

## 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	02/04/2020 14:08
Date Of Accident	01/04/2020 06:50
Exact Location Of Accident	PARK INFANIA @ WEE NAM BASEMENT CARPARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGF6145L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MOH TOAUN BEE
NRIC No	SXXXX738Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90125503
Alternative Phone No	OFFICE-90125503

### Vehicle Particulars

Manufacturer	TOYOTA
Model	YARIS E AUTO
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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	SI19V04152/VPE/R04
Cover Note Number	

### Driver

Name of Driver	MOH TOAUN BEE
NRIC No	SXXXX738Z
Date Of Birth	04/06/1949
Occupation	INDOOR
Date Of Driving Pass	25/02/1983
Driving Experience	37 YEARS AND 1 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-90125503
Fax Number	
Contact Number	OFFICE-90125503
Email Address	NOEMAIL

Address	2 BISHAN STREET 25 #35-01
Postcode	573973
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?	
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: : - 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

REFER TO STATEMENT.

#### 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	SKD7078H
Vehicle Make/Model/Colour	
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)

2

## Accident Sketch Plan

### 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:

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

Refer to attached sketch plan.

### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to statement.

### DECLARATION

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

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

### ACCIDENT REPORT:

Date: 1 April 2020

Time: 0650 hrs

Venue: Park Infinia @ Wee Nam basement carpark, 2 Lincoln Road, Singapore 308342

Driver details:

Name – Moh Toaun Bee

IC – S0185738Z

Car plate – SGF6145L

Car model – Toyota Yaris (white)

Mobile number – 90125503

Passenger – Julian Chia Yu Kiat

IC – T0318385D

98587949

Other driver details:

Name – Tan Swee Chuan

IC – S7172994Z

Car plate – SKD7068H

Car model – Mercedes Salon (Black)

Mobile number – 90065909

Passenger – Son of driver

### Description of accident:

I was driving off from my parking lot from visitor section in the basement carpark. I was traveling at about 20kmh on the straight lane going towards the visitor exit. Just when I was about to pass the lift lobby of Tower 2A Unit 10 on my left, a black car from my right adjoining lane hit me on my driver door. The impact from the hit pushed my car further up front.

Both cars stopped after the impact. No one was injured in the accident and no public property was damaged. However I was unable to open my driver door fully after the impact. Please see photos attached.

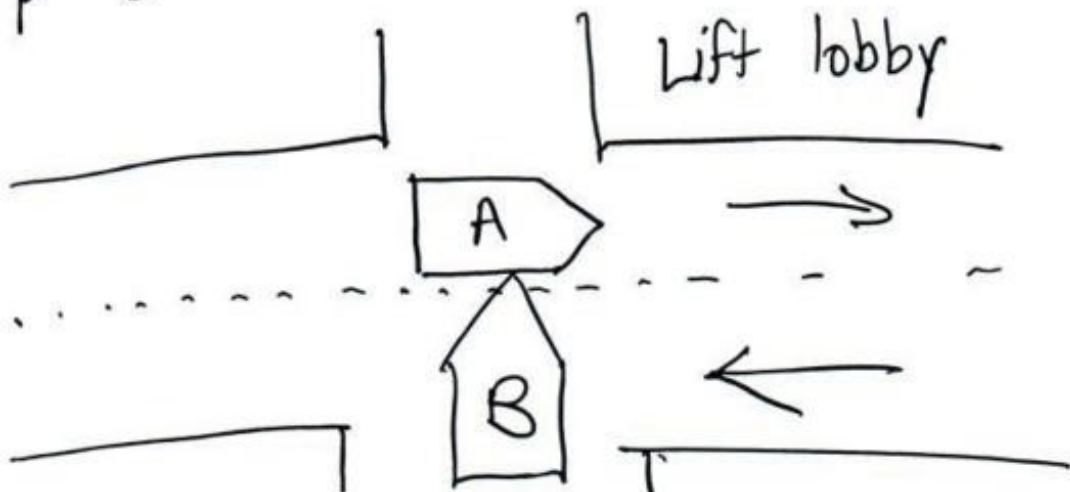
### Picture illustration of the accident site:

