

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 14/12/2020 12:36 (SGT)
Date of Accident 13/12/2020 10:50 (SGT)
Exact Location of Accident Singapore
Additional Location Information ALONG UPP CHANGI ROAD
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKM9852A

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner CHONG KIM IMM
NRIC No SXXXX637B
Email Address CARELCHONG@YMAIL.COM
Mobile Phone No (Phone) +65-96874874
Alternative Phone No +65-96874874

VEHICLE PARTICULARS

Manufacturer Audi
Model A4
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/00791086
Cover Note Number -

DRIVER

Name of Driver CHONG KIM IMM
NRIC No SXXXX637B
Date Of Birth 03/06/1969
Occupation Indoor

Date Of Driving Pass	29/04/1995
Driving experience	25 YEARS AND 8 MONTHS
Gender	Female
Mobile Number	(Phone) +65-96874874
Alt. Phone Number	+65-96874874
Email Address	CARELCHONG@YMAIL.COM
Address	279 BEDOK SOUTH AVE 3 #04-32
Address complement	-
Postcode	465458
Is the driver 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	-
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?	Yes
Police Station Name	Bedok Division Headquarters
Police Station Phone No	(Phone) +65-18002440000
Alt. Police Station Phone No	(Fax) +65-64443009
Police Station Address	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE POLICE REPORT

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	SLF5805M
Vehicle Manufacturer	Toyota
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Private car
Name of Driver	-
Contact Number	-

Address -
Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

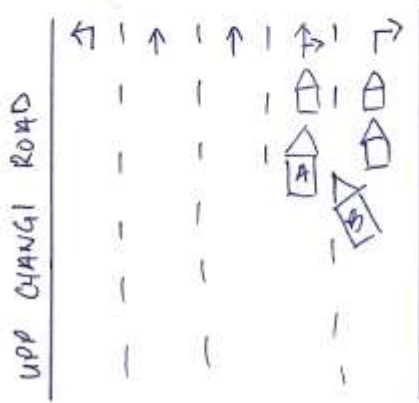
Accident Toolkit

Sketch plan

Sketch of accident scene:

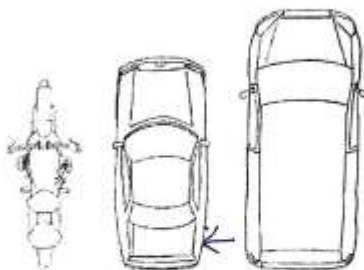
Please illustrate the layout of roads with arrows showing the direction and position of vehicles at the time of impact. Also please note the road names, road signs and vehicle registration numbers.

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

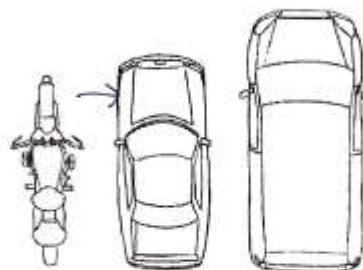


On Dec 13 about 10.50am. I was driving along Changi Road towards Jalan Eunos, on the 2nd right lane ~~from~~ a suddenly a Toyota Corolla barged onto the right side (rear) of my car. He was disputing and accused me for changing lane but obviously I had been keeping on the same 2nd right lane. It was him who ~~was~~ switching from 1st right lane into my lane that he hit onto my car. He insisted he was not wrong so I filed the claim against him.

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
(SKM 9852A)



Vehicle B
(3LF 5805M)

direct
asia
● insurance

hich
12/14/20
11.06 am


Call us direct
Customer Care
6665 5555
Claims Support 24/7 Hotline
6532 1818
+65 6601 3809 (from overseas)

SKETCH PLAN**IMPORTANT NOTICE**

1. Please report correctly the details of the accident to speed up the claims process.
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7. By the lodgment 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.
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.

