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 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.	
	ACCIDENT STATEMENT
Date Of Report	14/11/2019 17:14
Date Of Accident	12/11/2019 19:10
Exact Location Of Accident	CTE (AYE) BEFORE EXIT 11
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLH7998R
Insured/Policyholder	
Name Of Registered Owner	THESEIRA GERARD NOEL RANDALL
NRIC No	S1517731D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98237733
Alternative Phone No	OFFICE-98237733
Vehicle Particulars	
Manufacturer	VOLKSWAGEN
Model	JETTA GP 1.4 TSI 90 A/T TL 1632G5
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A28856099AVW
Cover Note Number	
Driver	

: .		
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Name of Driver TRICIA MAE THESEIRA

NRIC No S9834310E 22/10/1998 Date Of Birth Occupation **INDOOR Date Of Driving Pass** 31/10/2017

Driving Experience 2 YEARS AND 0 MONTHS

Gender **FEMALE**

Mobile Number (LOCAL) +65-96681978

Fax Number

Contact Number OFFICE-96681978

EMail Address NOEMAIL Address BLK 510 PASIR RIS STREET 52

#17-155

Postcode 510510

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured CHILDREN

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE

Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

involved in the accident

2

NO

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.

Number of Passengers (Including Driver)

NO 1

YES

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name PASIR RIS NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 1 PASIR RIS DRIVE 4, POSTCODE: 519457, COUNTRY:

SINGAPORE

Police Station Contact **TEL NO**: 1800-5852999 - **FAX NO**: 65855261

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

REFER TO POLICE REPORT - T/20191113/210.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

VIDEO FOOTAGE WITH DRIVER

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

UNKNOWN

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

No. Of Passenger (Including Driver)

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

SKETCH PLAN		
CTECAYE)	AB	A: SLA7908 R B: Unknown
DESCRIBE CIRCUMSTANCES	S OF THE ACCIDENT	
nefer to place rep	1014-7/2019/113/2105-	
-		
DECLARATION	-	
/We declare the foregoing part	iculars are true in every espect.	
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.:

Police Report





Police Station Of Origin:

Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE

519457

Tel No: 1800-5852999

1 of 3 Report No. T/20191113/2105

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/11/2019 14:52		Made:	Vide Report No.:	Station Diary No.: 62	
Informan	t's Partic	ulars			
Name of Informant: TRICIA MAE THESEIRA			Address: APT BLK 510 PASIR RIS STREET 52 #17-155 SINGAPORE 510510		
ID Type / ID No.: NRIC NO / S9834310E		10E	Contact No.: Home/Office:	Mobile: 96681978	
Nationalit SINGAPO	y: ORE CITIZ	EN	Email:		
Sex: Female	Age: 21	Date of Birth: 22/10/1998	Type of Informant: Driver		
Race: Eurasian			Language: English	Institution / School Name:	
Occupation: CUSTOMER SERVICE OFFICER		ICE OFFICER	Driving Licence Information: Class: 3A	Date of Expiry:	

Type of Accident:	Non-Injury	Drink Drive No	Date/Time of Accident: 12/11/2019 19:10	Type of Location Straight Road
CENTRAL EX	Traveling Toward Ro KPRESSWAY AVENUE 1 TOWARD ANG MO K			Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
One Way		Not Controlled		Heavy
Type of Collision:			Anyone conveyed by ambulance:	
Between Moving Vehicles - Side Swipe - Same Direction			No	

Vehicle No.	Type	Make	Model	Color.	Condition	No of Passenger
SLH7998R	Car	VOLKSWAGO N	Jetta	Black	Slightly Damaged	0
	Car	HYUNDAI	Avante	Silver		0

Police Report





Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457 2 of 3 Report No. T/20191113/2105

Tel No: 1800-5852999

CONTINUATION OF REPORT

Brief Details.

On the 12/11/2019 at about 7:10pm, I was just have just exited Lor Chuan and drove along CTE.. The traffic volume was heavy and I was driving cautiously, finding opportunity to change from the merging lane to the 4th lane. As soon as I assessed that it was safe, I then proceeded to signal right and change lane. As I moved into the 4th lane, the vehicle on my right was simultaneously changed lane from the 3rd to the 4th lane. Suddenly, the vehicle grazed onto my right side of my vehicle. I was shocked and the vehicle that grazed my vehicle went behind me.

I was not sure of what to do and I slowed down and kept checking the vehicle that grazed mine on whether it would stop to the side. I drove slowly and the vehicle appeared not be showing signs of stopping. As soon as we reached the exit of Ang Mo Kio Ave 1, I was still on CTE and the other vehicle took the exit at Ang Mo Kio Ave 1,

I was not injured and when I reach the carpark at my location, I checked that there were scratches in between the driver door and the passenger door on the right and there was a paint peeled off from the same area as well.

I have rear and front dash camera and I have reviewed the footage but I was unable to see the vehicle number of the other party. However, the driver had a P plate, on

Police Report





Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457 Tel No: 1800-5852999

3 of 3 Report No. T/20191113/2105

CONTINUATION OF REPORT

Sketch Plan

NP168

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 Officer Recording The Report: G / Staff Sgt MUHAMMAD AMINULLAH BIN MOHD YUSOF	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 13/11/2019 14:52
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp	



















