

## 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	21/02/2020 09:10
Date Of Accident	20/02/2020 22:30
Exact Location Of Accident	AT NORTHVALE CONDO ( CHOA CHU KANG) CARPARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMA114X
<b>Insured/Policyholder</b>	
Name Of Registered Owner	NG SIEW BENG
NRIC No	SXXXX149J
Email Address	SHAOMING.NG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91992435
Alternative Phone No	OFFICE-91992435

### Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	PASSAT COMFORTLINE 1.8 L TSI 132KW DSG
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 29090021 AVW
Cover Note Number	

### Driver

Name of Driver	NG SIEW BENG
NRIC No	SXXXX149J
Date Of Birth	20/09/1974
Occupation	INDOOR
Date Of Driving Pass	16/02/1994
Driving Experience	26 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91992435
Fax Number	
Contact Number	OFFICE-91992435
Email Address	SHAOMING.NG@GMAIL.COM

Address	354 CHOA CHU KANG CENTRAL #12-331
Postcode	680354
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: : NG HUI PING 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

MORE DETAILS PLEASE REFER TO SKETCH & VIDEO

#### 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	SLL4942A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	98339381
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

**SKETCH PLAN**


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

I understand, acknowledge, agree and consent that:

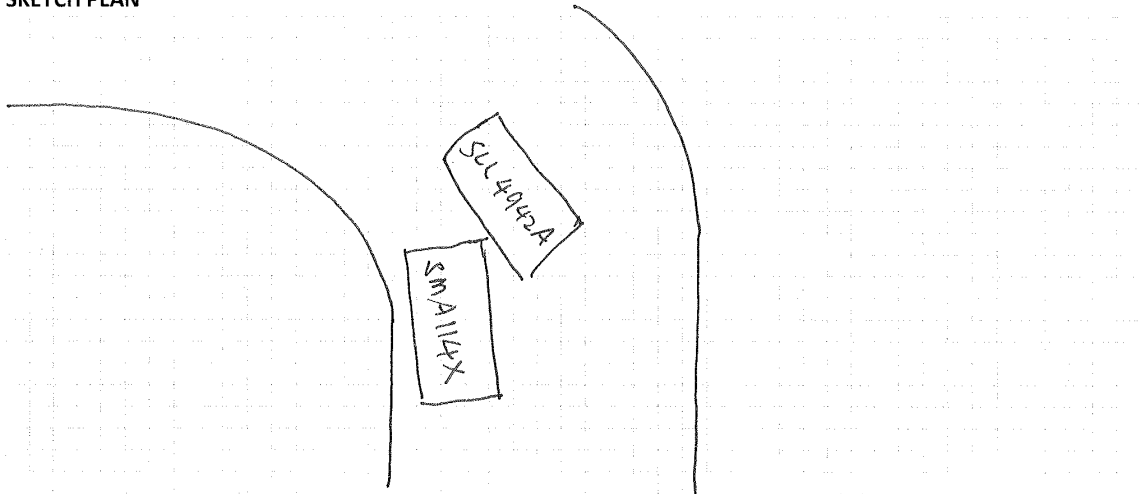
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "**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: 21 Feb 20 8:20am

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

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

SKETCH PLAN

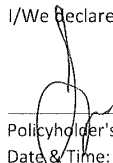


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


Incident happened on 10:30pm 20 Feb 2020 at Northville condominium (Choa Chua Kang) along the road from the basement carpark.
I was driving out from basement towards the main gate. while negotiating a turn I saw an incoming car and I decided to slow down and stopped to let it pass. I was in my lane but <del>the</del> the car still hit me.
Contact of Person : SL 4942 A
Tel 9833 9381
Insurer: AIG

DECLARATION

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

 21 Feb 20  
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.:



MSIG Insurance (Singapore) Pte. Ltd.  
 4 Shenton Way #21-01 SGX Centre 2 Singapore 068807  
 Tel: (65) 6827 7888 Fax: (65) 6827 7800  
 Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

## VW DRIVEEASY

## RENEWAL CERTIFICATE

Policy Number	Period of Insurance	Place of Issue
A 29090021 AVW	16/07/2019 to 15/07/2020	SINGAPORE
Name and Address of Insured		Date of Issue
Ng Siew Beng (Huang Xiuming) 354 Choa Chu Kang Central #12-331 SINGAPORE 680354		02/07/2019
		Account Number
		156346
Premium	GST	Total Due
SGD1,270.89	SGD88.96	SGD1,359.85

RISK NUMBER 1

VW DRIVEEASY

## OCCUPATION

Indoor Occupation

## FINANCIAL INTEREST

DBS Bank Ltd  
 as Hire Purchase Owners

SCOPE OF COVER Comprehensive

## INTEREST INSURED

REGISTRATION NO.	SMA114X	SUM INSURED	MARKET VALUE
MAKE/MODEL	Volkswagen Passat B8 1.8 TFSI	INCL. COE/PARF	YES
ENGINE NUMBER	CJS288317	OFF-PEAK CAR	NO
CHASSIS NUMBER	WVWZZZ3CZJE222540	NO CLAIM DISCOUNT	50.00 % (or F/D)
YEAR OF MFG	2018	GOOD DRIVER'S	
CAPACITY	1,798 C.C.	DISCOUNT	SGD66.89
SEATING CAPACITY	5 (INCL. DRIVER)	NCD PROTECTOR	COVERED
WINDSCREEN	UNLIMITED	EXCESS	SGD1,500
		ANNUAL PREMIUM	SGD1,270.89

**ACCESSORIES** Aircon, radio/cassette/compact disc player, in-vehicle unit, rust-proofing and other accessories that are factory fitted.

Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



**Accident Photo**



**Accident Photo**





**Accident Photo**

