

## 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	16/05/2019 14:34
Date Of Accident	09/05/2019 11:45
Exact Location Of Accident	HDB CARPARK BEHIND BLK 727 AMK AVE 6
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBA7253L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SHINNEO PROJECT SERVICES
Co Reg No	0
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-63832687

### Vehicle Particulars

Manufacturer	MITSUBISHI
Model	PICKUP
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?	YES
If No, Please state action to be taken	
Vehicle Category	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	LONPAC INSURANCE BHD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z/19/VC05/001617-001
Cover Note Number	

### Driver

Name of Driver	NEO GOH PENG
NRIC No	S0199974E
Date Of Birth	11/03/1950
Occupation	OUTDOOR
Date Of Driving Pass	14/10/1969
Driving Experience	49 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97398840
Fax Number	
Contact Number	OFFICE-97398840
EEmail Address	NOEMAIL

Address	BLK 473A FERNVALE STREET #05-19
Postcode	791473
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	COLLISION - MAJOR/MINOR RD
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?	YES
If Yes, Please state which Police Station	
Police Station Name	HOUGANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 60 HOUGANG AVE 9 , <b>POSTCODE:</b> 538775 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-4890999 - <b>FAX NO:</b> 63128989
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE SEE SKETCH PLAN.

#### 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	SLM1451P
Vehicle Make/Model/Colour	HONDA GREY COLOR
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LATIFAH BINTE KAMARUSIN
NRIC/Passport Number	S8122008E
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)



## Sketch Plan Pg. 1

### 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.:



SKETCH PLAN

\* PLEASE TO SKETCH PLAN \*

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLEASE REFER TO SKETCH PLAN ATTACHED.

DECLARATION

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

Policyholder's Signature  
Date & Time:  
Company Chop (if applicable)

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

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



DATE: 9/5/19.

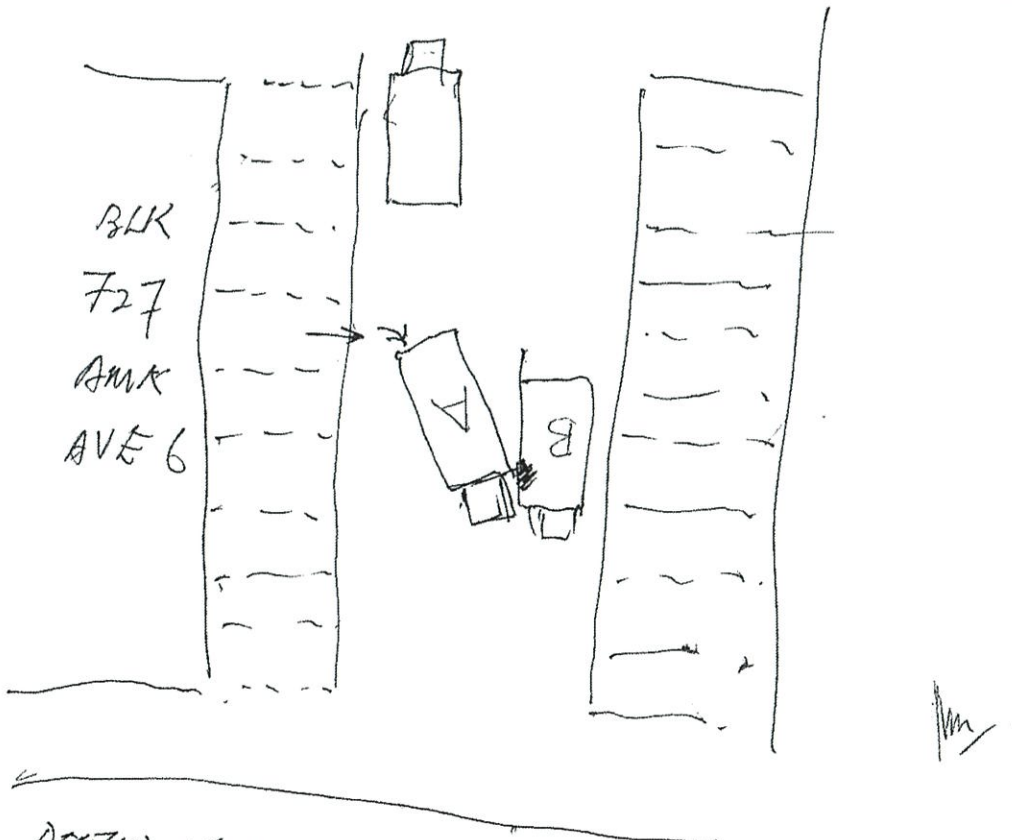
TIME: 11:45 HRS.

LOCATION: BEHIND BLK 727 - MOB CARPARK.

ON THIS DATE (ABOVE), I TURN OUT FROM PARKING LOT AFTER SEEING MY LEFT SIDE NO VEHICLE & CLEARED.

WHILE MY VEHICLE MAKING THE TURN TO MY RIGHT SIDE & ~~ALREADY~~ AND WHILE TURNING OUT, I FINAL CHECKED ~~MY~~ TO MAKE SURE MY RIGHT SIDE DO NOT TOUCH A VEHICLE PARKING<sup>50</sup> NEXT TO THE SIDE. ~~SKETCH SHOWN AS BELOW.~~

BUT OF SUDDEN THIS VEHICLE CAME FROM NOWHERE AND BRACE TO MY LEFT AND GUARD & THE VEHICLE ~~DOOR~~ DENTED.



