

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 Submission	20/11/2020 15:38 (SGT)
Date of Accident	19/11/2020 13:50 (SGT)
Exact Location of Accident	Joo Chiat Rd, Singapore
Additional Location Information	TOWARDS DUNMAN ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBH8098A
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	NAUTICAL SPLENDOR
Company Reg No	5XXXX178J
Email Address	nauticious11ts@gmail.com
Mobile Phone No	(Phone) +65-96647270
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Fiat
Model	DOBLO
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle

INSURANCE COMPANY

Name of Insurance Company	EQ
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMCPHQ20-002842
Cover Note Number	-

DRIVER

Name of Driver	FOO TOON MOH ANDREW (FU DUNMAO ANDREW)
NRIC No	SXXXX416C
Date Of Birth	14/11/1975
Occupation	Outdoor

Date Of Driving Pass	07/09/1998
Driving experience	22 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96647270
Alt. Phone Number	-
Email Address	nauticious11ts@gmail.com
Address	BLK 664 JALAN DAMAI #02-103
Address complement	-
Postcode	410664
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Other
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

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 the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	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?	Yes
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SFL1196C
Vehicle Manufacturer	Volkswagen
Vehicle Model	Polo
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	AUGUSNIKO LOH LULIN
NRIC No	SXXXX243E
Contact Number	(Phone) +65-92477111
Address	-
Address complement	-
Postcode	-

Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
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 processed 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, notices, 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 packaging); 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 situated outside of Singapore, for one or more of the above Purposes;
- (d) my Personal Information will also be collected and used to compare claims history for the purpose of fraud detection, investigation and management in present and all future claims;
- (e) the information so collected under (a) 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.



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

Reporting Centre Personnel's Signature
Name: *Lee J. Nathan*
NRIC/FIN No.:

Along Joo Chiat Road towards Panman Road

SKETCH PLAN

A) GRH 8098A
B) SFL 1196C

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 19/11/2020 @ 1350hrs, I was driving along Joo Chiat Road due south toward Panman Road. There was a Red VW Polo car ahead of me. After Fawlie Road junction, she stopped her vehicle and had her hazard lights on; I was about 5 car lengths behind her then. Seeing that her hazard lights were blinking, I proceeded to avoid her by filtering to the right. At this point, she started to reverse and I slammed on my brakes and had my vehicle come to a complete stop. Noticing that she did not stop reversing, in my complete stationary position, I honked a long blast to warn her. She continued to reverse and collided into my stationary vehicle.

DECLARATION

I/We declare that the facts stated are true to the best of my/our knowledge.

Driver's Signature: *[Signature]*
(If driver is not the policyholder)
Date & Time: *20/11/2020*

Insuring Centre/Policyholder's Signature: *[Signature]*
Name: *Rosa Wong*
NSR/IRN No: *[Blank]*





































Submitted the Original Report

ADDENDUM MAY 20103151

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No. MNA420103151 Vehicle Registration GBH 8098A

Name (as shown on NRIC) Foo Toon Moh NRIC/FIN/Passport No. S7534416C

(*) Vehicle Driver / Vehicle Owner (**) Please delete as appropriate

Address Blk 664, #02-103, Jalan Damai Singapore 410664

Contact (Tel) — Mobile No. 9664 7270

Email Address nauticious11ts@gmail.com

Date of Accident 19/11/2020 Time of Accident 1350

Place of Accident Soo Chiat Road, after Fowle Road

Insurance Company EA

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

nauticious11ts@gmail.com



Police Officer's Signature
Date

22/02/2021
Reporting Centre Personnel's Signature
Name
NRIC/FIN No
Date