





## 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	16/09/2020 17:37
Date Of Accident	15/09/2020 10:30
Exact Location Of Accident	ALONG HENDERSON ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBA454U
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TONY SUPPLIERS
Co Reg No	5XXXX540X
Email Address	NGYONGSENG65@YAHOO.COM
Mobile Phone No	(LOCAL) +65-96677248
Alternative Phone No	OFFICE-96677248

### Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5107167103-01
Cover Note Number	

### Driver

Name of Driver	NG YONG SENG
NRIC No	SXXXX958H
Date Of Birth	10/09/1965
Occupation	OUTDOOR
Date Of Driving Pass	11/08/1988
Driving Experience	32 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96677248
Fax Number	
Contact Number	OTHERS-96677248
Email Address	NGYONGSENG65@YAHOO.COM

Address	BLK 109 SERANGOON NORTH AVENUE 1 #07-645
Postcode	550109
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 - 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?	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?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJW4859Z
Vehicle Make/Model/Colour	TOYOTA CAMRY
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	



## 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.

**TONY SUPPLIERS**

Blk 109 Serangoon North Ave 1  
#07-645 Singapore 550109

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

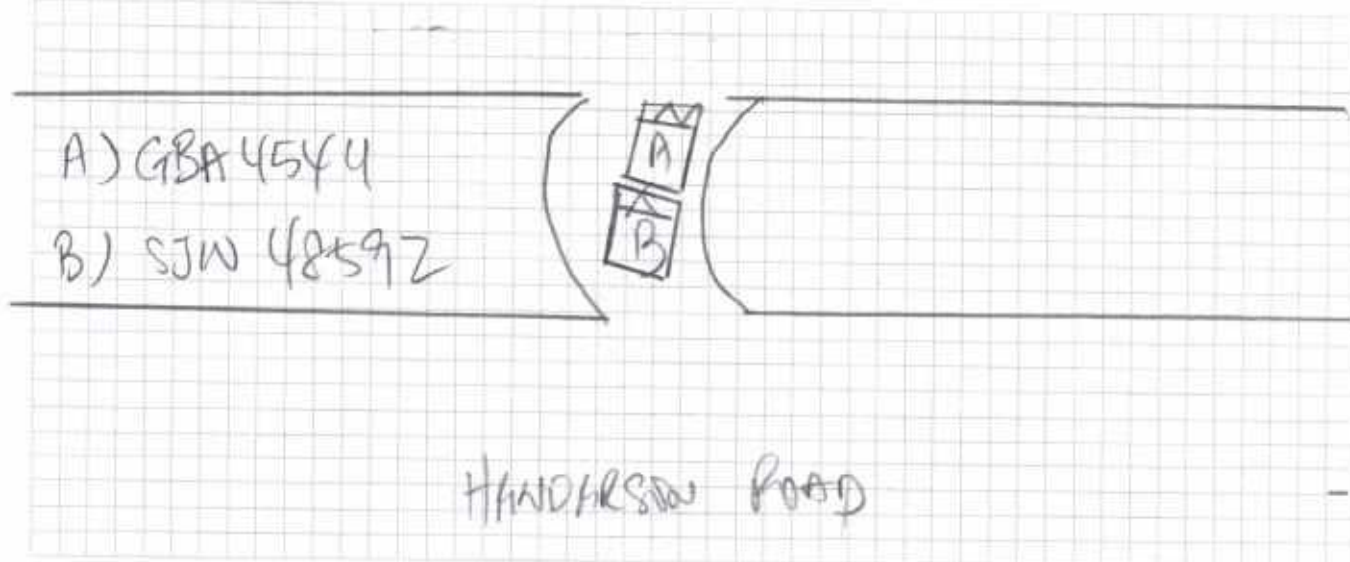
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 15/09/2020 AT ABOUT 10:30 HRS I WAS ABOUT TO  
 MAKE A-URNE AT HANDARSON ROAD. A CAR  
 SJW 48592 BOIG THE REAR OF MY LORRY GBA 4544

## DECLARATION

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

**TONY SUPPLIERS**

Blk 109 Serangoon North Ave 1

Police Station Singapore 550109

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



## ACCIDENT STATEMENT

ACCIDENT DATE: 15/9/20 (DD/MM/YYYY), TIME: 10-30AM (HH:MM)

LOCATION: Henderson Rd

**1. DETAILS OF VEHICLE**

- a) VEHICLE NUMBER: ABA4544  
 b) INSURANCE COMPANY: ATUC  
 c) POLICY NUMBER: \_\_\_\_\_  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: \_\_\_\_\_  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: \_\_\_\_\_  
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)  
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

**2. INSURED / POLICY HOLDER**

- A) NAME: TONY SUPPLIERS (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S2878540X CONTACT: \_\_\_\_\_  
 c) ADDRESS: \_\_\_\_\_

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

**DRIVER**

- a) NAME: NG YONG SENG (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S17219584 CONTACT: 96677248  
 c) ADDRESS: Blk 105 Serangoon North Ave 1  
S'pore 550109

\*d) DATE OF BIRTH: 10/9/1965 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS \_\_\_\_\_

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)  
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: \_\_\_\_\_

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS) \_\_\_\_\_

b) ROAD SURFACE: (DRY / WET / OTHERS) \_\_\_\_\_

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: \_\_\_\_\_

**8. THIRD PARTY VEHICLE**

- a) VEHICLE NUMBER: SJW48592 MODEL: Toyota Camry  
 b) DRIVER'S NAME: \_\_\_\_\_  
 c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

**9. THIRD PARTY VEHICLE**

- d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
 e) DRIVER'S NAME: \_\_\_\_\_  
 f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

email = ng yong seng 65@yahoo.com

VIDEO

Accident MT/1103609

#### Modification History

Claim 901 **NEW**

Print All Issues

Save Submit

**Attachment**

Send Mail

	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ n 16 Sep 2020 18:03	Photos	Normal	Photos 2020-9-16
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ n 16 Sep 2020 18:03	Photos	Normal	Photos 2020-9-16
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ n 16 Sep 2020 18:03	Photos	Normal	Photos 2020-9-16
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ n 16 Sep 2020 18:03	Photos	Normal	Photos 2020-9-16
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	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ n 16 Sep 2020 18:03	Photos	Normal	Photos 2020-9-16
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ n 16 Sep 2020 18:02	Photos	Normal	Photos 2020-9-16
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ n 16 Sep 2020 18:02	Photos	Normal	Photos 2020-9-16
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ n 16 Sep 2020 18:02	Photos	Normal	Photos 2020-9-16
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	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ n 16 Sep 2020 18:01	Photos	Normal	Photos 2020-9-16
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ n 16 Sep 2020 18:01	Photos	Normal	Photos 2020-9-16
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ n 16 Sep 2020 18:01	Photos	Normal	Photos 2020-9-16
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ n 16 Sep 2020 18:01	NRIC/ Driving License	Y	NRIC/ Driving License 2020-9-16
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ n 16 Sep 2020 18:01	SAS	Normal	SAS 2020-9-16

Video List

Uploaded By/Date	Folder Date	File Name	Source
		<a href="#">Display in New Window</a> <a href="#">Scan and uploading</a>	



Hello, NAC\_BUKIT\_MERAH\_800676

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## Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="15/09/2020 15:05"/>
Vehicle No. (For Motor)	<input type="text" value="GBA454U"/>	Certificate Number	<input type="text"/>
<input type="button" value="Search"/>			

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5107167103-01		TONY SUPPLIERS	52878540X	GCV	Third Party, Fire & Theft	GBA454U	GBA454U	23/01/2020	22/01/2021