Car A – my car (SGF6145L)

Car B – SKD7078H

Report prepared by:

Moh Toaun Bee S0185738Z





Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo

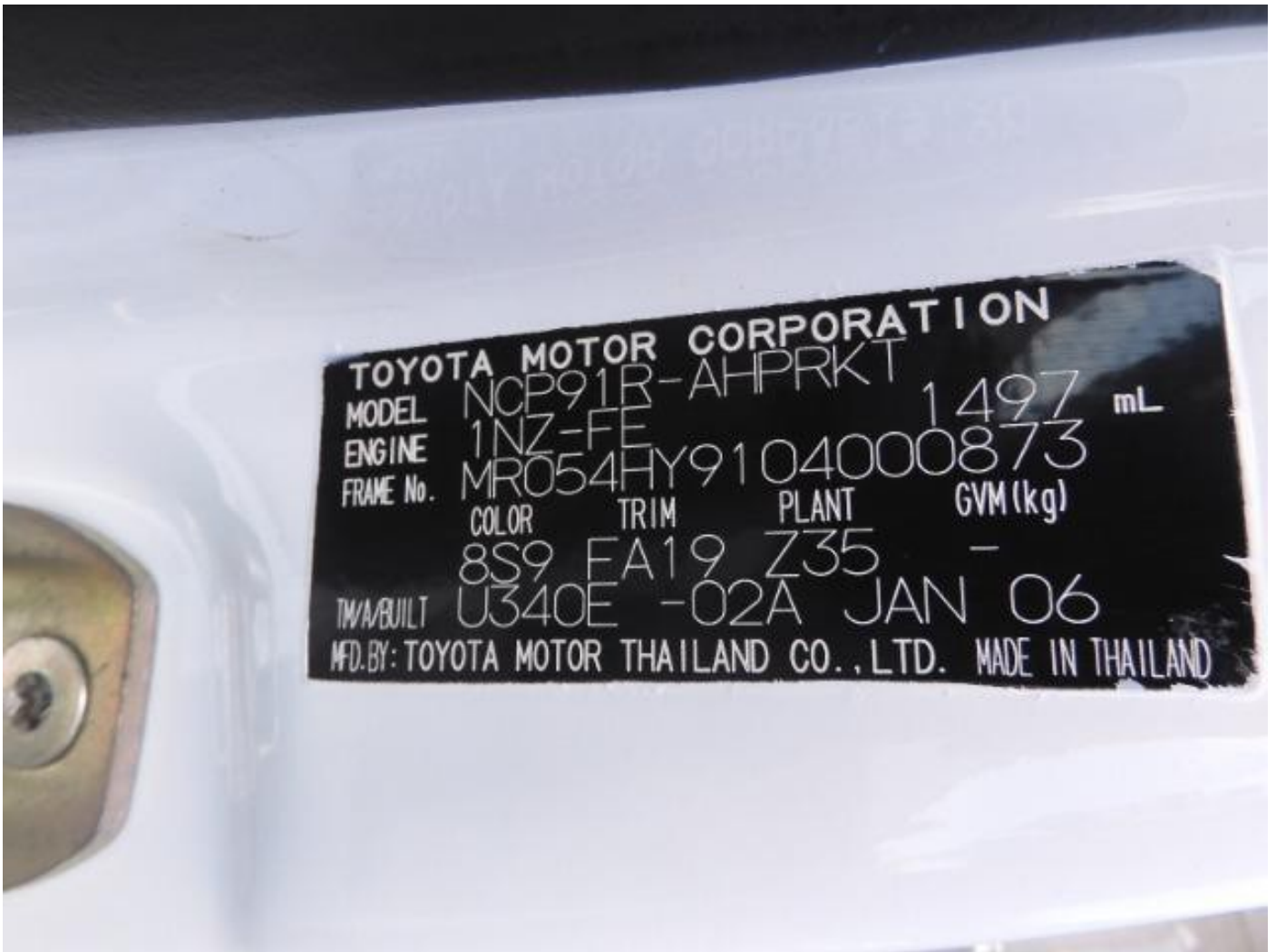




Accident Photo



Accident Photo





Accident Photo