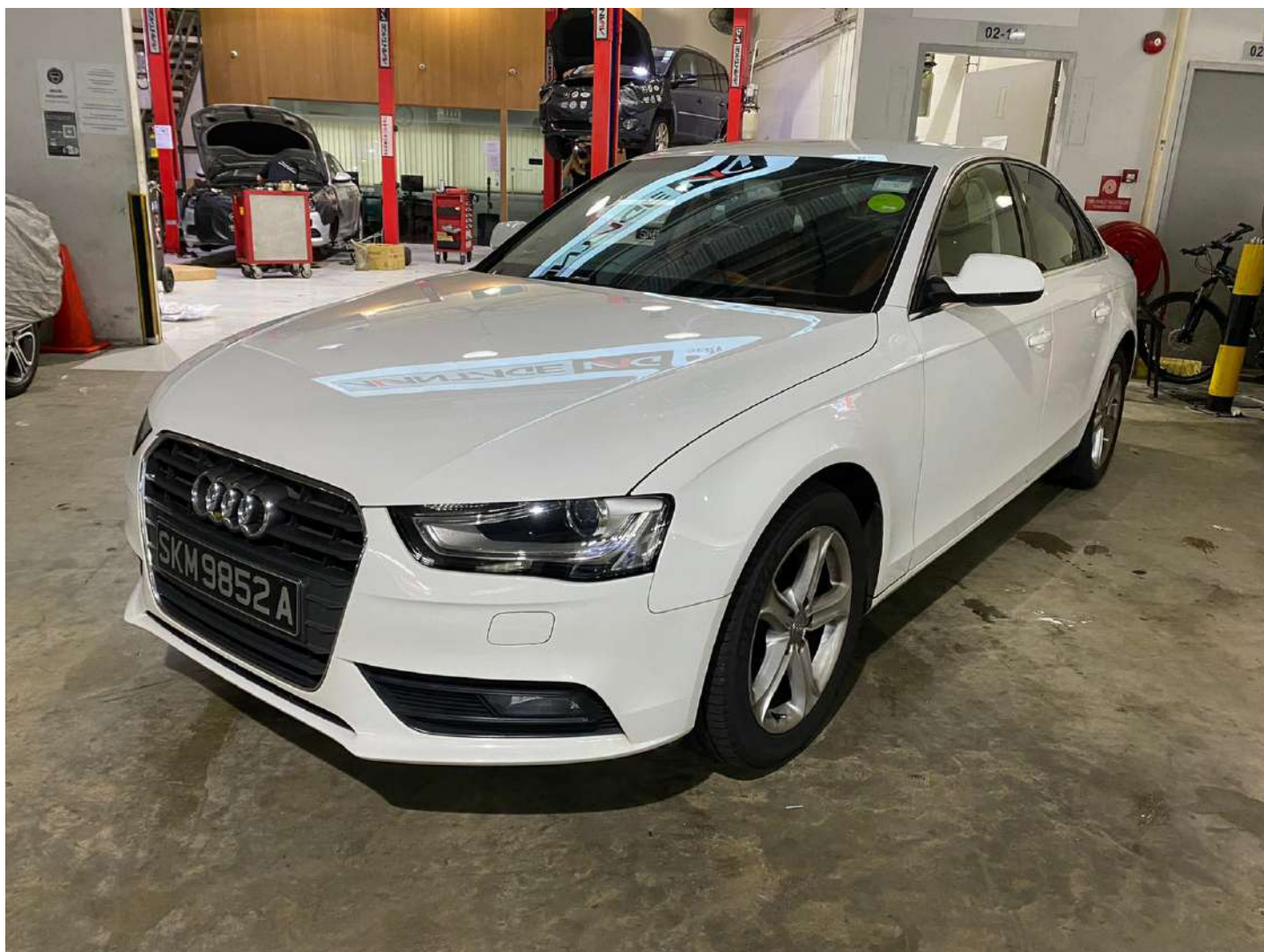

 Policyholder's Signature
 Date & Time:

