

## 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	16/03/2020 09:52
Date Of Accident	14/03/2020 18:00
Exact Location Of Accident	OLD AIRPORT RD FOOD CENTRE CARPARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJM1601Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN CHIN POH
NRIC No	SXXXX003B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96324057
Alternative Phone No	OFFICE-96324057

### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	C180
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	UNITED OVERSEAS INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DHOM110116471108
Cover Note Number	

### Driver

Name of Driver	WONG NYUK YIN
NRIC No	SXXXX697H
Date Of Birth	04/07/1958
Occupation	INDOOR
Date Of Driving Pass	24/01/1978
Driving Experience	42 YEARS AND 1 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-98214802
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	9 JLN SEDAP
Postcode	438265
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	NO 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	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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)	1

#### 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

I WAS DRIVING INSIDE OLD AIRPORT RD FOOD CENTRE CARPARK, WHEN I SEARCHING FOR CARPARK LOT, I SAW VEH B MOVING OUT FROM THE LOT THEN HE STOP SO I STOP MY VEH, I WAS UNSURE MY VEH GOT ANY CONTACT WITH VEH B. VEH B DRIVER COME OUT AND STARTED TO SAY THAT IT WAS COST \$10000 THEN \$5000. HE STARTED TO TAKING PHOTO ON BOTH CAR AND CALL SOMEONE ON THE PHONE ABOUT THE INCIDENT, HE ASK ME FOR MY IC AND HE WILL CALL ME TO SETTLE, HE WAS SHOUTING AT ME SO I CALL FOR POLICE ASSISTANCE THRU OUT THIS I WAS INSIDE MY CAR. MY HUSBAND COME TO TAKE PHOTO. POLICE WENT DOWN AND TAKE DOWN OUR STATEMENT, THE POLICE OFFICER GIVE ME A CASE NUMBER: G/20200314/0189, WE EXCHANGE PARTICULAR THEN LEAVE THE SCENE.

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLB35Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ERIC TAN
NRIC/Passport Number	SXXXX213I
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage  
No. Of Passenger (Including Driver)

## Accident Sketch Plan

### SKETCH PLAN

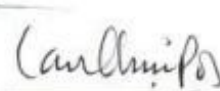
#### IMPORTANT NOTICE

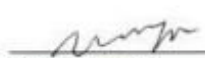
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#### **8. Consent under the Personal Data Protection Act (PDPA)**

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:

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

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

## Accident Sketch Plan

### SKETCH PLAN

Diagram showing a grid with two points labeled A and B. Point A is at the bottom-left corner, and Point B is at the bottom-right corner. The grid is 4 units wide and 3 units high.

$A = 53M 1601Y$   
 $B = 52B 35Y$

Old Airport Rd Food Centre  
Carpark

**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

Refer to statement

## DECLARATION

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

Van Clump

Policyholder's Signature  
Date & Time:

G:\ARMC SketchPlanForm\_V3

Driver's Signature  
(If driver is not the policyholder)

Date &amp; Time:

H

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo





**Accident Photo**



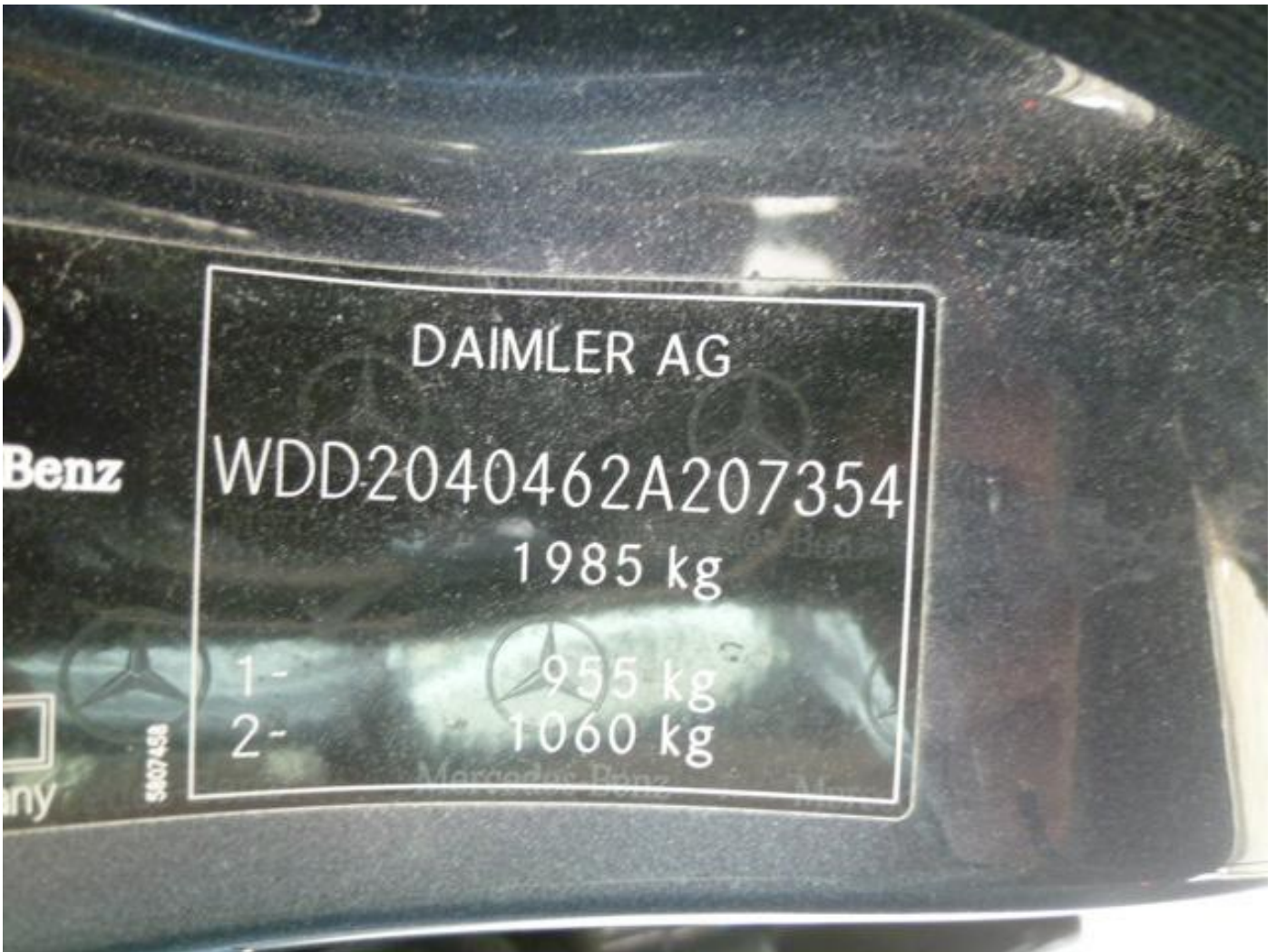
Accident Photo



Accident Photo









Accident Photo

