SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 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

AND RESIDENCE OF THE PARTY OF T	ACCIDENT STATEMENT
	20/12/2019 17:35
Date Of Accident	19/12/2019 08:30
	HDB HUB CAR PARK TP LOR 6 BASEMENT CARPARK B1
Country/State of Loss	SINGAPORE
	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SGG9082J
Insured/Policyholder	
Name Of Registered Owner	NG CHWEE SENG
Passport No/FIN	SXXXX249H
	NOEMAIL
Mobile Phone No	(LOCAL) +65-96868607
Alternative Phone No	OFFICE-96868607
Vehicle Particulars	
Manufacturer	BMW
Model	5201
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
f No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
nsurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5108481620
Cover Note Number	
Driver	
Name of Driver	TAN BEE ING
NRIC No	SXXXX471A
Date Of Birth	21/09/1949
Occupation	INDOOR
Date Of Driving Pass	16/01/1967
Driving Experience	52 YEARS AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96868607
ax Number	
Contact Number	

NOEMAIL

Address

Postcode

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 - MAJOR/MINOR RD

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

NO

Was any body injured in the Accident?

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

refer attached report.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

NO

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1 SLU7866U

Vehicle Registration Number Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

LEE JUN JIE

NRIC/Passport Number

Contact Number

93874361

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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 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)

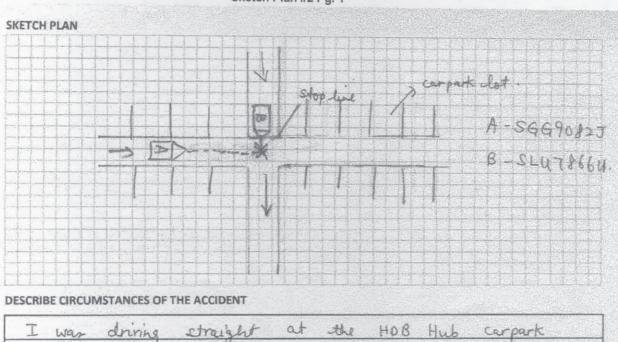
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No ::

Sketch Plan #2 Pg. 1



Sa	rement 1. All of a sudden I felt a great	
14.0	impact from my car's eleft trible. Value	le B
	who drove out from the side, did not.	
	exercise road courtery to stop at the w	
	line. Instead he just drove out speedily	and
	collided and my car's front left side portion	
	and coused damage.	

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: Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	249H
Vehicle No.:	SGG9082J
Vehicle to be Exported:	Yes
Intended Deregistration Date:	20 Dec 2019
Vehicle Make:	B.M.W.
Vehicle Model:	520I 2.0L AT D/AB 2WD 4DR GAS/D NAV
Primary Colour:	Brown
Manufacturing Year:	2012
Engine No.:	A3180144N20B20B
Chassis No.:	WBAXG12010DX48257
Maximum Power Output:	135.0 kW (181 bhp)
Open Market Value:	\$43,451.00
Original Registration Date:	30 Mar 2012
First Registration Date:	30 Mar 2012
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$43,451.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	29 Mar 2022
PARF Rebate Amount: Intended COE Rebate Details	\$26,070.00
COE Expiry Date:	29 Mar 2022
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
QP Paid:	\$78,189.00
COE Rebate Amount:	\$17,781.00
Total Rebate Amount:	\$43,851.00

The information contained herein is correct as at 20 Dec 2019