14/12 11:06am

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

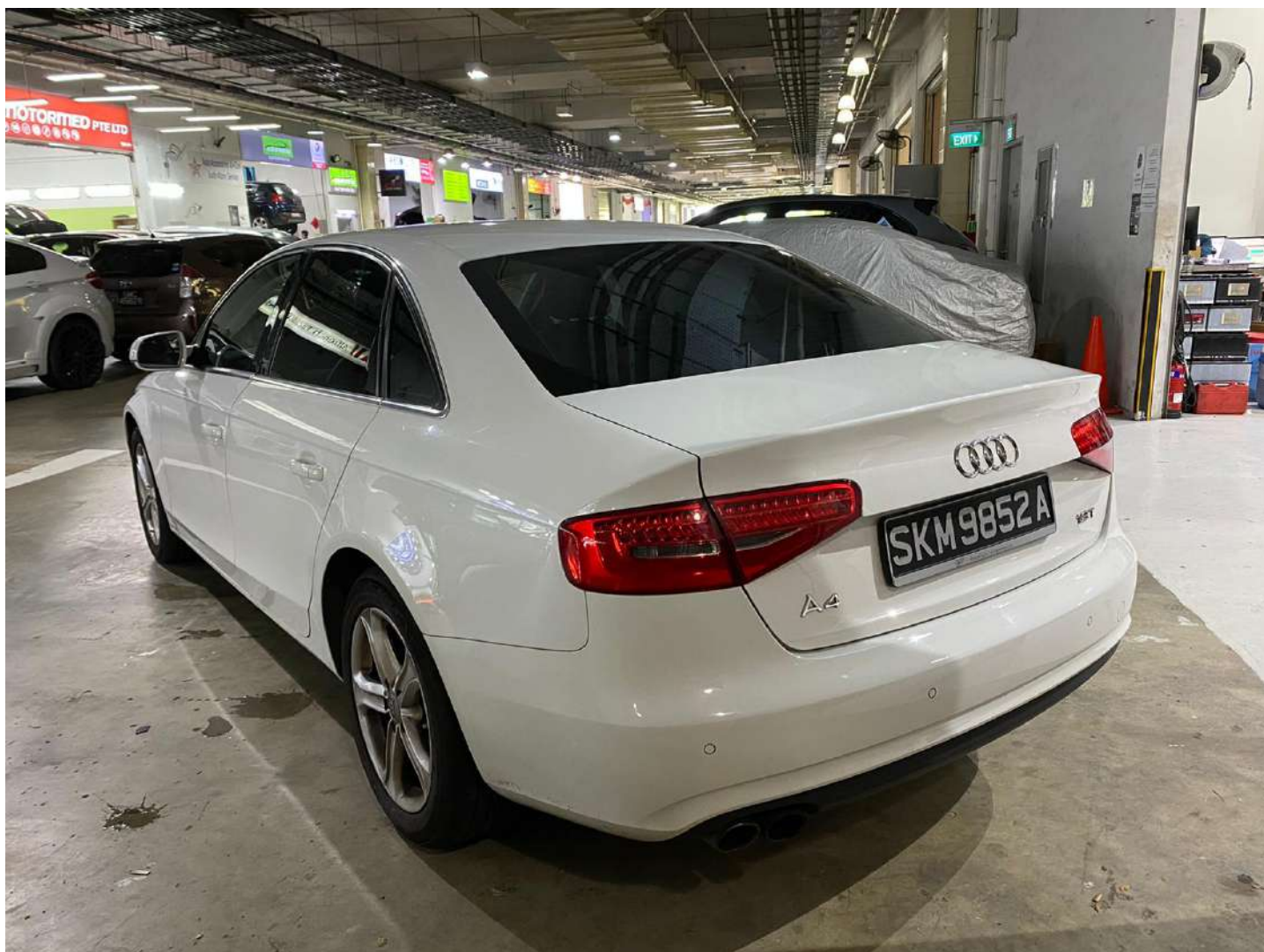

 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:















