

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 witholding of material facts may allow insurance companies to reputate 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.

 8. 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 tesing made available elevested.

ACCIDENT STATEMENT

Date of Submission 09/12/2020 21:18 (SGT) Date of Accident 08/12/2020 16:45 (SGT) **Exact Location of Accident** Singapore

Additional Location Information ALONG ORCHARD BEFORE BUYONG ROAD

Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

No - Claiming third party

Vehicle Registration Number SLX5963U

INSURED/POLICYHOLDÉR

Is company? Name Of Registered Owner NG SIG KIAT NRIC No. (1991) Services of the service of the serv S1487592A SIGKIATNG@YAHOO.COM Email Address Mobile Phone No (Phone) +65-97809591 Alternative Phone No +65-97809591

VEHICLE PARTICULARS

Toyota Manufacturer Corolla Model Exact purpose for which vehicle was being used at time of

Private hire accident

Are you claiming under your own insurance policy for repair to your vehicle? Management for the comment of the co

Private hire Vehicle Category

INSURANCE COMPANY

NTUC Name of Insurance Company

Comprehensive Type of Coverage Fleet Policy 5099177317-02

Cover Note Number

Policy Number

DRIVER

Name of Driver NG SIG KIAT S1487592A NRIC No 23/10/1961 Date Of Birth indoor Occupation

Date Of Driving Pass	08/09/1979
Driving experience (Assessing an open programme support of the programme o	41 YEARS AND 3 MONTHS
Gender: [] a commence of the c	Male
Mobile Number	(Phone) +65-97809591
Alt. Phone Number	+65-97809591
Email Address	SIGKIATNG@YAHOO.COM
Address:	BLK 633 #14-301 CHOA CHU KANG NORTH 6
Address complement Postcode	680633
Is the diver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	
Does Driver Own Other Vehicles?	No.
Vehicle Registration Number of Other Vehicle Owned by Driver	
Control of the second control of the second control of the control of the second of the second control of the	
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 Commence of the C	Dry - The second of the second
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?	· · ·No··
Number of vehicles involved in the accident	
Was anybody injured in the Accident?	
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1. 2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	en e
PASSENGER 1	
Name	UNKNOWN
Gender	***************************************
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	No section and the section of the se
Was notice of intended Prosecution given?	No
If yes, against whom?	
CIRCUNSTANCES OF ACCIDENT	
PLEASE REFER TO SKETCH PLAN	
ATTACHWENT(S)	
Are accident photos available for attachment?	V
Was there any video captured by Car Camera?	Yes.
Was there any audio recorded?	No
DETAILS OF OTHER	RVEHICLE PROPERTY 1
DEFAILS OF OTHER	
Vehicle Registration Number	
Vehicle Registration Number Vehicle Manufacturer	SFW6263B
Vehicle Model	
Vehicle Variant	
Vehicle Colour	
Vehicle Category	Private car
Name of Driver	CHRISTINE TOH JING JING (CHRISTINE DU JINGJING)
VRIC No.	The second of th

Contact Number		e de la companya de La companya de la co	/Pt	none) +65-96893389	Ű
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Insurance Company Name	Common and the law and towns	vange en Wengt se to Jack			
Nature Of Damage	es religion es a religio de la configue de	and a second second section			
Details of property damaged in ac	cident	. A de la compania d Companyo de la compania de la compa			: :-: ::-:
No. Of Passenger (Including Driv	er)	in who they proved you are to be bloom in the last			

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Describe Circumstances of the Accident

BLACK CAR: SFW62538

WHITE CAR: SLX5983U

DESCRIPTION:

On the Sin December 2020, I NG SIG KIAT was driving my vehicle SLX5953U along Orchard road, at junction of buyong road traffic was heavy. I was in queue behind a lony, my vehicle was stationary, suddenly a vehicle SFW\$2658 Collided into the rear of my vehicle. No One was injured, I will be claiming against the TP vehicle.

Declaration

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

NG SIG KIAT 09/12/2020 12:18 NG SIG KIAT 09/12/2020 12:18

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnesser by Reporting Centre Personnel

SKETCH PLAN

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- 7. By the ladgement 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 aforesald.
- 8. Consent under the Personal Data Protection Act (PDPA)
- I understand, acknowledge, agree and consent that
- (a) My Insurar, my w orkship and the General insurance Association of Singapore ("GIA") may are permitted to collect use, disclose and/or process my personal deta/personal information set out in this [Pomi) 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 of insurer(s) with have insured vehicle(s) involved in this accident (all insurer(s) with nave insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the insurers law yers law irms, the Monetary Authority of Singapore and any relevant government agency/sufforty (such as the police), for the purpose(s) of
- (i) processing, iterating 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 extraoquisies by the
- (iv) administering my claims (including the making of correspondence, statements, involved, reports or notices to me, if high could involve disclosure of certain personal data about me to orang about delivery of the same as well as on the external speed of envelopes/mail packages); and/or
- (v) complying with applicable law in administering, processing, happling and/or dealing with my claims

(collectively the "Purposes")

- (b) all insurents) or he have insured vehicle(s) involved in this accident and the insurers less yershald firms. maylare permitted to collect, use, disclose and/or process my Personal information for one or more of the above Purposes, and
- (c) my Personal Information mayican be disclosed by any of the insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be slied 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 traud delection, investigation and management in present and all future claims.
- (e) the information so consided under (d) above may be ahared i disclosed:
- (i) to all insurers and/or any other third parties that assist in evaluating investigating, controlling or managing fizuid, 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.

NG SIG KIAT 09/12/2020 12:18 NG 816 KIAT 66/12/2020 12:18

Driver's Signature (if driver is not the poscyticiders: Date & Time Witnessed by Reporting Contre Personnet

Poscyholder's Signature / Date & Time