DENTED VEHICLE - GREY HONDA - NO: SLN 1451 P  
DRIVER'S NAME - LATIFAH BINTI KAMARUDIN (MAY LADY)  
VC NO. - S 8122008 E



CONFIDENTIAL

NOTICE OF COMPLIANCE

Annex E

This is to confirm that NEO GOH PENG  
NRIC / FIN S0199974E, has reported to the Police a non-injury traffic accident  
which occurred at Blk 727 Ang Mo Kio Avenue 6, Open Carpark

on 09/05/2019 at 12.45 AM / PM involving the following vehicles:

Informant: GBA7253L

Other party: SLM1451P -  
Latifah Binte Kamarudin NRIC:S8122008E  
Blk 389 Yishun Avenue 6 #08-1048 Singapore 760389

- 2 If this accident was reported to the Police within 24 hours of occurrence,  
Then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276

Rank/Name of Issuing Officer: SGT(2) YAP WEI YANG

Date: 09/05/2019 Time: 2118 HRS

S/D Ref: 120

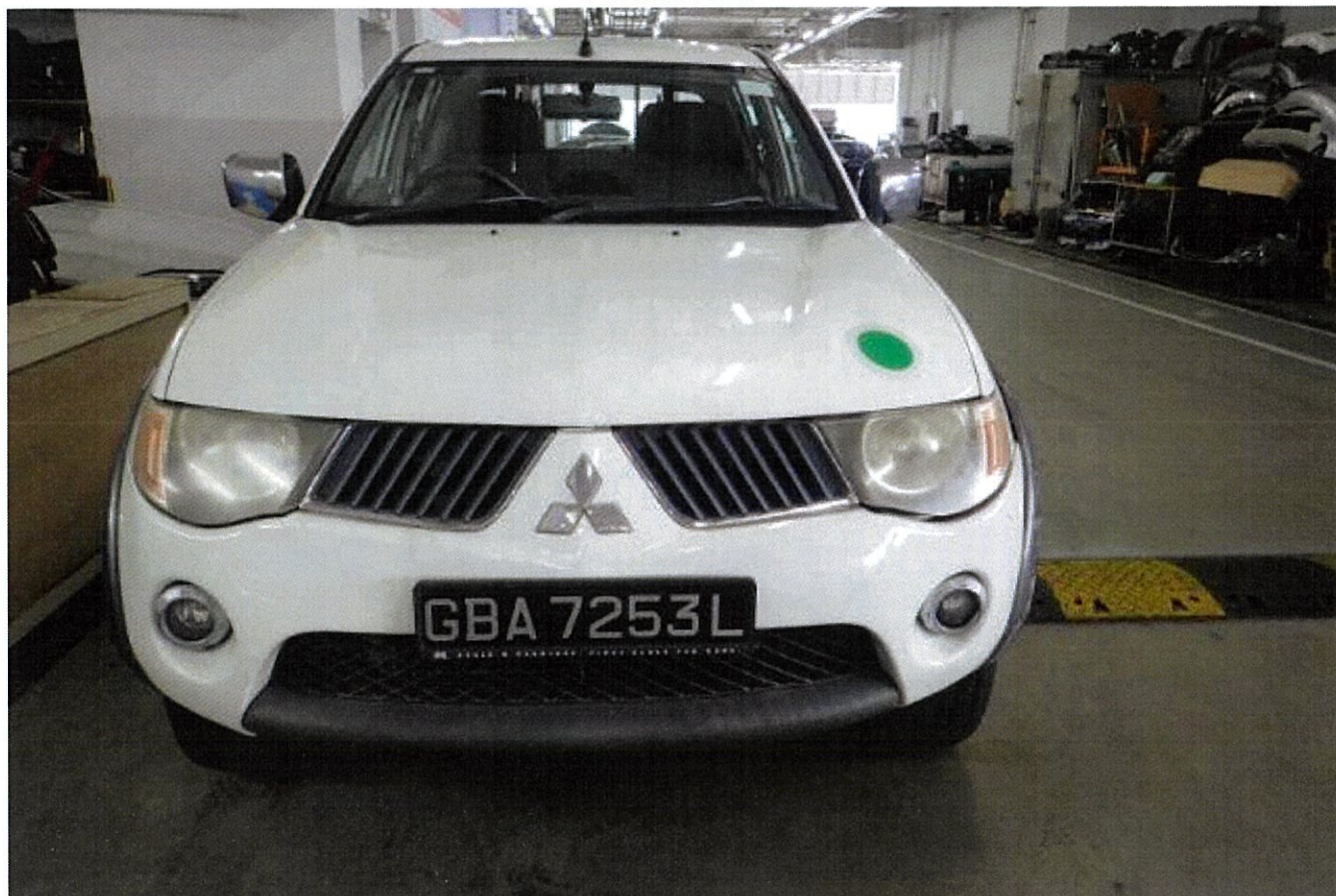
Police Post/Unit: HOUGANG NEIGHBOURHOOD POLICE CENTRE



Original – to be issued to informant  
Duplicate – to be submitted to Traffic Police

CONFIDENTIAL

Accident Photo





Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo





Accident Photo

