

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 30/12/2020 10:47 (SGT)
Date of Accident 29/12/2020 12:50 (SGT)
Exact Location of Accident Jln Mutiara, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMJ5740H

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner CHARMAINE MARIE YANG XUEMIN
NRIC No SXXXX529D
Email Address c_maine21@hotmail.com
Mobile Phone No (Phone) +65-98363244
Alternative Phone No +65-98363244

VEHICLE PARTICULARS

Manufacturer Honda
Model Freed
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 - Reporting only
Vehicle Category Private car

INSURANCE COMPANY

Name of Insurance Company NTUC
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 5120267946
Cover Note Number -

DRIVER

Name of Driver CHARMAINE MARIE YANG XUEMIN
NRIC No SXXXX529D
Date Of Birth 21/12/1980
Occupation Indoor

Date Of Driving Pass	14/09/2020
Driving experience	3 MONTHS
Gender	Female
Mobile Number	(Phone) +65-98363244
Alt. Phone Number	+65-98363244
Email Address	c_maine21@hotmail.com
Address	BLK 59 ENG HOON STREET
Address complement	#02-65
Postcode	160059
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)	8
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	HUSBAND
Gender	Male

PASSENGER 2

Name	DAUGHTER
Gender	Female

PASSENGER 3

Name	DAUGHTER
Gender	Female

PASSENGER 4

Name	FRIEND
Gender	Female

PASSENGER 5

Name	FRIEND DAUGHTER
Gender	Female

PASSENGER 6

Name	FRIEND DAUGHTER
Gender	Female

PASSENGER 7

Name	HELPER
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
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Police Station Name	Central Division Headquarters
Police Station Phone No	(Phone) +65-18002240000
Alt. Police Station Phone No	(Fax) +65-62200877
Police Station Address	391 New Bridge Road #03-112 Police Cantonment Complex Block A Singapore 088762
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT A/20201229/7017

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	SLW4279Z
Vehicle Manufacturer	Toyota
Vehicle Model	Corolla
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private hire
Name of Driver	TEO WEE SENG
NRIC No	SXXXX750I
Contact Number	(Phone) +65-97729344
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.

<p><i>Muhammad</i> 29/12/20 5:20 pm</p> <p>Policyholder's Signature / Date & Time</p>	<p><i>[Signature]</i> 30/12/2020</p> <p>Driver's Signature (if driver is not the policyholder) / Date & Time</p>	<p><i>[Signature]</i></p> <p>Witnessed by Reporting Centre Personnel</p>
<p>Sketch Plan</p>		

Describe Circumstances of the Accident

I made a wide turning into Jalan Mutiara from River Valley Road. My right corner hit the back door of the car turning out into River Valley Road.

There were 4 adults and 4 kids in my car. No one was injured. The other driver also came out of car to exchange details. He didn't have any injuries.

Police Report #120201229/7017

Declaration

We declare the foregoing particulars are true in every respect.

