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 <u>truthful and accurate</u> 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.

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	ACCIDENT STATEMENT		
Date Of Report	11/10/2019 16:42		
Date Of Accident	11/10/2019 12:55		
Exact Location Of Accident	TURNING OFF TELOK BLANGAH RD TO HABOURFRONT AVE		
Country/State of Loss	SINGAPORE		
DETAILS OF OWN VEHICLE			
Vehicle Registration Number	SGT301T		
Insured/Policyholder			
Name Of Registered Owner	TEO WEE KWAN, EDWARD (ZHANG WEIQUAN,EDWARD)		
NRIC No	S7234151A		
Email Address	EDTEO88@YAHOO.COM		
Mobile Phone No	(LOCAL) +65-97373292		
Alternative Phone No	OFFICE-97373292		
Vehicle Particulars			
Manufacturer	VOLKSWAGEN		
Model	GOLF A7 1.4 CL 92 (DSG) EQP		
Exact Purpose for which vehicle was being used at time of accident	PRIVATE		
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.		
Type Of Coverage	COMPREHENSIVE		
Fleet Policy	NO		
Policy Number	A 28839532 AVW		
Cover Note Number			
Driver			
Name of Driver	TEO WEE KWAN, EDWARD (ZHANG WEIQUAN,EDWARD)		
NRIC No	S7234151A		

NRIC No S7234151A

Date Of Birth 20/09/1972

Occupation INDOOR

Date Of Driving Pass 13/02/1995

Driving Experience 24 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97373292

Fax Number

Contact Number OFFICE-97373292

EMail Address EDTEO88@YAHOO.COM

Address 14 UPPER BOON KENG ROAD #17-959

Postcode 380014

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 - 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)

2

involved in the accident

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

MORE DETAILS PLEASE REFER TO SKETCH PLAN & VIDEO

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 SKR2162C

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver NGAIM YI LING
NRIC/Passport Number S8535046C
Contact Number 96354862

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

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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:

Name:

NRIC/FIN No.:

Reporting Centre Personnel's Signature

11.10.19

Sketch Plan Pg. 2

SKETCH PLAN	Participation of the control of the	**************************************
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5		en e
32	The Company of the Co	
Habeur front Avenue	Habourtront To	iwer.
	Halamartrond	Course
		<u>M</u>
DESCRIBE CIRCUMSTANG	CES OF THE ACCIDENT	
A-1- 15- 10-	. 11	4 7
Planned 100	in on 11 October 2019, 11	was turning off lelok
blangan Kall	headed West) to Habourfron	it Avenue. I stopped my
	pedastrian crossing to allow	
1 Slowed m	y car to a stop (it was	not a sudden stop), but
	ind me (SKR 2162C) also	
but bumpee	I into my car's rear while	was stopped at the
Zelva wossi	ng as the pertestrian was	still crossing the road.
The Court to	By C Clare all a clare	
vehicle (SG	ft of SKR 2162C hit t 73017)	ne vear right of my
Detail of	Driver of SKR 2162C Wer	el as follows
Name: Nga	im Yi Ling	
NRIC: 282.		
Mobile: 963	35 4862	
ECLARATION	articular are true in	4
we declare the foregoing pa	articulars are true in every respect.	Wey
CAMACI		\
Slicyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
ate & Time:	(If driver is not the policyholder) Date & Time:	Name: NRIC/FIN No.:
1.10.19.		=,

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Driving License

Sketch Plan #4



Sketch Plan #3























