

## 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	29/06/2020 16:24
Date Of Accident	26/06/2020 14:45
Exact Location Of Accident	NO.4 WINDSOR PARK HILL
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLS2351G
<b>Insured/Policyholder</b>	
Name Of Registered Owner	EVERVIT LEASING PTE LTD
Co Reg No	198101530H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98455577
Alternative Phone No	OFFICE-98455577

### Vehicle Particulars

Manufacturer	TOYOTA
Model	CAMRY
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	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	LONPAC INSURANCE BHD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	
Cover Note Number	

### Driver

Name of Driver	YAP PECK LENG SHARON
NRIC No	S7712457H
Date Of Birth	05/05/1977
Occupation	INDOOR
Date Of Driving Pass	30/03/2000
Driving Experience	20 YEARS AND 2 MONTHS
Gender	FEMALE
Mobile Number	+65-98455577
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	4 WINDSOR PARK HILL
Postcode	574197
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	
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: : DAUGHTER 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

PLEASE REFER ATTACHED.

#### 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	GBJ8012L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Accident Sketch Plan

### SKETCH PLAN

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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.



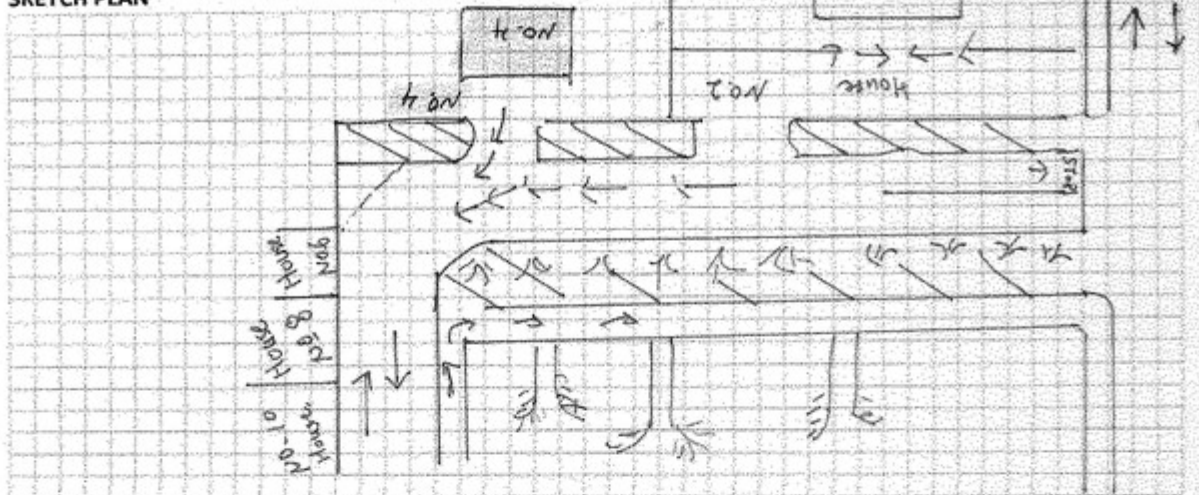
Policyholder's Signature  
Date & Time:

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

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

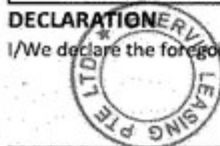
# Common Statement

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per accident statement attached.



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: 27-06-20

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

SRMPC Sketch Plan Form V3

9-30 AM

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7712457H



Name

YAP PECK LENG SHARON  
(YE BILING)

叶碧玲

Race

CHINESE

Date of birth

05-05-1977

Sex

F

Country of birth

SINGAPORE



S7712457H

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S7712457H

Name

YAP PECK LENG  
(YE BILING)

Exp. Date: 05 May 1977

Issue Date: 30 Jan 2004



001103374H



4048883

NRIC No: S7712457H



Date of issue

28-05-2007

4 WINDSOR PARK HILL  
SINGAPORE 574197

NRIC No: S7712457H

Date: 22/05/2009 (R)

No: 6170074

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

PASSENGER

Class 3 Motor Cars and Motor Tractors the weight of  
which unladen does not exceed 2500 kilograms

30 Mar 2000

NP 428A



Licence No: S7712457H



**Accident Involved Vehicle : SLS2351G & GBJ8012L**

**Accident Date : 26/06/2020**

**Accident time: 14:45 PM**

I was reversing out slowly from my house No.4 Windsor Park Hill, ensuring no car was behind me. As the pathway was very narrow and to avoid hitting the kerb on both sides, hence I made a 2<sup>nd</sup> attempt.

When I was in the midst of reversing, all of a sudden I felt a sudden impact from my car's rear side.

A van from nowhere, driving in a speedy manner, had hit onto my car's rear side and caused damages.

There are a total of 6 houses on this quiet road, with only 3 residences occupied.

Resident's cars usually drive very slowly at 3 to 5 km/h due to concern for the safety of children who love to play and cycle around this area. Despite the narrow road, the said van drove very fast disregarding the safety of children, and also posing a danger for the residents living here.



Accident Photo



Accident Photo





Accident Photo



**Accident Photo**



**Addendum Sheet**

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No : MSNH2005411 Vehicle Registration No: SLS2351G

Name (as shown in NRIC) : Yap Peck Lay Shana NRIC/FIN/Passport No : 57712457H

(\*Vehicle Driver/Vehicle Owner) (\*) Please delete as appropriate

Address : \_\_\_\_\_ Singapore( )

Contact (Tel) : \_\_\_\_\_ Mobile No. : 98455577

Email Address : \_\_\_\_\_

Date of Accident : 26/6/2020 Time of Accident : 14.45 hrs.

Place of Accident : No. 4 Windsor Park Hill

Insurance Company: Loupac

**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Attached accident statement.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

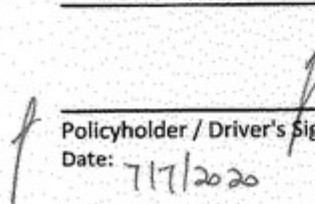
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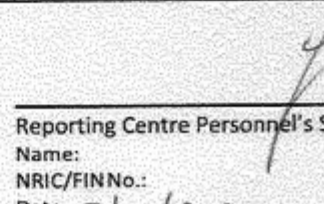
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\_\_\_\_\_

\_\_\_\_\_

  
Policyholder / Driver's Signature  
Date: 7/7/2020

  
Reporting Centre Personnel's Signature  
Name: \_\_\_\_\_  
NRIC/FIN No.: \_\_\_\_\_  
Date: 7/7/2020