

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 28/12/2020 16:45 (SGT)
Date of Accident 26/12/2020 15:15 (SGT)
Exact Location of Accident Singapore
Additional Location Information Thomson Road
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBH622P

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner Pan Pacific Van & Truck Leasing Pte Ltd
Company Reg No 201511635R
Email Address ppemclaims@gmail.com
Mobile Phone No (Phone) +65-96937904
Alternative Phone No (Office) +65-62840827

VEHICLE PARTICULARS

Manufacturer Nissan
Model Cabstar
Variant -
Exact purpose for which vehicle was being used at time of accident Employment
Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only
Vehicle Category Commercial vehicle

INSURANCE COMPANY

Name of Insurance Company India International
Type of Coverage Comprehensive
Fleet Policy Yes
Policy Number D19MFL0005549_01
Cover Note Number -

DRIVER

Name of Driver Cheah Lee Huat
NRIC No S1431659J
Date Of Birth 09/11/1960
Occupation Outdoor

Date Of Driving Pass	28/11/1979
Driving experience	41 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-96937904
Alt. Phone Number	-
Email Address	jecsingapore@jec.com
Address	Apt Blk 212B Punggol Walk
Address complement	#04-713
Postcode	822212
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	Raining
Road Surface	Wet

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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

On 26th December 2020, at/about 1515hrs, I was driving my vehicle A (GBH622P) at/along Thomson road. While driving on the first lane, suddenly the front vehicle B (SMD8924G) jammed on his brakes. I applied brake but my vehicle skidded and hit on the front vehicle B. My vehicle skidded due to the rain and wet road surface. Nobody was injured.

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	SMD8924G
Vehicle Manufacturer	Mitsubishi
Vehicle Model	Lancer
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Private car
Name of Driver	Lee Jun Qi
NRIC No	T0023453I
Contact Number	(Phone) +65-87993400
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 purposes 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.

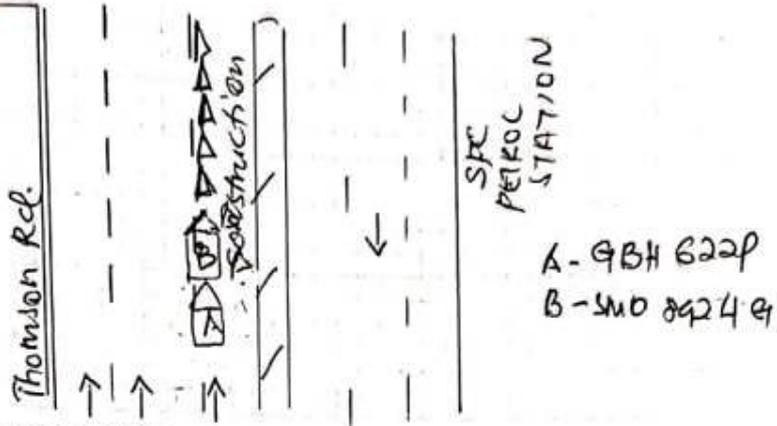
Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 26/12/20 - 180' 5H

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

SKETCH PLAN SHELL

Novena Rise →



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 26/12/20, at about 151thrt. I was driving my vehicle GBH 622P along Thomson Rd. while driving in first lane, suddenly front vehicle SMD 8924G applied jambraked. I stop my applied brake but my vehicle skidded and hit onto front vehicle SMD 8924G. My vehicle skidded due to rain and wet surface. Nobody was injured.

DECLARATION

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

 Policyholder's Signature
 Date & Time

[Signature]
 Driver's Signature
 (if driver is not the policyholder)
 Date & Time 26/12/20 -/8031

[Signature]
 Reporting Centre Personnel's Signature
 Name Kheryng
 NRIC/FIN No.



























26 Dec 2020 3:24:06 pm
Singapore





