

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 22/01/2021 12:05 (SGT)
Date of Accident 19/01/2021 18:23 (SGT)
Exact Location of Accident Bukit Timah, Singapore
Additional Location Information JUNCTION OS STEVENS RD/WHITLEY
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKT7131Z

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TAN HUI NAM
NRIC No SXXXX114F
Email Address huinam.tan@gmail.com
Mobile Phone No (Phone) +65-96380329
Alternative Phone No +65-96380329

VEHICLE PARTICULARS

Manufacturer Audi
Model A7
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 MSIG
Type of Coverage Comprehensive
Fleet Policy No
Policy Number D 300123396 QMY
Cover Note Number -

DRIVER

Name of Driver TAN HUI NAM
NRIC No SXXXX114F
Date Of Birth 07/04/1942
Occupation Indoor

Date Of Driving Pass	09/03/1961
Driving experience	59 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96380329
Alt. Phone Number	+65-96380329
Email Address	huinam.tan@gmail.com
Address	67A PASIR PANJANG HILL
Address complement	-
Postcode	118903
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	GRAND DAUGHTER
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

PLEASE REFER TO SKETCH PLAN

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



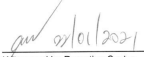
Vehicle Registration Number	SMW7142C
Vehicle Manufacturer	Mitsubishi
Vehicle Model	Lancer
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	ZAINAL ABIDIN
Contact Number	(Phone) +65-91386952

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

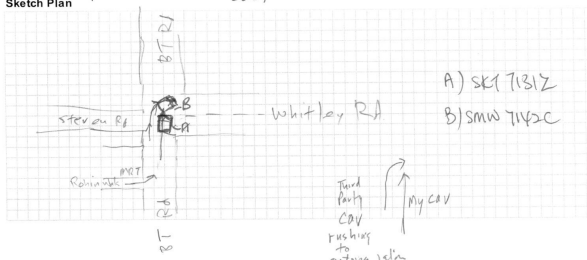
SKETCH PLAN

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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> Policyholder's Signature / Date & Time 21 Jan 3.50 p. 2021</p>	<p> Driver's Signature (If driver is not the policyholder) / Date & Time 21 Jan 3.50 p. 2021</p>	<p> Witnessed by Reporting Centre Personnel 02/01/2021</p>
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Sketch Plan



Describe Circumstances of the Accident 2021

(1) On Tuesday 19 Jan around 18.25 hr
I drive out Robin Walk near Stevenage
Vehicles are many stopping at junction to wait
for lights to change
I managed to get into center of 3 lanes
I proceeded to move straight along BT Rd
At center of road junction I sense
a vehicle on my left trying
to potang along or cut through my path
Immediately I slow my vehicle
As the car was turning I saw it was
very close to my car. I STOPPED
Immediately
The turning car knew he was going to graze
my left fender and he also stop. Too late
he kissed my car.

(2) We agreed to move our cars away as
traffic was heavy at that hour
The driver was Zainal Abidin
He told me I was supposed to turn right
and not go straight
He was supposed to go straight but he
rushed to turn right and cut my path
Luckily I sense his vehicle and took
precaution to slow down & stopped
my vehicle. Else there ~~would~~ be bad
to both parties would be bad.
That's all.

* NOTE And color
The right fender of my car has had scratches brown in color
They are result of my own scratches with my
house and gate. The 2nd party car is white

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &
Time 21 Jan 2021
3.50 p.

Driver's Signature (If driver is not the policyholder) / Date
& Time 21 Jan 2021
3.50 p.

Witnessed by Reporting Centre
Personnel 21/01/2021

















