

## 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	23/09/2020 14:28
Date Of Accident	22/09/2020 17:30
Exact Location Of Accident	YIO CHU KANG ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SBN6888T
<b>Insured/Policyholder</b>	
Name Of Registered Owner	YONG POH LING
NRIC No	S7250797E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96354539
Alternative Phone No	OTHERS-96354539

### Vehicle Particulars

Manufacturer	TOYOTA
Model	ESTIMA AERAS 2.4 A
Exact Purpose for which vehicle was being used at time of accident	PTE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPPHQ20-003186
Cover Note Number	30/05/20 - 09/05/21

### Driver

Name of Driver	LAUREL LIM XIUQI
NRIC No	S9503051C
Date Of Birth	29/01/1995
Occupation	INDOOR
Date Of Driving Pass	24/07/2015
Driving Experience	5 YEARS AND 1 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-96569859
Fax Number	
Contact Number	
Email Address	LAURELIM@HOTMAIL.COM

Address	BLK 516 WOODLANDS DR.14 #03-165
Postcode	730516
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - U-TURN
Weather Conditions	RAINING
Road Surface	WET

#### 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)	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

REFER TO ATTACH.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	TRY TO RETRIEVE
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMP2661R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LIM JIAN AN
NRIC/Passport Number	
Contact Number	91771834
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Sketch Plan

### SKETCH PLAN

1. VEHICLE NO.: SBN 6888T  
2. INSURER CO.: EA  
3. ACCIDENT  
DATE & TIME: 22/9/20 @ 17:30

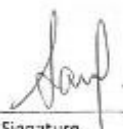
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8. **Consent under the Personal Data Protection Act (PDPA)**

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.

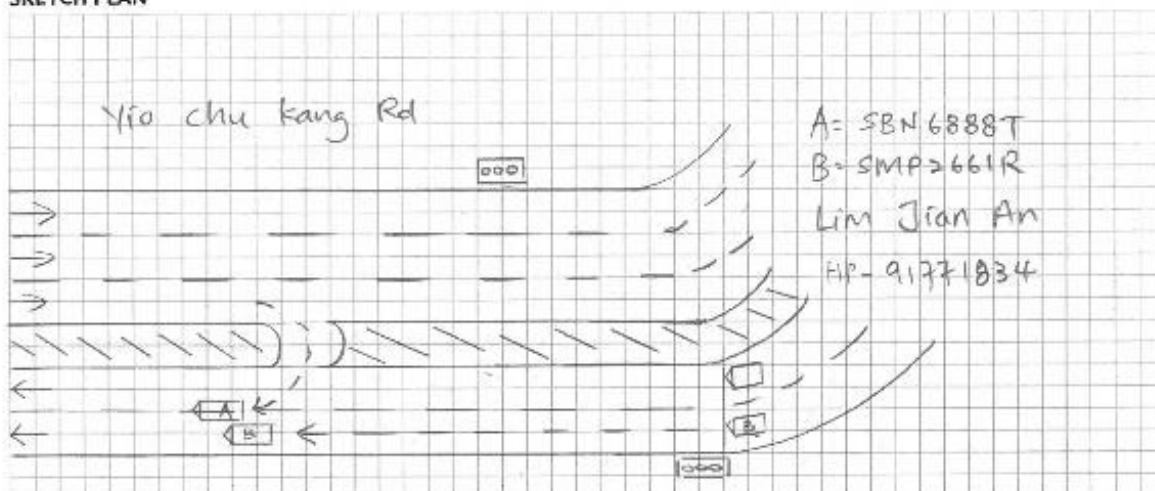
Policyholder's Signature  
Date & Time:

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

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

## Sketch Plan #2

### SKETCH PLAN



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Exited CTE Yio Chu Kang at 5:30pm. Made a U-turn at the first junction. Third party car was stopped at the traffic light at the opposite road. Knowing that the cars have yet to move; ample time to make a turn, I proceeded. After going 20-50m from a completed U-turn, I was about to take the right lane to enter CTE city expressway. Before I could do so, I was bang from the left side by the third party's car (blue sq).

Both party have no injury at that point of time.

Note: Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information.

