#### 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

aforesaid.					
		ACCIDENT STATEMENT			
	Date Of Report	25/10/2019 19:21			
	Date Of Accident	23/10/2019 09:45			
	Exact Location Of Accident	PAYA LEBAR RD TWDS PIE			
	Country/State of Loss	SINGAPORE			
	D	ETAILS OF OWN VEHICLE			
	Vehicle Registration Number	GBB2517D			
	Insured/Policyholder				
Na	Name Of Registered Owner	HENRY DESIGNCENTRE PTE LTD			
	Co Reg No	197300208Z			
	Email Address	NOEMAIL			
	Mobile Phone No				
	Alternative Phone No	OFFICE-67486666			
	Vehicle Particulars				
Ma	Manufacturer	TOYOTA			
	Model	DYNA 150 MANUAL 3SEATER			
	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	MSIG INSURANCE (SINGAPORE) PTE. LTD.			
	Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT			
	Fleet Policy	NO			
	Policy Number	A300188257MKC			
	Cover Note Number				
	Driver				
	Name of Driver	PUAH TECK LONG			

Name of Driver PUAH TECK LONG
NRIC No S8484919G
Date Of Birth 12/05/1984
Occupation OUTDOOR
Date Of Driving Pass 25/07/2012
Driving Experience 7 YEARS AND 2 MONTHS
Gender MALE

Gender WALE

Mobile Number (LOCAL) +65-97801025

Fax Number

Contact Number OFFICE-97801025

EMail Address NOEMAIL

Address BLK 25 TOA PAYOH EAST

#11-128

Postcode 310025

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 SIDE SWIPE
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?

YES

Was any other material or property damaged? I have been approached by unknown person(s) soliciting/offering accident claims assistance.

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

NO 1

**Details of Police Action** 

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name KAMPONG UBI NEIGHBOURHOOD POLICE POST

NO

Police Station Address ROAD: BLK 9 EUNOS CRESCENT #01-2687, POSTCODE: 400009,

country: Singapore

Police Station Contact **TEL NO**: 1800-7479999 - **FAX NO**: 67453410

Was notice of intended Prosecution given?

If Yes, against whom?

. . . . .

### **Circumstances of Accident**

REFER TO POLICE REPORT - T/20191025/2104.

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 SLH7639C

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

#### Accident Sketch Plan

#### SKETCH PLAN

#### **IMPORTANT NOTICE**

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- The 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.
- 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:
  - 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**

ETCH PLAN			
	2) d	A	A: G882517D
	sport pad	8	B- SL476390
	Paya West	715	
SCRIBE CIRCUMSTAN	NCES OF THE	ACCIDENT.	
Refer to phice	31999/2-E-1770938	1 29(91095   2034.	
1			
1 post for	ZV		
CLARATION e declare the foregoing	particulars are t	rue in every respect.	
27		Ally	
cyholder's Signature		ver's Signature driver is not the policyholder)	Reporting Centre Personnel Signature Name:

## Police Report





Police Station Of Origin: Kampong Ubi NPP 9 Eunos Crescent #01-2687 SINGAPORE 400009

1 of 3 Report No. T/20191025/2104

Tel No: 1800-7479999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/10/2019 15:35			Vide Report No.:	Station Diary No.		
Informa	nt's Partic	ulars				
	Informant: ECK LONG		Address: APT BLK 25 TOA PAYOH EAST #11-128 SINGAPORE 310025			
ID Type / ID No.: NRIC NO / S8484919G			Contact No.: Home/Office:	Mobile: 97801025		
Nationality: SINGAPORE CITIZEN			Email:			
Sex: Age: Date of Birth: Male 35 12/05/1984		Type of Informant: Driver				
Race: Chinese			Language: Chinese	Institution / School Name:		
Occupation: FURNITURE SUPERVISOR			Driving Licence Inform Class: 2B,3	ation: Date of Expiry:		

	mation of the Accide	ent		
Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 23/10/2019 09:45	Type of Location: Bend
	ROAD EXPRESSWAY	Paya Lebar, turning left Road Surface:	into Pan Island Expres	sway Road Speed Limit:
Clear		Dry		Wishington Committee Control
	Traine Series.		-	
Traffic Flow: One Way		CONTRACTOR OF THE AREA		Traffic Volume: Heavy

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GBB2517D	Lorry	TOYOTA		White		0
SLH7639C	Car	MAZDA	Mazda 3	Red		0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

#### **Police Report**





Police Station Of Origin: Kampong Ubi NPP 9 Eunos Crescent #01-2687 SINGAPORE 400009 Tel No: 1800-7479999

2 of 3 Report No. T/20191025/2104

CONTINUATION OF REPORT

Driver	EUR DE L'ANDERE	ALTERNATION AND ADDRESS.	DIRECTOR OF THE		TO HELP	
Name	PUAH TECK LONG			ID No		S8484919G
Related Vehicle	GBB2517D (Lorry)			Conta	ct No.	97801025
Hospital/Clinic	NIL			Class Drivin Licend Expin	g	Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc	charge NIL		
No. of Days granted Medical Leave NIL				of Injury NIL		

#### Brief Details.

On 23/10/2019 at about 9.45am, I was driving my company vehicle(GBB2517D, White Toyota) along Paya Lebar Road towards Upper Paya Lebar, turning left into slip road into Pan Island Expressway. After turning left into the slip road, I had exited the slip road safely and went into the merging lane leading to PIE. I had looked into the right mirror and spotted one vehicle(SLH7639C, Red Mazda 3) on my right side at the behind me coming very close to me. As such, I had swerve left away from him and went back into the lane. Subsequently, he had honked at me and drove infront of me and suddenly come to a stop. I then stopped as well. He then claimed that my vehicle had grazed against his vehicle causing scratches on his vehicle. He then informed that he will report the accident. He then took photo of my vehicle and we did not exchange any particular. Subsequently, both of us left. The damage on my vehicle is scratches on vehicle above right rear tyre. I did not suffer any injury, there was no police nor ambulance who attended to us. This is the first time such an incident happened. The weather was clear and the road was dry.

#### **Police Report**





Police Station Of Origin: Kampong Ubi NPP 9 Eunos Crescent #01-2687 SINGAPORE 400009 Tel No: 1800-7479999

3 of 3 Report No. T/20191025/2104

CONTINUATION OF REPORT

## Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Informant:
Date/Time:
25/10/2019 15:35
Classification Of Case:
1





















