

## 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	27/08/2020 09:17
Date Of Accident	26/08/2020 18:05
Exact Location Of Accident	NO 3 AMK ST 62 LINK @ AMK (569139)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGG8984M
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TEO KENG MUI
NRIC No	SXXXX109F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97232330
Alternative Phone No	OTHERS-97232330

### Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5100666943-02 (DRIVO CLASSIC)
Cover Note Number	

### Driver

Name of Driver	TEO KENG MUI
NRIC No	SXXXX109F
Date Of Birth	10/10/1959
Occupation	INDOOR
Date Of Driving Pass	03/03/1981
Driving Experience	39 YEARS AND 5 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97232330
Fax Number	
Contact Number	OTHERS-97232330
Email Address	NOEMAIL

Address BLK 446 #08-105 BRIGHT HILL DRIVE  
 Postcode 570446  
 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? 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) 3  
 Passenger 1 NAME: : COLLEAGUE  
 GENDER: : FEMALE  
 Passenger 2 NAME: : COLLEAGUE  
 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

REFER TO STATEMENT ATTACHED.

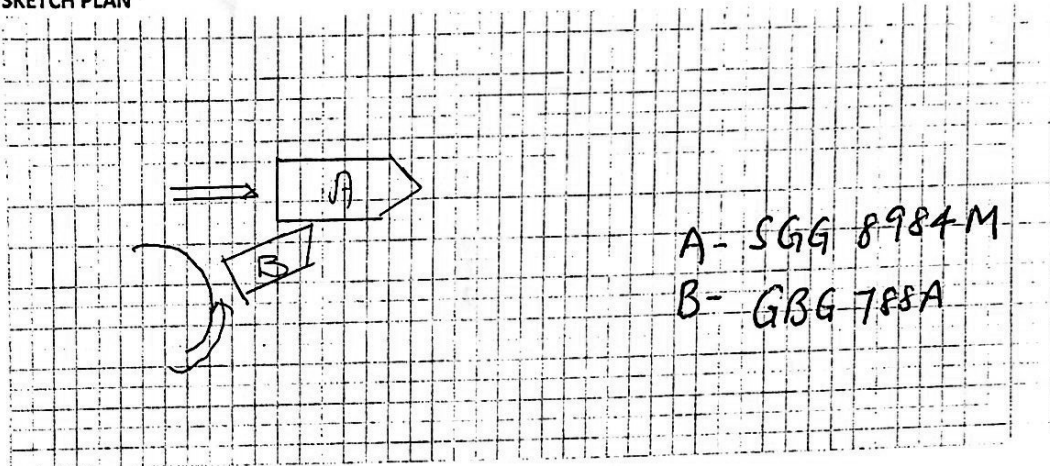
#### Attachment(s)

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 GBG788A  
 Vehicle Make/Model/Colour NISSAN  
 Details Of Properties  
 Vehicle Category COMMERCIAL VEHICLE  
 Name of Driver YER CHIANG KHENG  
 NRIC/Passport Number SXXXX233I  
 Contact Number SUNYU - COMPANY NAME  
 Address  
 Postcode

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

come up from Base car park go street straight. Vehicle A.  
GGG 788A come down from multi car came did not stop come  
and ~~back~~ ~~knock~~ knock at car. A

DECLARATION

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

Policyholder's Signature  
Date & Time: 27 AUG 2020

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

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

APAC VCC Sketch Plan Form V3