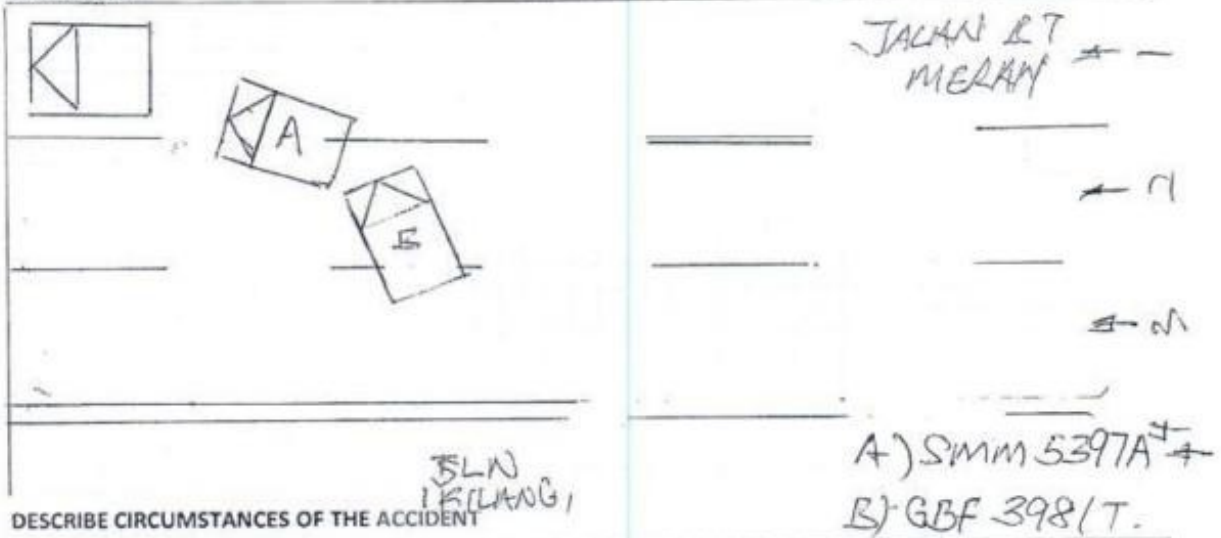
(If driver is not the policyholder)

Reporting Centre Personnel's Signature

Name: Ref 2

# Accident Sketch Plan

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I had turn out from Jalan Kilang onto Jalan Bukit Merah Road. I was behind a stationary car at the junction.

Suddenly I felt an impact from the rear then I alighted to check and realized GBF 398/T had barged onto me.

The person came down to discuss the matter and as I was in a state of shock and panic I was not aware he was not the driver.

We exchanged phone nos and name. He was a Mr Teo Jie Xiang and no. 92333308. I later called to ask for drivers details as my office told me to. He replied OK but later when I called again he didn't respond.

About 3 hours later a no 9668 6088 appeared on my mobile and the caller was Mr Vincent Foo, who claimed to be the owner of the van, how we should settle this matter.

I told him I had to talk to my company before giving any decision.

## DECLARATION

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

*[Signature]* *[Signature]*

CHAMPION SPORTS PTE LTD

3 Coleman Street #04-38/39  
Peninsula Shopping Centre  
Singapore 179304  
Tel: (65) 63381059, (65) 63366276  
Email: champ3@singnet.com.sg

*[Signature]*  
07/10/2018  
*[Signature]*



Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



**Accident Photo**



Accident Photo





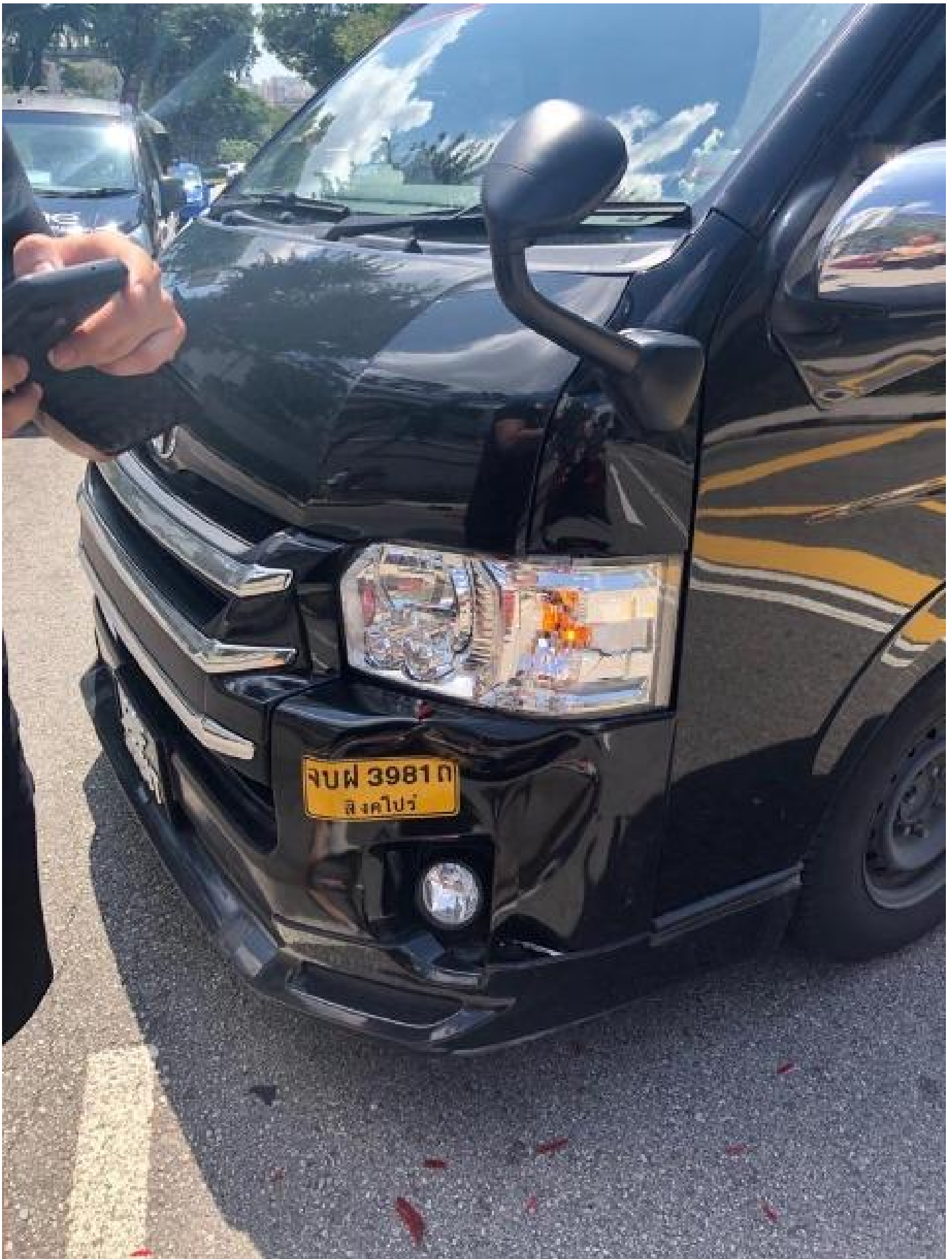
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