MBHH20008546 / Ajax Mars Pte Ltd - Bukit Merah ENTRY DATE & TIME: 19/01/2020 21:48 SUBMITTED BY: Victor Ang

### SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

Mobile Number

Contact Number **EMail Address** 

Fax Number

- 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 <u>truthful</u> and <u>accurate</u> 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 consaforesaid.	sent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	19/01/2020 21:48
Date Of Accident	18/01/2020 13:25
Exact Location Of Accident	TAMPINES AVENUE 5 BLOCK 940
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SME5632M
Insured/Policyholder	
Name Of Registered Owner	TOH KENG HAN
NRIC No	S8009687I
Email Address	TOHKENGHAN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96396372
Alternative Phone No	OTHERS-96396372
Vehicle Particulars	
Manufacturer	HONDA
Model	CIVIC 1.6 VTI CVT
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	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	PNPV2019-00014514
Cover Note Number	N.A
Driver	
Name of Driver	TOH KENG HAN
NRIC No	S8009687I
Date Of Birth	05/04/1980
Occupation	INDOOR
Date Of Driving Pass	22/05/2002
Driving Experience	17 YEARS AND 7 MONTHS
Gender	MALE

(LOCAL) +65-96396372

TOHKENGHAN@GMAIL.COM

OTHERS-96396372

Address NA

Postcode

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 **CHAIN COLLISION** 

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

4

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

YES

NO

2

NO

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)

Passenger 1

NAME: : EILEEN FU

GENDER: : FEMALE

### **Details of Police Action**

Was the accident reported to the police?

If Yes.Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

# **Circumstances of Accident**

I was driving my car along Tampines Ave 5 in front of Blk 940. I was following suit and stop my car, suddenly I felt some impact from back, there was a vehicle SKN446T which collided onto my car. Subsequently my car move forward and collided into the car in front, SKA9159G. Subsequently a few seconds another from the vehicle SKN446T behind SHB107X also collided onto his car rear side position. So I felt a second impact of the time. Damages of my car rear and front side position was damaged. I will be attend a clinic later.

### Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES Remarks/ Reasons: NA Was there any audio recorded? NO

## **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number SKN446T

Vehicle Make/Model/Colour MERCEDES BENZ / A180 (R18 BI)

**Details Of Properties** N A

Vehicle Category PRIVATE CAR

NGOH TZE YUNG NICHOLAS Name of Driver

NRIC/Passport Number S9305702C

**Contact Number** 

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## **DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number SKA9159G

Vehicle Make/Model/Colour MERCEDES BENZ / C 200 CGI

Details Of Properties N.A

Vehicle CategoryPRIVATE CARName of DriverNG BEE HOONRIC/Passport NumberS0048009F

**Contact Number** 

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## **DETAILS OF OTHER VEHICLE PROPERTY 3**

Vehicle Registration Number SHB107X

Vehicle Make/Model/Colour SSANGYONG / RODIUS SV270 AUTO ABS AB 2WD 8 SEATER

Details Of Properties N.A Vehicle Category TAXI

Name of DriverLAU TEO HOCKNRIC/Passport Number\$1852536D

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Sketch Plan

### SKETCH PLAN

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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:

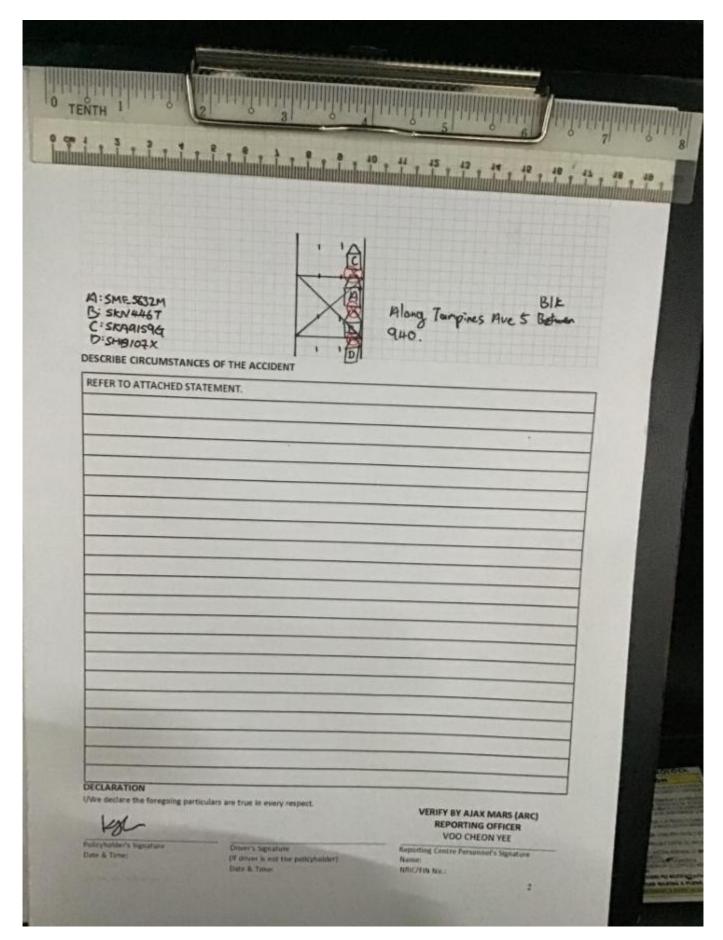
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurers) 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.

for

VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
VOO CHEON YEE

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.:

18-1-2020

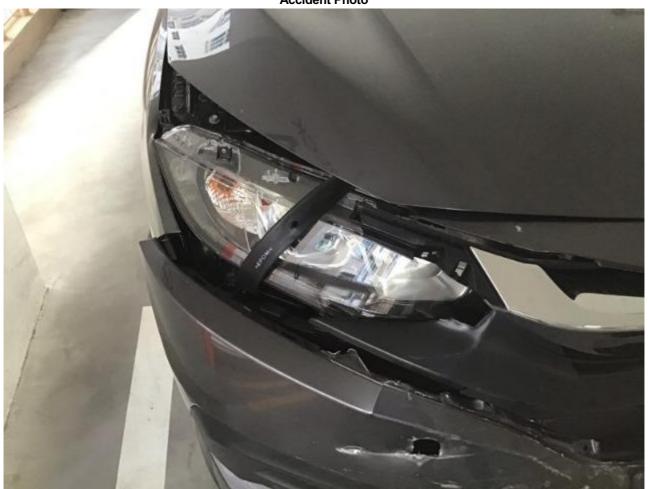


# **ACCIDENT STATEMENT (2000 characters)**

stop my car, suddenly I felt some important which collided onto my car. Subsequent car in front, SKA9159G. Subsequent SKN446T behind SHB107X also collider.	s Ave 5 in front of Blk 940. I was following suit and pact from back, there was a vehicle SKN446T lently my car move forward and collided into the tly a few seconds another from the vehicle lided onto his car rear side position. So I felt a so of my car rear and front side position was er.
Taxi Voucher No.:	
DECLARATION  I/We declare that the above particulars & information power of the state of the sta	
MARS Officer	Registered Owner or Driver's Signature
Job Complete Date/Time	Date/Time:
18 January 2020 at 6:45 PM	18 January 2020 at 6:45 PM





















**Accident Photo** 











### **Identification Card**



**Driving License** 

