

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	24/02/2020 10:55
Date Of Accident	22/02/2020 14:20
Exact Location Of Accident	CHOA CHU KANG AVE 5
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGK4439B
Insured/Policyholder	
Name Of Registered Owner	TAN SHI QI FELICIA
NRIC No	S8623173E
Email Address	DEXTERTAN@PROPERTYGURU.SOM.SG
Mobile Phone No	(LOCAL) +65-91263716
Alternative Phone No	OTHERS-91263716

Vehicle Particulars

Manufacturer	HONDA
Model	CIVIC-2.0 (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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	FWD SINGAPORE PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	PNPV2018-00010662-01
Cover Note Number	

Driver

Name of Driver	TAN ZI YANG, DEXTER
NRIC No	S8813567I
Date Of Birth	27/04/1988
Occupation	OUTDOOR
Date Of Driving Pass	14/12/2006
Driving Experience	13 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96881608
Fax Number	
Contact Number	
Email Address	DEXTERTAN@PROPERTYGURU.SOM.SG

Address	BLK 487A CHOA CHU KANG AVE 5 #1377
Postcode	681487
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SIBLING
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
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)	3
Passenger 1	NAME: : JESSICA SUA GENDER: : FEMALE
Passenger 2	NAME: : JARIUS TAN GENDER: : MALE

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

KINDLY REFER TO SKETCH PLAN.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBB8211X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	88291079
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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. 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:

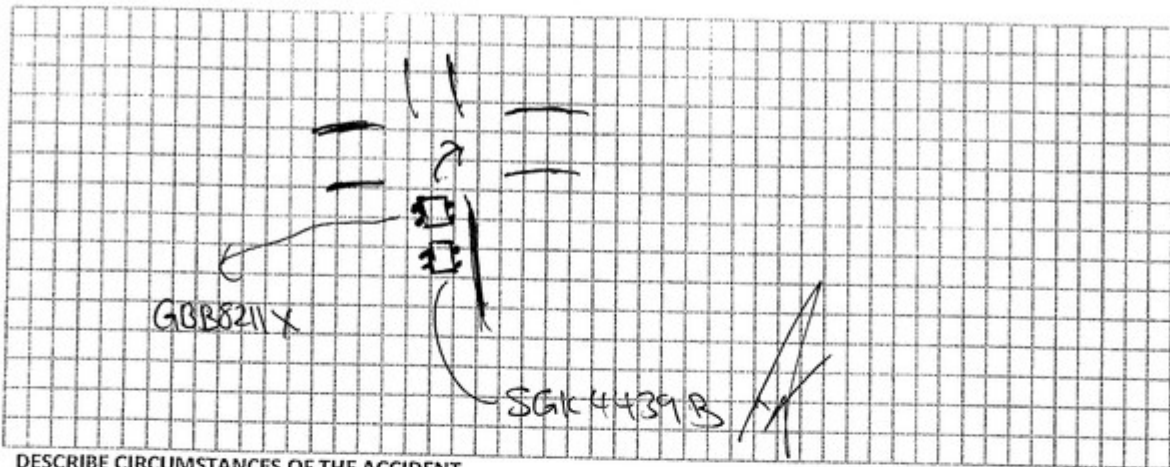
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 24/02/2020

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

It's a straight road, I was going to turn right.
 Infront stop and I was not able to stop in time.
 No Injury on both parties.

A


Important:


You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a **FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE** within the stipulated time frame from the day of the occurrence.


<input checked="" type="checkbox"/>	- Reporting Only
<input type="checkbox"/>	- Claim OD
<input type="checkbox"/>	- Claim TP
<input type="checkbox"/>	- Claim OD/ TP at other workshop

DECLARATION

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


 Policyholder's signature
 Date & Time


 Driver's Signature
 (if driver not the policyholder)
 Date & Time


 Reporting Centre Personnel's Signature
 Name:
 Nric/Fin No.



POLICY NUMBER : PNPV2018-00010662-01

Premium paid (Inclusive of GST)	:	\$5704.86	Coverage start date	:	14/08/2019
			Coverage end date	:	13/08/2020
Who is insured to drive:	:	You and any Authorised Driver			
Policy Type	:	THIRD PARTY			

Your name	:	Tan Shi Qi Felicia		
Address	:	617 Choa Chu Kang North 7 07-435 Singapore 680617		
Email	:	dextertan@propertyguru.com.sg		
NRIC/FIN	:	S8623173E	Date of birth	: 22/08/1986
Marital status	:	Single	Gender	: Female
Current no claims discount	:	10%	Mobile Number	: 91263716
Years of driving experience	:	Three or more	Certificate of merit	: Yes

Car make and model	: HONDA CIVIC 2.0
Year of first registration	: 2006
Car plate number	: SGX4439B

Emergency assistance

Yes

Death or injury to a third party
Damage to a third party's property
Legal costs

No Limit
\$5,000,000
\$3,000

Issued on: 13/06/2019

Please refer to contract for specific terms, conditions, and exclusions of this policy.

Please immediately inform us at +61 46 771 941 or email us to info@ford.com.au if any details in this Car Insurance Summary need to be changed.

Driving License/Nric

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S88135671**

Name
**TAN ZI YANG, DEXTER
(CHEN ZIYANG)**

Birth Date **27 Apr 1988**

Issue Date **14 Dec 2006**

001465945A

FOR ACCIDENT CLAIM
USE ONLY

REPUBLIC OF SINGAPORE
IDENTITY CARD NO **S88135671**

TAN ZI YANG, DEXTER
(CHEN ZIYANG)
陈梓阳

Race
CHINESE

Date of birth
27-04-1988

Country/Place of birth
SINGAPORE

Sex
M

S88135671

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver, and other motor vehicles <= 2500kg 14 Dec 2006

FOR ACCIDENT CLAIM
USE ONLY



NRIC No: **S88135671**



Date of issue

30-04-2018

Address

**APT BLK 487A CHOA CHU KANG AVENUE 5
#13-77
SINGAPORE 681487**



Licence No: **S88135671**

NP 428A

5927085

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

