

53991



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	04/12/2020 16:14 (SGT)
Date of Accident	04/12/2020 10:38 (SGT)
Exact Location of Accident	St Francis Rd, Singapore
Additional Location Information	St Francis Road
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLJ1963U
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Christopher Beal
NRIC No	SXXXX609A
Email Address	ritz.work@gmail.com
Mobile Phone No	(Phone) +65-96347906
Alternative Phone No	+65-96347906

VEHICLE PARTICULARS

Manufacturer	Volvo
Model	S60
Variant	-
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 - Claiming third party
Vehicle Category	Private car

INSURANCE COMPANY

Name of Insurance Company	Direct Asia
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	MT/00727061/01
Cover Note Number	-

DRIVER

Name of Driver	Ridzuan
NRIC No	SXXXX455G
Date Of Birth	10/06/1988
Occupation	Indoor



Date Of Driving Pass	05/08/2009
Driving experience	11 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92964056
Alt. Phone Number	-
Email Address	ritz.works@gmail.com
Address	236 Serangoon Ave 3 #07-104
Address complement	-
Postcode	550236
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	Side Swipe
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	Zachary Beal
Gender	Male

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 attached.

ATTACHMENT(S)

Are accident photos available for attachment?	No
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	XD4629E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Goods vehicle
Name of Driver	Hee Chin Choy
NRIC No	SXXXX985G


Contact Number	(Phone) +65-82817197
Address	C/O Buildmate (S) Pte Ltd
Address complement	-
Postcode	-
Insurance Company Name	Lonpac
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN**IMPORTANT NOTICE**

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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: 4/17/20
13 15

Driver's Signature

(If driver is not the policyholder)
Date & Time

Reporting Centre Personnel's Signature

Name:
NRIC/FIN No:

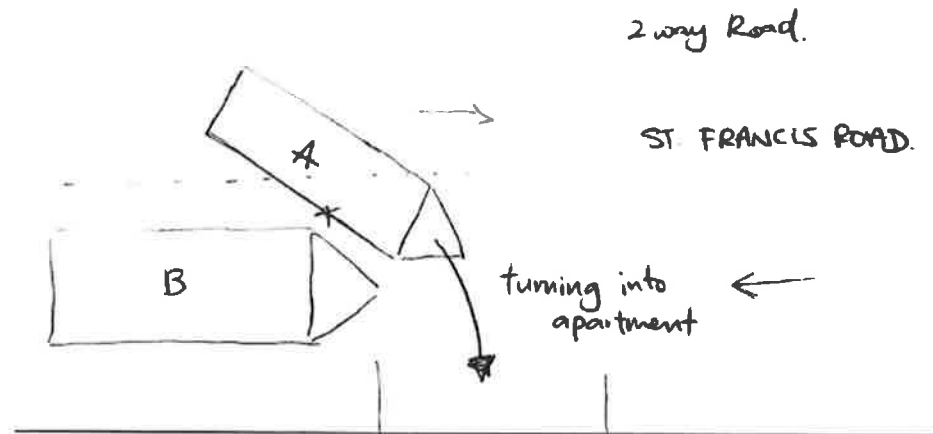
Accident Toolkit

Sketch plan

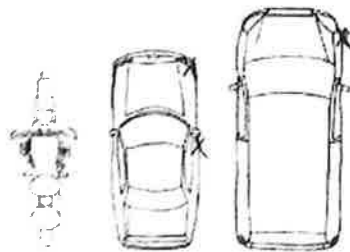
Sketch of accident scene:

Please illustrate the layout of roads with arrows showing the direction and position of vehicles at the time of impact. Also please note the road names, road signs and vehicle registration numbers.

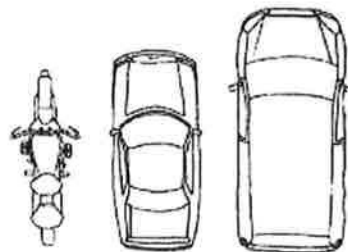
If safe, please take photos or videos from all angles.



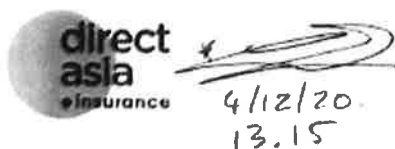
Please indicate on vehicle A (your vehicle) and, vehicle B (third party vehicle), the point of impact and area(s) of visible damage with an arrow.



Vehicle A
SLJ19630



Vehicle B
X04629E



Call us direct
Customer Care
6665 5555
Claims Support 24/7 Hotline
6532 1818
*65 4805 5555 (toll free overseas)

SKETCH PLAN

[illegible]

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- Larry appeared to be stationary on wrong side of 2 way road
- signalled right to turn into apartment
- Larry started moving just as I was turning into the apartment block
- wanted to warn driver but he did not respond in time.
- Larry drove into the side & punctured the door, at the time I was stationary.

DECLARATION

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



Policyholder's Statement

Date & Time

4/12/20 13:15

Driver's Signature _____

(If driver is not the policyholder)


Date & time:

Reporting Centre Personnel's Signature

Name _____

NRUC/FIN No :

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8820455G



Name
RIDZUAN BEAL


Race
BOYANESE

Date of birth
10-06-1988

Sex
M

Country/Place of birth
SINGAPORE

S8820455G



REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number
S8820455G

Name
RIDZUAN BEAL

Birth Date: **10 Jun 1988**

Issue Date: **07 Mar 2019**

002909475B



5980849



NRIC No. **S8820455G**



Date of issue
17-07-2018

APT BLK 236 SERANGOON AVENUE 3 #07-104
SINGAPORE 560236

NRIC No. **S8820455G** Date: **07/05/2019**

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

	EFFECTIVE DATE
Class 3 Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$	05 Aug 2009

NP 428A

Licence No: **S8820455G**