### DECLARATION

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:

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

GIARMC Sketch Plan Form V3 ( ) Claim Own Policy ( ) Claim Third Party (✓) Reporting Only  
( ) Claim OD/TP at other workshop ( )

## Driving License

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S9503051C



Name

LAUREL LIM XIUQI

林秀琦

Race

CHINESE

Date of birth

29-01-1995

Sex

F

S9503051C

Country of birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S9503051C

Name

LAUREL LIM XIUQI

Birth Date: 29 Jan 1995

Issue Date: 24 Jul 2015



002455154J

SG  
50

4644397



NRIC No. S9503051C



Date of issue

25-10-2010

1PT BLK 516 WOODLANDS DRIVE 14 #03-165  
SINGAPORE 730516

NRIC No. S9503051C

Date: 09/03/2018

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 3A Motor cars without clutch pedals (Auto) <= 3000kg < 7 passengers, exclusive of the driver; and other motor vehicles without clutch pedals <= 2500kg 24 Jul 2015



Licence No. S9503051C

NP 428A

Identification Card

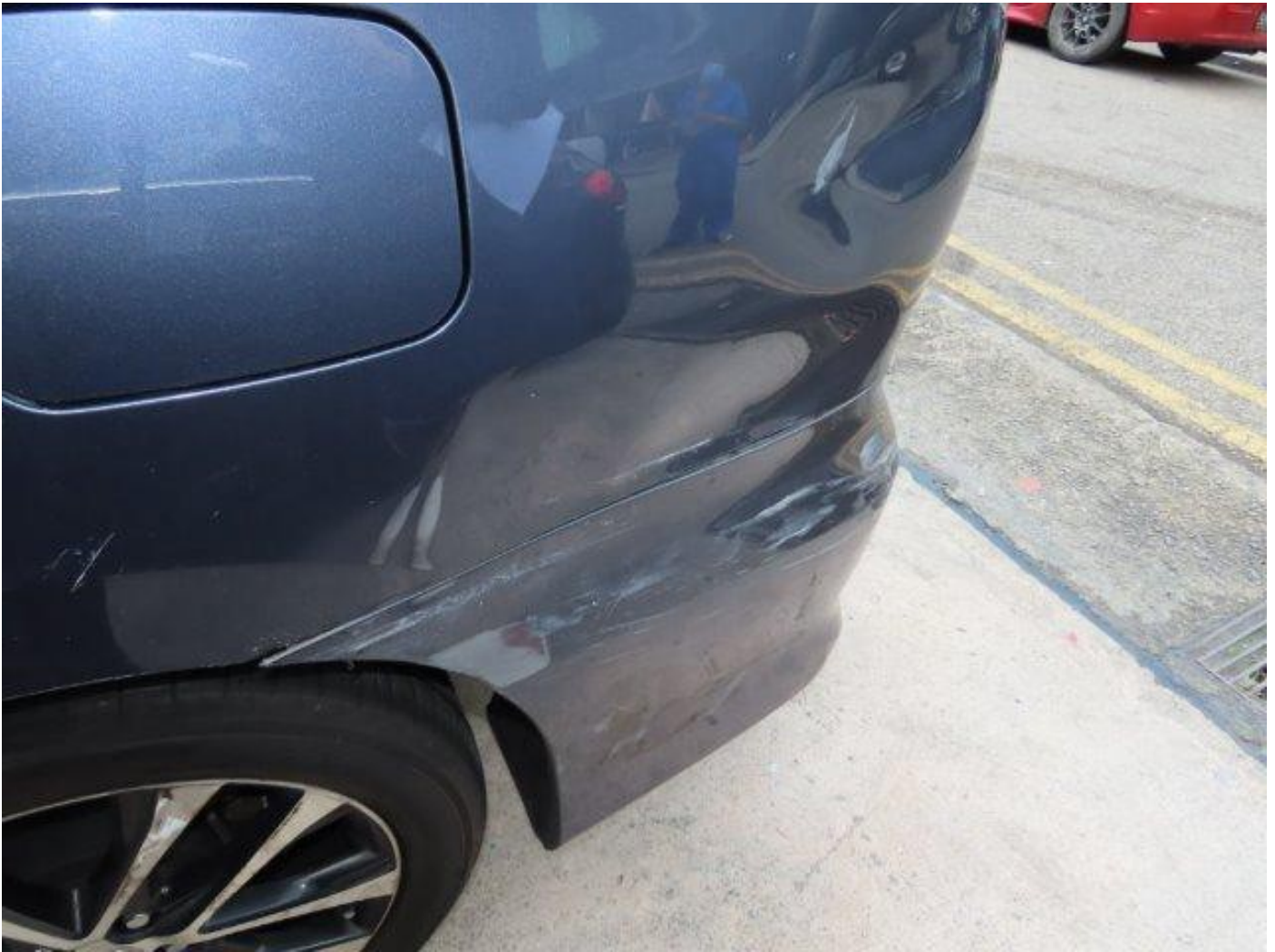


Accident Photo





Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo



SCENE





SCENE





SCENE

