

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 16/12/2020 09:56 (SGT)
Date of Accident 15/12/2020 14:40 (SGT)
Exact Location of Accident 8 Elliot Rd, Singapore 458694
Additional Location Information 8,ELLIOT WALK SINGAPORE 458663
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMP240K

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner FOO MEI LIN ROSELINE MRS KONG MEI LIN ROSELINE
NRIC No S1166999I
Email Address ROSSYKONG@GMAIL.COM
Mobile Phone No (Phone) +65-90681923
Alternative Phone No +65-90681923

VEHICLE PARTICULARS

Manufacturer Mitsubishi
Model Attrage
Variant -
Exact purpose for which vehicle was being used at time of accident -
Are you claiming under your own insurance policy for repair to your vehicle? Yes
Vehicle Category Private car

INSURANCE COMPANY

Name of Insurance Company AIG
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 1900157279
Cover Note Number -

DRIVER

Name of Driver FOO MEI LIN ROSELINE MRS KONG MEI LIN ROSELINE
NRIC No S1166999I
Date Of Birth 01/07/1956
Occupation Indoor

Date Of Driving Pass	04/01/1983
Driving experience	37 YEARS AND 11 MONTHS
Gender	Female
Mobile Number	(Phone) +65-90681923
Alt. Phone Number	+65-90681923
Email Address	ROSSYKONG@GMAIL.COM
Address	8 EILLOT WALK
Address complement	-
Postcode	458663
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	Collided into Parked Vehicle
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)	0
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

REFER TO ATTACHMENT

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	XE4394B
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Goods vehicle
Name of Driver	SHAHRUDIN BIN SELAMAT
Contact Number	(Phone) +65-97523800
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-

Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

WITNESS DETAILS

WITNESS 1

Name RICHARD KONG
Phone (Phone) +65-93822426
Email -

WITNESS 2

Name MR LEE
Phone -
Email -

WITNESS 3

Name MR LIM
Phone -
Email -

SKETCH PLAN

IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

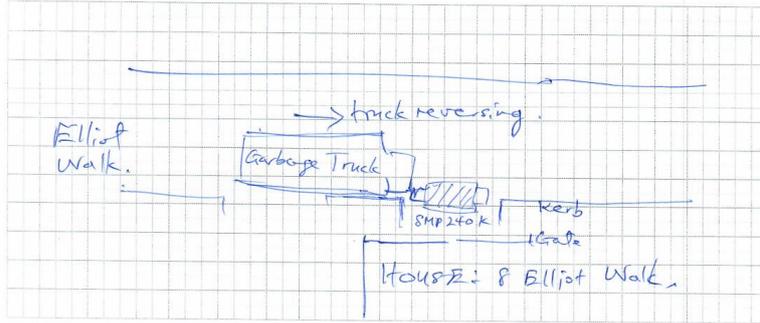
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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: 15/12/20 4:35pm


 Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 15/12/20 4:35pm


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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I parked my car SMP 240 in front of my house gate, well into the entrance of the driveway. At about 2.40 pm on 15 Dec. 2020, we noticed the garbage truck reversing at a speed along Elliot Walk. My husband, Richard Kong (~~93822426~~) (93822426) saw the truck hitting the left side corner of the rear of my car, pushing the car about 2.5 metres up onto the kerb. That section of my car was badly damaged including the entire boot area. As the parking gear was engaged, the forced movement of the car may have caused damage to the autogear system. The front of the undercarriage was also noted damaged when the car was forced up the kerb. The front tyres & their attachments may also be damaged. The front right tyre was hanging over the kerb/drain after the car was pushed kerbside.

DECLARATION

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


 Policyholder's Signature
 Date & Time: 15/12/20


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


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