

## SINGAPORE ACCIDENT STATEMENT

Surveyor's Copy

### 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	30/07/2020 13:45
Date Of Accident	29/07/2020 19:25
Exact Location Of Accident	ALONG JURONG WEST STREET 42 CARPARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLE1924J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LIE HOCK HEE (LI FUXI)
NRIC No	SXXXX727J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81003329
Alternative Phone No	OTHERS-81003329

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	ELANTRA AD 1.6 GLS AT

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 PRIVATE CAR

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5114302845
Cover Note Number	

### Driver

Name of Driver	LIE HOCK HEE (LI FUXI)
NRIC No	SXXXX727J
Date Of Birth	15/06/1972
Occupation	INDOOR
Date Of Driving Pass	02/10/2006
Driving Experience	13 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81003329
Fax Number	
Contact Number	OTHERS-81003329
EMail Address	NOEMAIL

Address BLK 445 JURONG WEST STREET 42 #02-266  
 Postcode 640445  
 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 COLLISION - OPENING DOOR OF VEHICLE  
 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) 2  
 Passenger 1  
 NAME: : LIE CHENG JUN OWEN  
 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

PLEASE REFER TO STATEMENT ON THE 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 SHC2312B  
 Vehicle Make/Model/Colour  
 Details Of Properties  
 Vehicle Category TAXI  
 Name of Driver LIM KIM SOON  
 NRIC/Passport Number SXXXX852G  
 Contact Number  
 Address  
 Postcode  
 Insurance Company Name  
 Nature Of Damage  
 No. Of Passenger (Including Driver)


SKETCH PLAN

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

I understand, acknowledge, agree and consent that:

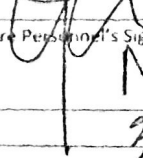
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.:

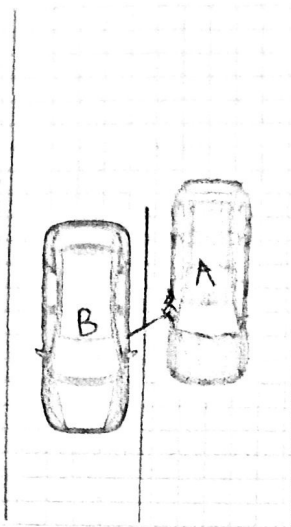
I am fully aware that my insurer may have a 14-day period for me to decide on filing an Own Damage Claim.

  
Nabihah  
30/07/2020

# Sketch Plan Pg. 2

Date of Accident: 29/07/2020

## SKETCH PLAN



A : SLE1924J  
B : SHC2312B

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 29/07/2020 at 1925hrs, I was travelling along Jurong West Street 42 Carpark. As I drove pass Vehicle B (SHC2312B), I heard a thud from the right side of my vehicle. Vehicle B's passenger opened the door and hit my vehicle.

- ☐ Own Damage Claim  
☐ Third Party Claim  
☒ OD/IP Claim at another workshop  
☐ Reporting Only

Cheng Auto

## DECLARATION

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

*[Signature]*

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.:



*Nabibh*  
29/07/2020

H1:93373569

28/07/2020

Date:

ON 1925 HRS, I, NRIC <sup>1442</sup> 8529  
WAS DRIVING SK 2312 B WAS  
ALIGHTING MY PASSENGERS AT  
BIR 413 JUDONY WEST ST-42.  
MY PASSENGER NEVER CHECK  
THE REAR AND OPENED THE  
REAR LEFT PASSENGER DOOR  
AND HIT ON COMING VEHICLE  
SLIP 1245 WALKS CONK  
STRAIGHT ON THE CORRECT  
WAY. I ADMIT THAT I DON'T  
ADVICE THE PASSENGER TO  
LOOK OUT. *Ag - Lim*