

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	13/11/2020 17:37
Date Of Accident	22/10/2020 23:00
Exact Location Of Accident	ALONG CLUB STREET
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMA2607C
Insured/Policyholder	
Name Of Registered Owner	KOON LAY ENG
NRIC No	SXXXX150E
Email Address	JUNEFOO96@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92363687
Alternative Phone No	OTHERS-81951819

Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 29144251 AT2
Cover Note Number	

Driver

Name of Driver	FOO JIUN NING
NRIC No	SXXXX463I
Date Of Birth	28/02/1996
Occupation	INDOOR
Date Of Driving Pass	19/06/2015
Driving Experience	5 YEARS AND 4 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-92363687
Fax Number	
Contact Number	OTHERS-81951819
Email Address	JUNEFOO96@GMAIL.COM

Address	23 HILLVIEW AVENUE #03-09
Postcode	699557
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	NO COLLISION
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	1
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	5
Passenger 1	NAME: : FRIEND GENDER: : FEMALE
Passenger 2	NAME: : FRIEND GENDER: : FEMALE
Passenger 3	NAME: : FRIEND GENDER: : FEMALE
Passenger 4	NAME: : FRIEND GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
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

Accident Sketch Plan

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:

12/11/2020

5.17 PM

Driver's Signature

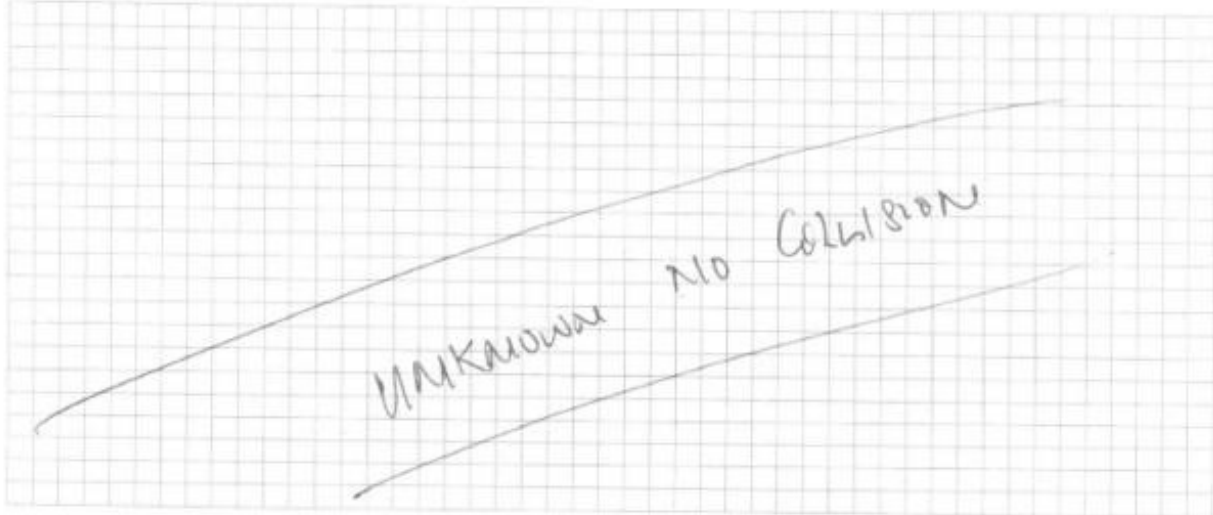
(If driver is not the policyholder)

Reporting Centre Personnel's Signature

Name:

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT? 7/2020/112/2011

[The remaining lines of the form are crossed out with a large diagonal line.]

DECLARATION

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

12/11/2020
5.17 PM

[Signature]

13/11/2020
Resd. [Signature]

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20201112/7011

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20201112/7011

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/11/2020 11:37		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: FOO JIUN NING			Address: 23 HILLVIEW AVENUE #03-09 SINGAPORE 669557		
ID Type / ID No.: NRIC NO / S96094631			Contact No.: Home/Office: Mobile: 81951819		
Nationality: SINGAPORE CITIZEN			Email: JUNEFOO96@GMAIL.COM		
Sex: Female	Age: 24	Date of Birth: 28/02/1996	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: Financial/Investment adviser			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 22/10/2020 23:00	Type of Location: Straight Road
Location: CLUB STREET				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control:	Traffic Volume:	
Type of Collision:			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SMA2607C	Car					0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20201112/7011

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20201112/7011

CONTINUATION OF REPORT

Driver			
Name	FOO JIUN NING	ID No.	S9609463I
Related Vehicle	SMA2607C (Car)	Contact No.	81951819
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

With reference to Ref No: TP/IP/48883/2020, a traffic police report was filed against SMA2607C for a traffic accident that occurred at Club Street at 11 PM.

I was the driver of SMA2607C and I was at Club Street on 22 October, I parked from 7.16PM to 8.31PM. I have a picture of the Parking SG mobile app to show the end time of my parking at Club Street. After I parked the vehicle at 7.16PM, and before I left the parking lot at 8.31PM, I did a habitual check of my car as well as the cars behind and in front of me to make sure that there was no issue. From what I recall, there were no scratch marks or any other indication of a traffic accident that occurred during my parking. There were 3 other passengers who followed me to leave Club Street and they did not notice or mention anything related to a car accident.

At approximately 10.45PM, I left Wan Wan Thai Cafe (127A Bencoolen St, Singapore 189637) with 4 friends and they followed me to the car for a lift to Little India station.

At 11PM, I was leaving or have left The Bencoolen Mall Shopping centre located along Bencoolen Street. The entrance/exit to the carpark is along Bencoolen Link. I was driving from Bencoolen Street to Middle Road to Selegie Road, and then to the main road (Bukit Timah Road) between the timing of 11:00-11:15PM.

If an accident occurred at Club Street at 11PM (or after 8.31PM), it is likely to be another vehicle that caused it.

POLICE REPORT



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20201112/7011

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Report No. T/20201112/7011

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TP18 /
NORHIDAYAH BINTE MOHAMED LATIF
Contact No.: 65476393

Authentication Stamp

NP168

Signature Of Informant:

The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
12/11/2020 11:37

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

