

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	11/12/2020 17:22 (SGT)
Date of Accident	10/12/2020 19:00 (SGT)
Exact Location of Accident	Near 5 Grange Rd, Singapore
Additional Location Information	GRANGE ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLC7709K
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHRISTOPHER CHONG CHI CHUIN
NRIC No	SXXXX550D
Email Address	CHRISTOPHERCCC@GMAIL.COM
Mobile Phone No	(Phone) +65-81888166
Alternative Phone No	+65-81888166

VEHICLE PARTICULARS

Manufacturer	Audi
Model	Q7
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?	Yes
Vehicle Category	Private car

INSURANCE COMPANY

Name of Insurance Company	AIG
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2100471730-04
Cover Note Number	-

DRIVER

Name of Driver	CHRISTOPHER CHONG CHI CHUIN
NRIC No	SXXXX550D
Date Of Birth	16/09/1974
Occupation	Indoor

Date Of Driving Pass	07/06/1996
Driving experience	24 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81888166
Alt. Phone Number	+65-81888166
Email Address	CHRISTOPHERCCC@GMAIL.COM
Address	17 HOLLAND PARK
Address complement	-
Postcode	247707
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	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)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	CAROLYN TONG
Gender	Female

PASSENGER 2

Name	ISABELLE CHONG
Gender	Female

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

I WAS DRIVING ALONG GRANGE ROAD(NEXT TO SCAPE) TURNING RIGHT TOWARDS ORCHARD LINK WHEN A SMRT BUS LICENSE PLATE NUMBER SG 5870 K KNOCKED INTO MY REAR LEFT FENDER AND DOOR AND CAUSED DAMAGE. I WAS DRIVING IN MY LANE WHEN THE ACCIDENT HAPPENED AND IT APPEARED THAT THE BUS KNOCKED INTO MY CAR BECAUSE IT MADE A TURN AND AS A RESULT ITS REAR RIGHT END CAME INTO CONTACT WITH MY REAR LEFT FENDER. THE BUS DRIVER CALLED HIS COMPANY AND SAID HE ACCIDENTALLY HIT MY VEHICLE. BUS DRIVER LICENSE NUMBER IS G XXXX311 L. BUS DRIVER NAME WANG TAO

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	SG5870K
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Bus
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)	-

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 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: 11/12/20
3:50pm

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



Reporting Centre Personnel's Signature
Name: Tony Fong
NRIC/FIN No.: S7000 947E

GIA/MIC SketchPlanForm 1/3 1

SKETCH PLAN

Grange Road Orchard End

Grange Road

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along Grange Road (next to SCARF) turning right towards Orchard End when a SMRT Bus (license plate number SG 5870K) knocked into my rear left fender and door and caused damage.

I was driving in my lane when the accident happened and it appeared that the bus knocked into my car because it made a turn and as a result its rear right end came into contact with my rear left fender.

The bus driver called DASHIC company and said he accidentally hit my vehicle.

Bus Driver License Number is G-xxxx, 311 L
Bus Driver Name: Wang QD

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

Policyholder's Signature
Date & Time: 11/10/20 3:50pm

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

Reporting Centre Personnel's Signature
Name: Tony Png
NRIC/FIN No.: SXXXX 972





























