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 <u>truthful and 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 consent to the archiving of this report at the centre and to copies of the report being made available aforesaid

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	21/01/2020 13:25
Date Of Accident	20/01/2020 09:45
Exact Location Of Accident	BLK406 TAMPINES ST 41 INFRONT OF COFFEE SHOP
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SKC3097E
Insured/Policyholder	
Name Of Registered Owner	PHUA SIEW HOON RACHEL
NRIC No	S1414053J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96397204
Alternative Phone No	OFFICE-96397204
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	ELANTRA 1.6 1599CC
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	AVIVA LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	10814031

Driver

Cover Note Number

Name of Driver TAN WEI WEI RAINER

NRIC No S9023427G

Date Of Birth 07/07/1990

Occupation INDOOR

Date Of Driving Pass 18/11/2008

Driving Experience 11 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96397204

Fax Number
Contact Number

EMail Address RAINER0707@GMAIL.COM

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 HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

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

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

NO

NO

2

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

POLICE STATION NAME [OTHER] CHANGI NPC

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

Refer to police report no:T/202000120/2076 On the 20.01.2020 at 0900hrs, my uncle parked my vehicle at the open space carpark at Blk406 Tampines Street 41 as he wanted to head to the clinic with my grandmother. After he was done with at the clinic,he walked back to my car and drove it home. Upon arrival, at our house carpark,he made a check on the car and noticed some scratches marks on the right front side bumper. He then notified me. I then made a check on the in car camera and discovered that at a 0949hrs, there was a blue vehicle, SML9366T,had wanted to park beside my vehicle but it took the driver a few attempts. In one of the attempts, it was shown that he reversed in and hit onto to the right side of my vehicle. After that It was seen that the driver was walking from his vehicle without checking on my car. I then decided to lodge a police report.

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Remarks/ Reasons: UPLOADED INTO AVIVA FILE ZILLA

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SML9366T

Vehicle Make/Model/Colour HYUNDAI / AD AVANTE 1.6 GLS (A)

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)

Sketch Plan Pg. 1

SKETCH PLAN

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- 5. Any false reporting may be referred to the Police for investigation.
- 6. 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.
- 7. 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:
 - (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.

VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
MOHAMED SHARIL BIN SATAR

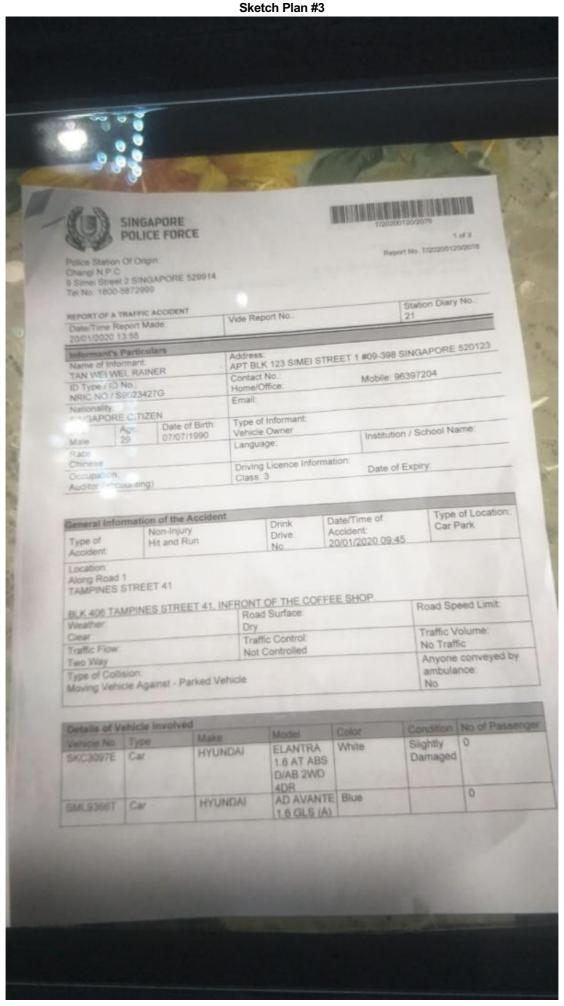
Policyholder's Signature
Date & Time:

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

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

GIARMC SketchPlanForm_V3

A-SXC3097E B-SML956	406	TAMPINES ST41	
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ECLARATION			
We declare the foregoing part	ciculars are true in every respect.	VERIFY BY AJAX MARS (ARC) REPORTING OFFICER MOHAMED SHARIL BIN SATAR	
olicyholder's Signature ite & Time:	Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:	
			2



Sketch Plan #4



Police Station Of Origin: Changi N.P.C 9 Simei Street 2 SINGAPORE 529914 Tel No: 1800-5872999



2 of 3 Report No. T/20200120/2076

CONTINUATION OF REPORT

On the 10.01 2000 at 0000

On the 19.01 2020 at 0900hrs, my uncle parked my vehicle at the open space carpark at Blk 406 Tampines Street 41 as he wanted to head to the clinic with my grandmother. After he was done with at the clinic, he walked back to my car and drove it home. Upon arrival, at our house carpark, he made a check on the car and noticed some scratch marks on the right front side bumper. He then notified me. I then made a check on the in car camera and discovered that at 0949hrs, there was a blue vehicle, SML9366T, had wanted to park beside my vehicle but it took the driver a few attempts. In one of the attempts, it was shown that he reversed in and hit on to the right front side of my vehicle. After that it was seen that the driver was walking from his vehicle without checking on my car. I then decided to lodge a police report.

Changi NPC No. 9 Simei Street 2 Singapore 529914 Tel: 1800-5872999

