

Invoice Preparation Checklist		Am (S)	PAID (S)
1) AR: Accident Reporting (\$30)		30.00	
2) DA: Damage Assessment (\$180) INC (\$40)		20.00	
3) TF: Towing Fee \$40/245			
4) FT: Follow-Through Survey \$120			
5) FT: Follow-Through Survey (Re-survey) \$30			
For claiming against INC Only (wef 10 Jan 2003)			
6) TR: Re-inspection \$75			
7) N1: Idac DA + SMRT Survey \$160			
8) NTUC Additional Services:			
OR:			
*N5: Courtesy Car / Tpt Allowance	\$5		
*N6: Repair Co-ordination	\$10		
*N7: Post Repair Inspection	\$25		
*N8: DV / Collect Excess Coordination	\$5		
TP (N11): TP (Non INC) against INC	\$20		
9) N12: Idac Mobile	\$30		
Invoice dated	Fee Charged		
Invoice dated	Fee Charged		

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	04/11/2019 15:28
Date Of Accident	02/11/2019 11:00
Exact Location Of Accident	HAIG RD BESIDE UNIT 103 THE SERENNO
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLV1508M
Insured/Policyholder	
Name Of Registered Owner	WEE CHENG CHUAN THOMAS
NRIC No	S6803542B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91018311
Alternative Phone No	OFFICE-91018311

Vehicle Particulars

Manufacturer	TOYOTA
Model	CHR
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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 HIRE

Insurance Company

Name of Insurance Company	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	PNCV2018-00000585
Cover Note Number	

Driver

Name of Driver	WEE CHENG CHUAN THOMAS
NRIC No	S6803542B
Date Of Birth	14/01/1968
Occupation	OUTDOOR
Date Of Driving Pass	25/09/1985
Driving Experience	34 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-91018311
Fax Number	
Contact Number	OFFICE-91018311
Email Address	NOEMAIL

Address	25 COWDRAY AVE
Postcode	558026
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	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?	
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

REFER TO STATEMENT.

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	SJP5974D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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. 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.
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:

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

The diagram illustrates a road layout on a grid background. At the top, a road is labeled "THE SERENNO". Below it, a horizontal road is labeled "Haig Road". A vertical road intersects Haig Road. To the right of the intersection, a "Stationary vehicle" is indicated by a box labeled "B1" with a downward arrow. Below "B1" is a box labeled "B2". To the left of the intersection, a box labeled "A2" is shown. To the right of the intersection, a box labeled "A1" is shown. Various arrows indicate directions of travel: a double-headed arrow at the top, a single arrow pointing up, a single arrow pointing down, and a double-headed arrow at the bottom. A box with an "X" is shown on Haig Road to the left of the intersection. A box with an "X" is shown on Haig Road to the right of the intersection. A box with an "X" is shown on Haig Road to the right of the intersection, below "B1". A box with an "X" is shown on Haig Road to the right of the intersection, below "B2". A box with an "X" is shown on Haig Road to the right of the intersection, below "A1". A box with an "X" is shown on Haig Road to the right of the intersection, below "A2".

On 02/11/2019 at about 1100 hrs at along Haig Road beside unit no. 103 (The Serenwo'. I was travelling along Haig Road towards Geylang Road and when coming towards the above mentioned unit no. 103, suddenly a vehicle (B) reversing out from the exit without proper lookout hence collided onto my Right Front Portion of my Vehicle (A) causing damages to my vehicle.

(A) SLV 1508 m
(B) SJP 5974 D

Note: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check your policy for more information.

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

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

Date of Accident : 02/11/2019 Accident Time: 1100 (24-HR-Format)
 Accident Place : Haig Road beside unit 103 'The Serenno'
 Vehicle Reg. No. (Car Plate No.) : SLV 1508W
 Vehicle Make/Model : TOYOTA CHR 1.8
 Insurance Company : FWD Policy No. PNCV2018-00000585
 Owner or Company Name /IC No. : WEE CHENG CHUAN THOMAS / 568035428
 Owner or Company Contact No. : 9101 8311 Owner's Hp _____ Company Tel _____
 DRIVER'S Name / IC No. : WEE CHENG CHUAN THOMAS / 568035428
 DRIVER'S Date Of Birth : 14/01/1968 DRIVER'S License Pass Date 25/09/1985
 Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: OWNER
 DRIVER'S Address : 25 CONDRAY AVENUE S(558026)
 DRIVER'S Contact No./ Alt No. : 1) 9101 8311 2) _____
 DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)
 Email Address : _____
 Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER-RAIN & WET
 Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
 Number of Passengers (Including Driver): 1 person
 Was there any video Captured by car camera: YES \ NO
 Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Other Party Driver's Particular (if any)

(B) Vehicle Reg. No: <u>SJP 5974D</u>	Vehicle Reg. No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver: _____	IC No. Driver: _____
Driver's Contact & Add: _____	Driver's Contact & Add: _____

CERTIFICATE OF INSURANCE

Please call +65-6322-2072 for FWD Emergency Assistance
if Your Car breaks down or is involved in an accident.

All accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

POLICY NUMBER: PNCV2018-00000585

Car plate number : SLV1508M

Coverage start date: 10/12/2018

Coverage end date: 09/12/2019

Who is insured to drive: You and any Authorised Driver

Covered Geographical Area: Singapore, West Malaysia and Southern Thailand

About you (the Policyholder)

Name: WEE CHENG CHUAN THOMAS

NRIC/FIN: S6803542B

Address: 25 Cowdray Avenue Serangoon Garden Estate Singapore 558026

Email: tw5317@gmail.com

Mobile Number: 91018311

Date of Birth: 14/01/1968

Gender: Male

Status: Single

Certificate of Merit: No

claims discount: 10%

Years of driving experience: Three or more

About your car and policy

Car make and model: TOYOTA C-HR 1.8

Year of first registration: 2017

Plan type: Comprehensive

Standard Excess: S\$1,000

NCD protector: Not Applicable

Your preferred workshop: Not Applicable

Overseas Booster: Yes

Premium paid (Inclusive of GST): S\$2,429.82

Finance company: Maybank