MTE120018143 / Trans Eurokars Pte Ltd - Sungei Kadut ENTRY DATE & TIME: 10/02/2020 13:49 SUBMITTED BY: Jess Francis

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Date Of Birth

Occupation

Date Of Driving Pass

Driving Experience

- 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	10/02/2020 13:49
Date Of Accident	08/02/2020 16:25
Exact Location Of Accident	SIXTH AVE (JUNCTION OF NAMLY GARDENS IN THE YELLOW
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SME4006C
Insured/Policyholder	
Name Of Registered Owner	MR TAN BENG KEAT
NRIC No	S7706475C
Email Address	BKEATAN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96377894
Alternative Phone No	Office-96377894
Vehicle Particulars	
Manufacturer	MAZDA
Model	3-1.5 DELUXE SKYACTIV (A)
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	
Driver	
Name of Driver	MR TAN BENG KEAT
NRIC No	S7706475C

11/03/1977

14/09/2002

17 YEARS AND 4 MONTHS

INDOOR

Gender **MALE**

Mobile Number (LOCAL) +65-96377894

Fax Number

Contact Number OFFICE-96377894

EMail Address BKEATAN@GMAIL.COM

Address 29 NAMLY DRIVE

Postcode 267443 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

2

NO

NO

YES

NO

1

NO

NO

NO

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)

involved in the accident

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

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)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT.

Attachment(s)

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

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

SGS982H Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category Name of Driver PHUA KIA CHONG

S1846425Z NRIC/Passport Number Contact Number 96179959

Address Postcode Insurance Company Name Nature Of Damage No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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- 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.
- 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:
 - (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:

Reporting Centre Personnel's Signature

Feb 10, 2020

Name: NRIC/FIN No.:

SKETCH PLAN						
4						
			+++			
DESCRIBE CIRCUMS	TANCES OF THE	ACCIDENT		,		
DESCRIBE CIRCUIVIS	TANCES OF THE	ACCIDENT	LICENS	SE PLATE NO:		
ACCIDENT DATE	/			/		
ACCIDENT DATE:	<i>t</i>		CONTA	ACT NUMBER:		
ACCIDENT TIME:			EMAIL	. /		
/				-		
LOCATION:						
2						
0	0 - 120	00000				
X 12	102162	REPORT				
NOTE: PLEASE NOTE THA	T YOUR INSURER MA	Y HAVE 14 DAYS TIME FRAME FOR YOU T	O SUBMIT	AN OWN DAMAGE CLAIMS UNDER YOUR OWN POLI		
		EASE CHECK VOLID DOLLOV FOR MA	ODE INCO	DMATION		
		LEASE CHECK YOUR POLICY FOR MO	JRE INFO	RMATION		
PLEASE STATE:	() CLAIM OWN POL	ICY () CLAIM THIRD PARTY	()Rf	EPORTING ONLY		
ECLARATION						
	ing particulars are	true in every respect.				
1		The state of the s				
1		1				
lic holder's Signature		river's Signature		Reporting Centre Personnel's Signature		
ite & Time:		f driver is not the policyholder)		Reporting Centre Personnel's Signature Name:		
		ate & Time:				
			NRIC/FIN No.:			

GIARBIC SkerchPlanForm_V3

NOTICE OF REPORTING

This is to	confirm	that 1	CAN	BENG	KEAT.	NRIC:	S7706475C,	Hp:	96377894	has
reported to	the Polic	e a noi	n-inju	ary traffi	ic accide	nt which		P.	20011024	mas

occurred along SIXTH AVENUE (Junction Of Namly Ave, in the

on 08/02/2020 about 04:25PM involving the following vehicles:

Complainant's vehicle: SME4006C

Other vehicle: SGS982H

Driver's name: Phua Kia Chong, S1846425Z, HP: 96179959

BUKIT TIMAH NEIGHBOURHOOD POLICE CENTRE 1 DUKE'S ROAD SINGAPORE 268914

I was driving my car(SME4006C) along Namly Ave approaching the stop line at the junction of Sixth Ave. As I stopped behind the stop line, I noticed the traffic light at Jalan Haji Alias turned red as such the traffic builds up and the cars were all stationery, queueing and waiting for the traffic light to turn green leaving the yellow box at my junction empty. As I observed the cars travelling towards Holland Road had cleared the yellow box for me to enter, I looked out for traffic on the other side of the road (towards Dunearn Road). The traffic was clear as such I drove out and wanted to turn right into Sixth Ave (Towards Dunearn) when a car(SGS982H) squeezed within its lane, drove along the chevron markings and side swiped onto my car causing the right side of my car to be damaged. No government properties damaged, no one was injured and No foreign vehicles involved.

If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: Sgt(3) T130281 Abdul Haq

Date: 08/02/2020 Time: 1730hrs

eS/D Ref: No: 74

Police Post/Unit: Bukit Timah NPC

BUKIT TIMAH NEIGHBOURHOOD POLICE CENTRE I DUKE'S ROAD SINGAPORE 268914

Original - to be issued to informant Duplicate - to be submitted to Traffic Polic PHAA KLA CHONG S1846425Z SGS 982Z

NISSAN SEVPAY SONO





