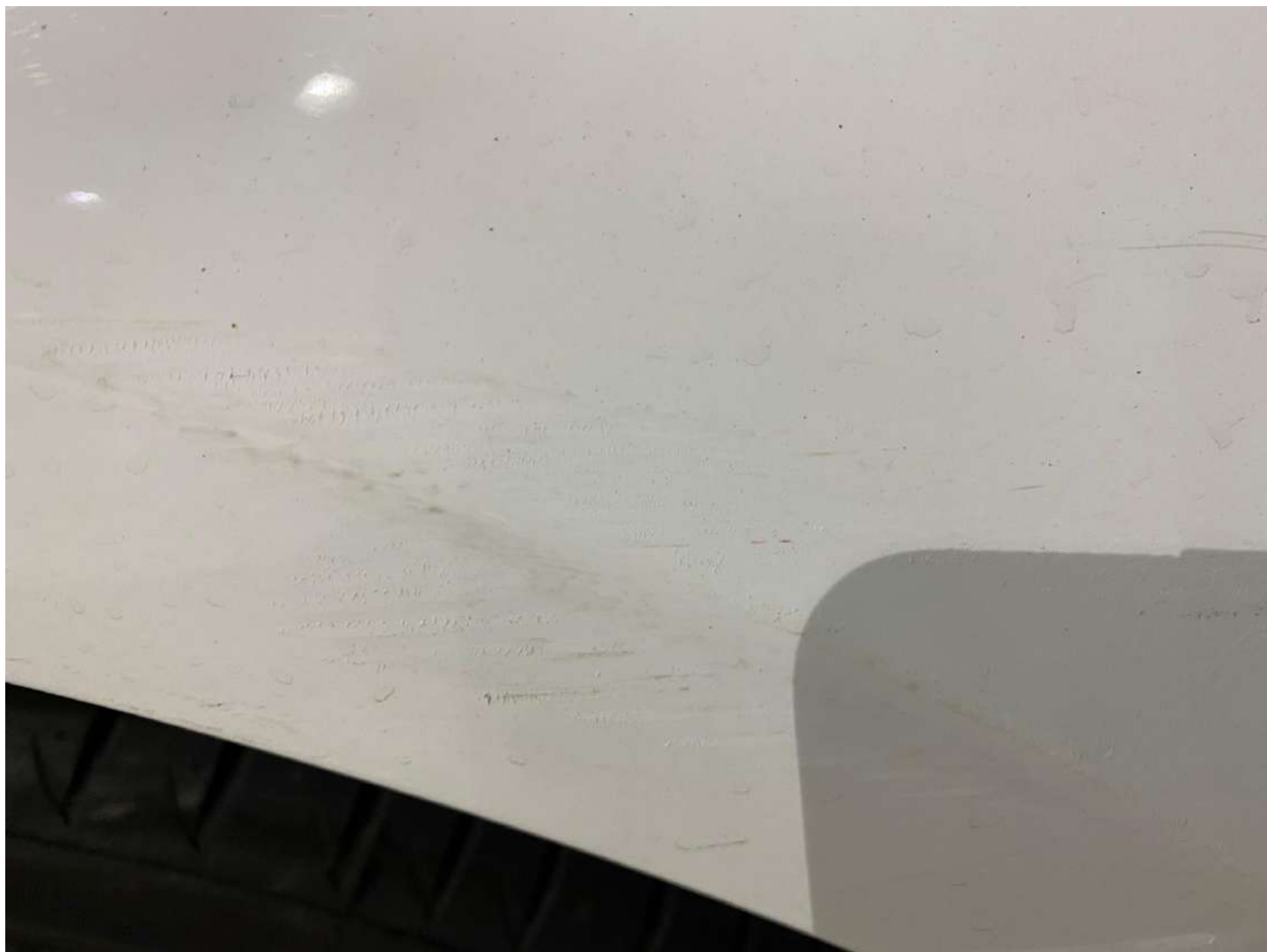
























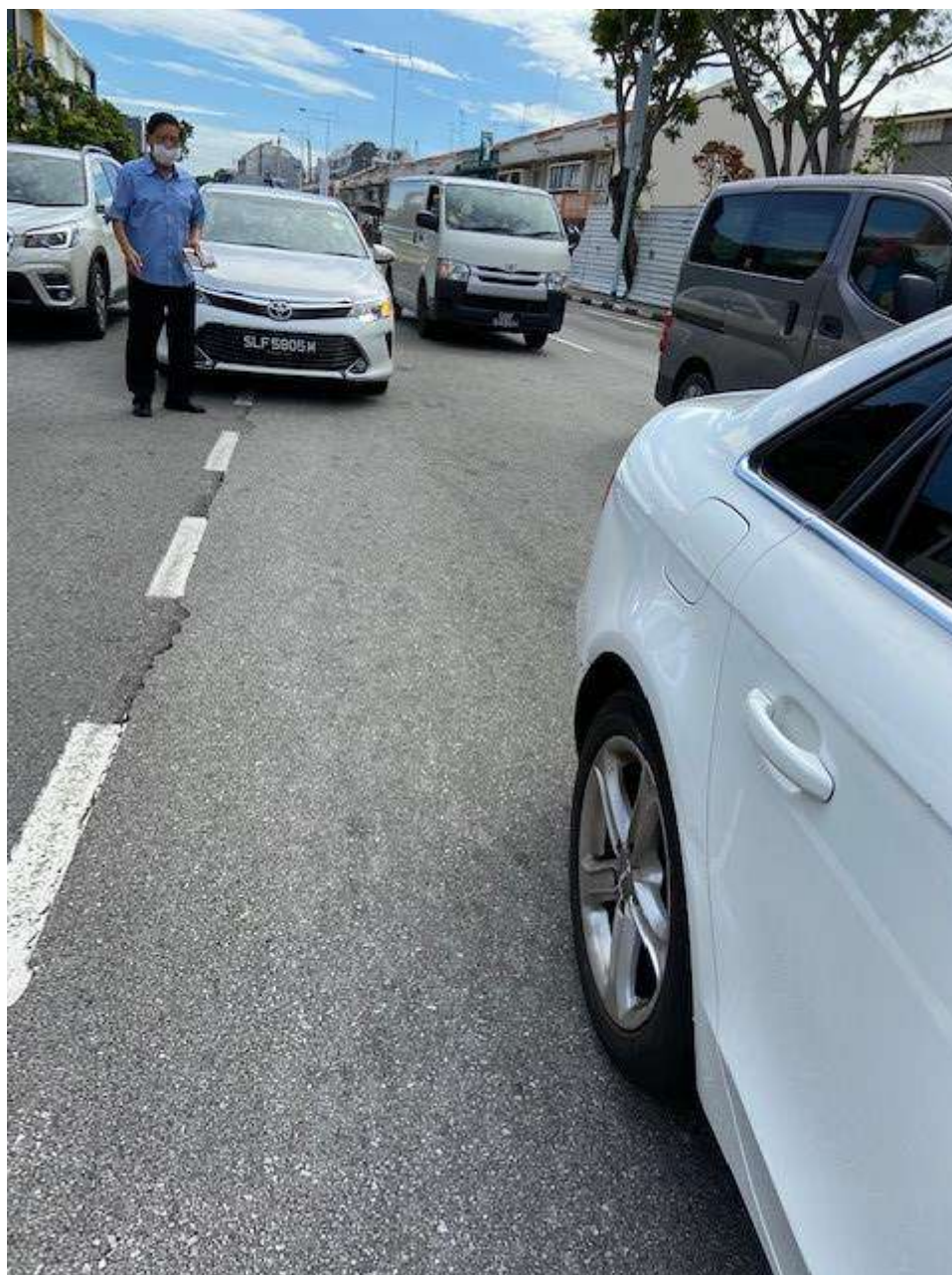














**SINGAPORE
POLICE FORCE**



G/20201213/7029

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POLICE REPORT (NP299)

Report No. G/20201213/7029

Police Station Of Origin
Bedok Division HQ
30 Bedok North Road SINGAPORE 469676
Tel No:1800-2440000

Date/Time Report Made 13/12/2020 15:48	Vide Report No.	Station Diary No.
Name Of Informant CHONG KIM IMM	Address 279 BEDOK SOUTH AVENUE 3 #04-32 SINGAPORE 465458	
ID Type / ID No. NRIC NO / S6917637B	Contact No. Home/Office: Mobile: 96874874	
Nationality SINGAPORE CITIZEN	Email Address CARELCHONG@YMAIL.COM	
Occupation Procurement/Purchasing manager	Sex Female	Age 51
Institution/School Name	Date of Birth 03/06/1969	Race Chinese
Date/Time Of Incident 13/12/2020 10:50 - 13/12/2020 10:55	Location Of Incident 279 BEDOK SOUTH AVENUE 3 #04-32 SINGAPORE 465458	

Brief details.