Mami
29/12/20, 5:20pm

Policyholder's Signature / Date & Time

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

[Signature]
30/12/2020

Witnessed by Reporting Centre Personnel













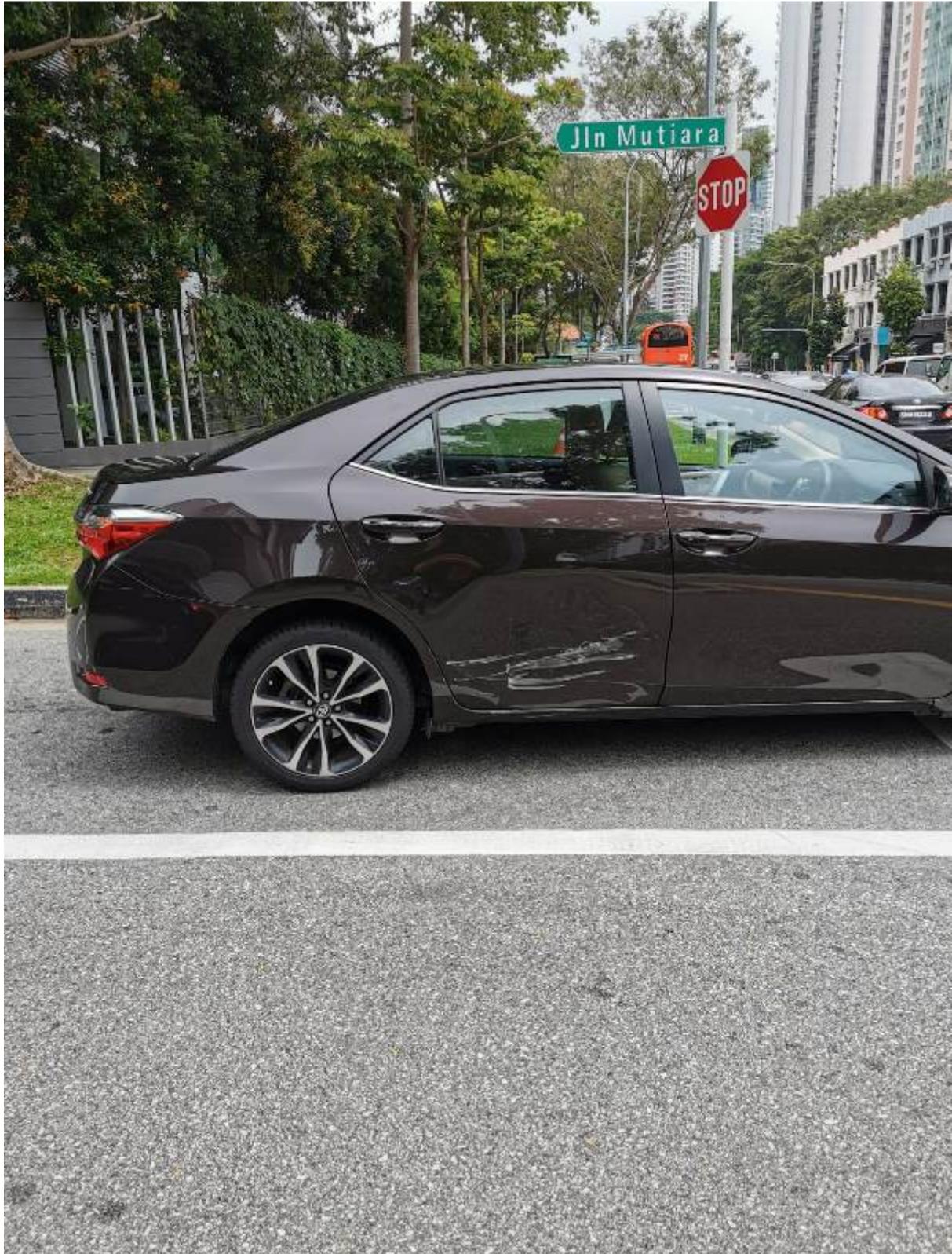
















**SINGAPORE
POLICE FORCE**



A/20201229/7017 1 of 1

POLICE REPORT (NP299)

Report No. A/20201229/7017

Police Station Of Origin
Central Division HQ
A 391 New Bridge Road #03-112 Police
Cantonment Complex SINGAPORE 088762
Tel No:1800-2240000

Date/Time Report Made 29/12/2020 13:28	Vide Report No.	Station Diary No.
Name Of Informant CHARMAINE MARIE YANG XUEMIN	Address 59 ENG HOON STREET #02-65 SINGAPORE 160059	
ID Type / ID No. NRIC NO / S8040529D	Contact No. Home/Office:	Mobile: 98363244
Nationality SINGAPORE CITIZEN	Email Address C_MAINE21@HOTMAIL.COM	
Occupation Marketing and sales representative (technical)	Sex Female	Age 40
	Date of Birth 21/12/1980	Race Chinese
Institution/School Name	Language English	
Date/Time Of Incident 29/12/2020 12:50 - 29/12/2020 13:00	Location Of Incident 59 ENG HOON STREET #02-65 SINGAPORE 160059	

Brief details.

Minor car accident where my car SMJ5740H bumped the right rear door of car SLW4279Z in opposite direction while turning left into Jalan Mutiara from River Valley Road.

I'm a P plate driver from Sept 2020. And currently 6 months pregnant. The other driver is about 60+yo and a private hire driver.

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: 29/12/2020 13:28
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	