

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	05/11/2019 16:13
Date Of Accident	05/11/2019 07:55
Exact Location Of Accident	ALONG CLEMENTI ROAD TOWARDS BUKIT TIMAH
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKG8048T
Insured/Policyholder	
Name Of Registered Owner	CONNALL MCGUCKIAN
NRIC No	G5107269W
Email Address	COYLESARAH@YAHOO.CO.UK
Mobile Phone No	(LOCAL) +65-97550457
Alternative Phone No	OTHERS-97309438

Vehicle Particulars

Manufacturer	HONDA
Model	ODESSEY
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 CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5093997351-02
Cover Note Number	

Driver

Name of Driver	MC GUCKIAN SARAH JANE
NRIC No	G5137395U
Date Of Birth	25/03/1979
Occupation	INDOOR
Date Of Driving Pass	13/07/2012
Driving Experience	7 YEARS AND 3 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97309438
Fax Number	
Contact Number	OTHERS-97550457
Email Address	COYLESARAH@YAHOO.CO.UK

Address	1 PRESTON ROAD
Postcode	109339
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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)	4
Passenger 1	NAME: : PATRICK MCGUCKIAN GENDER: : MALE
Passenger 2	NAME: : HARRY MCGUCKIAN GENDER: : MALE
Passenger 3	NAME: : ELLA MCGUCKIAN GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT MERAH WEST NPC
Police Station Address	ROAD: 500 BUKIT MERAH VIEW #01-01 , POSTCODE: 159682 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO ATTACHMENT AND 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	FBM2381U
Vehicle Make/Model/Colour	HONDA
Details Of Properties	

Vehicle Category	MOTORCYCLE
Name of Driver	TAN GAVELU S/O MUNIAPPAN
NRIC/Passport Number	S1838503A
Contact Number	97522907
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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
 - (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:

05/11/19
2:40pm

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

05/11/2019
Res L. 10043

Accident Sketch Plan



05/11/2019
Res. 11/2019

Small Green
05/11/19
2:40pm

A) 2048T
B) 2381U.

Accident Sketch Plan

SKETCH PLAN

REFER TO ATTACHMENT

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

AS PER STATEMENT

DECLARATION

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

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

05/11/19
2:40pm

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

05/11/2019
Roshan Kumar

Accident Sketch Plan

1. At approximately 7:55am on Tuesday 5th November 2019, I was driving my car (SKG8048T) along Clementi Road in the direction of Bukit Timah.
2. As I approached the junction with Commonwealth Avenue West, the traffic light turned to amber and I stopped the car. It is a major cross junction and I had three children in the car with me.
3. Suddenly, there was a loud bang at the rear of the car. The rear of the car had been hit by another vehicle and the car was pushed forward upon impact.
4. I immediately stepped out of the car and saw that it was a motorcycle. The motorcyclist was getting up from the ground and picking up his motorbike. I asked if he was okay.
5. We checked the car and took the necessary photos. We exchanged particulars and contact details.
6. The motorcyclist moved his bike to the intersection pedestrian crossing. I followed and asked if he was ok and whether we should call the traffic police. He confirmed that there was no need. However, I noticed a small amount of blood around his stomach area. I asked again if he was ok and he confirmed that he was.
7. As my car was now in the yellow box of the intersection and there was nowhere safe that I could pull in, I agreed that I would leave and that we would follow up based on the exchanged details. I informed him that I would be making the necessary reports for insurance purposes.

David Loo
05/11/19 2:40pm

aw 05/11/2019
Resd Loo

POLICE REPORT

Annex D

NOTICE OF REPORTING

This is to confirm that MC GUCKIAN SARAH JANE, NRIC/FIN: G5137395U, has reported to the Police a non-injury traffic accident which occurred at the Cross Junction of Clementi Rd and Commonwealth Ave W towards Upper Bukit Timah on 05/11/2019 at 07.55 am involving the following vehicles:

- 1) SKG8048T
- 2) FBM2381M

2 If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SGT (2) T170129 Howardy

Date: 05/11/2019 Time: 1515hrs

S/D Ref: 40

Police Post/Unit : Bukit Merah West NPC

Original - to be issued to informant
Duplicate - to be submitted to Traffic Police

Bukit Merah West
Neighbourhood Police Centre
No 500 Bukit Merah Road #01-01
Singapore 159682
Tel : 1800-3779999



SARAH MCGUCKIAN

Scanned with CamScanner

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