Dear officer,

I was driving along Changi Road on a second right lane towards Jalan Eunos (around 10.50am in this morning) when a white Toyota Camry (car plate SLF 5805M) turned out from the first right lane and banged onto the rear right side of my car. My right passenger door and the right rear bumper were scratched and dented. I told the male driver that he banged onto my car but he quickly denied and

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 13/12/2020 15:48
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**



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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20201213/7029

claimed that I was in the wrong for filtering into this lane and damaged his front left bumper. I was very shocked by his denial as it was so obvious that I was driving on the second right lane preparing to turn right (both 1st and 2nd right lanes are meant for turning right) but he switched lane from the first right lane to the second right lane. He was very rude and kept insisted I was wrong, the lady passenger joined him and scolded me stupid. I took pictures and told him that there is no point arguing and we will leave it to the respective legal team to decide as he was not ready to compensate me for the damages.

I just checked my rear car camera and it was evidenced that they switched lane without looking at the blind spot and banged onto my car. As the video clips is 16,124KB, I could not attach in this report but I sending photo taken as evidence. I am reporting this to the police for record in case these couples submit false report and counter claim me. At the same time please advise what rights i have over them while I am submitting for car insurance claim from them.

Rgds

Chong Kim Imm

Car plate : SKM9852A

Mobile : 96874874

Subjects Involved			
Victim			
Person Name	CHONG KIM IMM		
ID Type	NRIC NO	ID No	S6917637B
Gender	Female	Age	51
Race	Chinese	Language	English
Signature Of Officer Recording The Report:		Signature Of Informant:	
Not applicable		The identity of the person making this report has been authenticated by SingPass. No signature is required.	
Signature Of Interpreter:		Date/Time:	
Not applicable		13/12/2020 15:48	
Officer In-Charge Of Case:		Classification Of Case:	



**SINGAPORE
POLICE FORCE**



G/20201213/7029

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20201213/7029

Occupation	Procurement/Purchasing manager	Address	279 BEDOK SOUTH AVENUE 3 #04-32 SINGAPORE 465458
Mobile No	96874874	Is Informant A Victim?	Yes
Person Name	CHONG KIM IMM (Informant)		

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

Authentication Stamp

Signature Of Informant:

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

Date/Time:

13/12/2020 15:48

Classification Of Case:



Contact us at
 Hotline: (65) 6532 2888
 E-mail: CustomerService@DirectAsia.com

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act")
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore)
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No.	: MT/00791086
Type of Coverage / Driver Plan	: Car Comprehensive (Value Plan)
1) Vehicle Registration No.	: SKM9852A
Chassis No.	: WAUZZZ8K8EA048657
2) Name of Policy Holder	: CHONG, KIM IMM
3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act	: 30/04/2020 00:00
4) Date/Time of Expiry of Insurance	: 29/04/2021 23:59
5) Persons or Classes of Persons Entitled to Drive	
(a) Any person who is named on the policy who is driving on the Policyholder's permission.	
The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.	
6) Limitations as to use*	
Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business. Private car-pooling arrangements where you commute with passengers and split the fuel expense is covered under the standard policy. Grab Hitch will only be covered if this is the declared usage stated on your Policy Schedule. Only two rides are permitted a day. Other forms of commercial car-pooling or any ride hailing services (e.g. Grab, Go-Jek etc.) are not allowed.	
*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.	
Sum Insured	: Market Value
Own Damage Excess	: S\$ 600.00 (before any applicable GST)
Windscreen Excess	: S\$ 100.00 (before any applicable GST)
Choice of workshop	: DirectAsia approved workshops
Finance company / Hire Purchase	:
Main driver	: CHONG, KIM IMM
Ref.	Named Driver
Named driver (1)	chow, wee chuen
Important Note: This policy is on a named driver basis. The Policyholder has to be named as the Main Driver or Named Driver to be covered. Any unnamed drivers will not be covered.	

PWS/1102/2

Direct Asia Insurance (Singapore) Pte Ltd
 20 Anson Road #08-01 Twenty Anson Singapore 079912
www.DirectAsia.com

Company Registration: 200822671G