

## 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	06/07/2020 12:55
Date Of Accident	03/07/2020 13:15
Exact Location Of Accident	SLE (CTE) BEFORE WOODLANDS AVENUE 2 EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE1861A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	B&J TRADING & MANUFACTURING PTE. LTD.
Co Reg No	2XXXXX777G
Email Address	BNJTRADING@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-93851273
Alternative Phone No	OFFICE-93851273

### Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SI19V11418/VCV/R04
Cover Note Number	

### Driver

Name of Driver	TAY KWANG SENG
NRIC No	SXXXX111B
Date Of Birth	29/01/1970
Occupation	OUTDOOR
Date Of Driving Pass	05/12/1987
Driving Experience	32 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93851273
Fax Number	
Contact Number	OTHERS-93851273
Email Address	BNJTRADING@YAHOO.COM.SG

Address	3 VAUGHAN ROAD
Postcode	356077
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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)	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

PLEASE 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	SGZ6577T
Vehicle Make/Model/Colour	MERCEDES BENZ
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAY JAM CHIN
NRIC/Passport Number	
Contact Number	97891941
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## 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.

B&J Trading & Manufacturing Pte Ltd

Reg. No.: 200514777G

Tel : 6475 7150 Fax : 6475 7152

E-mail: bnjtrading@yahoo.com.sg

Blk 3016 #04-01 Bedok North Ave 4 Singapore 460007

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

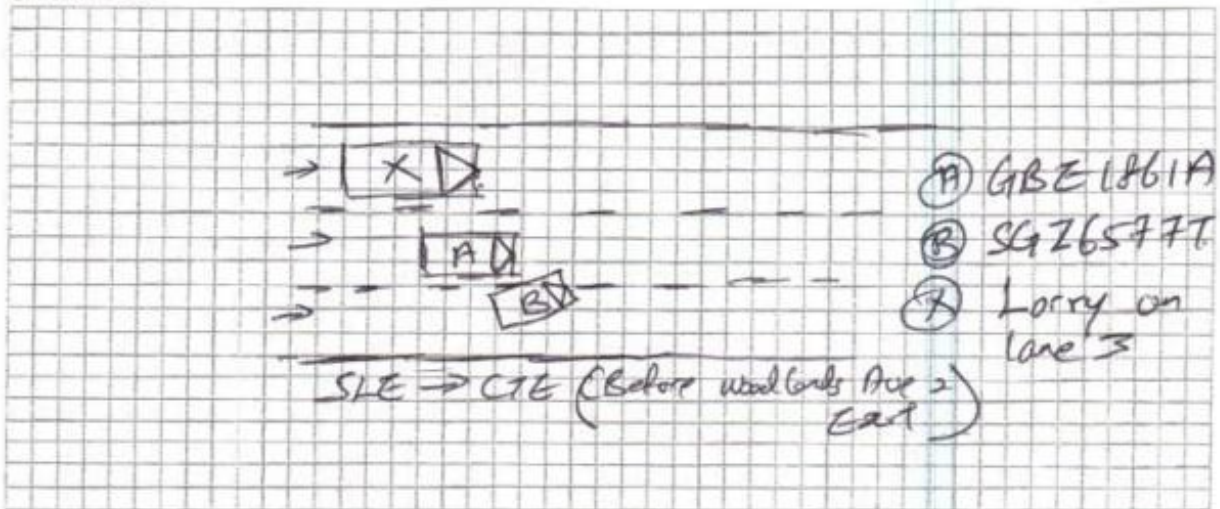
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

# Sketch Plan #2

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On mentioned date and time, I was travelling along SLE towards CTE on lane 2. Before approaching Woodlands Ave 2 Exch, Veh B on lane 1 suddenly swerve into lane 2 (my lane) and collided onto my vehicle right front portion.

## DECLARATION

We declare the foregoing particulars are true in every respect.

Tel: 6475 7150 Fax: 6475 7152

E-mail: bnjtrading@bnjtrading.com.sg

Blk 3016 #04-01 North Ave 4 S'pore 430007

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 Photo



Accident Photo

meter reading: 100750 ( ☐ km. ☐ miles )

CHASSIS NO : KDH201-0174527  
U.W. : 1800 KG  
M.L.W. : 3225 KG  
PASS. CAP. : 02  
TYRE SIZE : F.195/80R-15  
              : R.195/80R-15(S)



**B&J TRADING & MANUFACTURING PTE LTD**  
**3016 BEDOK NORTH AVE 4 #04-01**  
**EASTECH SINGAPORE 489947**  
**REG NO: 200514777-G**  
**PAX CAP: 1 DIVER 1 OTHER**



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo

