

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	24/12/2019 11:37
Date Of Accident	23/12/2019 06:45
Exact Location Of Accident	TEW CHEW ST OFF EU TONG SEN RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKV9333J
Insured/Policyholder	
Name Of Registered Owner	CHAN CHICK SENG
NRIC No	S1290304I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97276023
Alternative Phone No	OFFICE-97276023

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 L (A)
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
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	5084033095-03
Cover Note Number	

Driver

Name of Driver	CHAN CHICK SENG
NRIC No	S1290304I
Date Of Birth	22/11/1941
Occupation	INDOOR
Date Of Driving Pass	04/06/1970
Driving Experience	49 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97276023
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	39. SOO CHOW RISE
Postcode	575480
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?	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)	2
Passenger 1	NAME: : WIFE GENDER: : FEMALE

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 SKETCH PLAN

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	SH8816T
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)	

Accident Sketch Plan

SKETCH PLAN

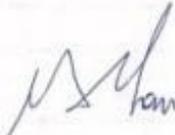
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8. Consent under the Personal Data Protection Act (PDPA)

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.



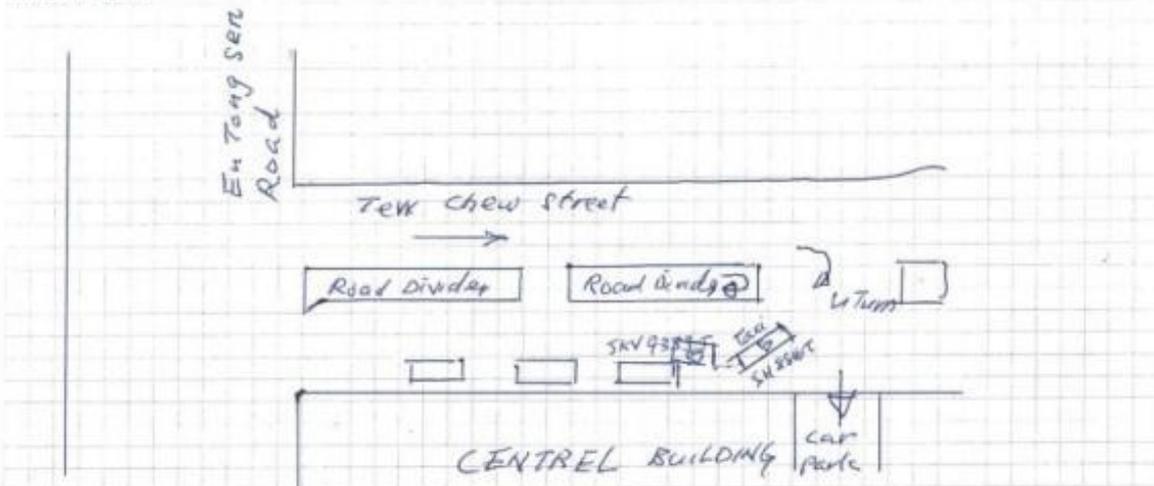
Policyholder's Signature
Date & Time:

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

CITY AUTO PTE LTD
Blk 8 Sin Ming Road
#01-58/60/62 Sin Ming Ind Est
Singapore 575643
Tel: 6453 1235 Fax: 6453 7944
(Claims Section)
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

It was at 6:45PM on 23/11/19, my car stopped along the road side of the Tew Chew Street after making a U turn by the side of Central building (about 6 meters away from the car park entrance). I let my wife to drop off to meet my son over there. Before I drove off, I suddenly felt that the back of my car was hit by something. I open my car door, I found a taxi was driven a few meters away from my car. I realized that my car was hit by the taxi SKV 938. The taxi driver came to me to examine the damage of my car hit by his taxi. I asked him to settle privately as the damage was little. He told me he got no money to pay me. Instead he asked me to claim for insurance. So we started taking the photos and particulars of each other.

DECLARATION

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

[Signature]
 Policyholder's Signature
 Date & Time:

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

CITY AUTO PTE LTD
 Blk 8 Sin Ming Road
 #01-58/60/62 Sin Ming Ind Est
 Singapore 575643
 Tel: 6453 1235 Fax: 6453 7944
 (Claims Section)
 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:

REPUBLIC OF SINGAPORE DRIVING LICENCE

S 129,03041

CHAN CHICK SENG

Birth Date: 22 Nov 1941
Date: 08 Apr 2004

001187388B




REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S12903041



Name
CHAN CHICK SENG

陈 焯 成

Race
CHINESE

Date of birth
22-11-1941

Sex
M

Country/Place of birth
MALAYSIA

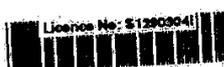
S12903041

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

04 Jun 1970

NP 428A

Licence No: S12903041



5542180



NRIC No: S12903041



Date of issue
19-12-2015

Address
39 SOO CHOW RISE
SINGAPORE 575480

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

