

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	27/01/2021 13:51 (SGT)
Date of Accident	26/01/2021 17:20 (SGT)
Exact Location of Accident	Woodlands Rd, Singapore
Additional Location Information	LAMP POST 153
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SME4111G
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	IVAN SU JING QUAN
NRIC No	SXXXX344J
Email Address	IVAN.SU86@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-89092613
Alternative Phone No	+65-89092613

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Sylphy
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 - Claiming third party
Vehicle Category	Private car

INSURANCE COMPANY

Name of Insurance Company	NTUC
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5111701097-01
Cover Note Number	-

DRIVER

Name of Driver	IVAN SU JING QUAN
NRIC No	SXXXX344J
Date Of Birth	26/05/1986
Occupation	Outdoor

Date Of Driving Pass	04/11/2008
Driving experience	12 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-89092613
Alt. Phone Number	+65-89092613
Email Address	IVAN.SU86@YAHOO.COM.SG
Address	BLK 293D BUKIT BATOK ST 21 #10-540
Address complement	-
Postcode	654293
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	Collision - Change/cross lane
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)	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

REFER TO STATEMENT.

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	SLG3794T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	TAN WOON HUI
NRIC No	SXXXX325C
Contact Number	(Phone) +65-97554665
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.



Policyholder's Signature / Date & Time

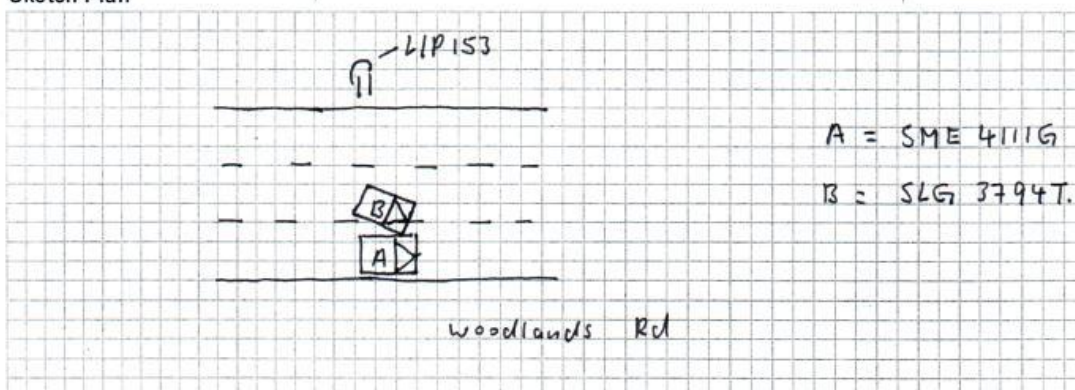


Driver's Signature (if driver is not the policyholder) / Date & Time



Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

I was travelling along woodlands Rd on the first lane. suddenly veh B from left lane cut into my lane and hit onto my veh left hand side.

I was travelling along Woodlands Rd on the first lane. Suddenly veh B from left lane cut into my lane and hit onto my veh left hand side.

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time
 Driver's Signature (if driver is not the policyholder) / Date & Time
 Witnessed by Reporting Centre Personnel

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

Policyholder's Signature / Date & Time	Driver's Signature (if driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel
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Driver's Signature (If driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel
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Witnessed by Reporting Centre
Personnel











































Annex D

NOTICE OF REPORTING

This is to confirm that Ivan Su Jing Quan, S8615344J has reported to the Police a traffic accident which occurred on 26/01/2021 at about 1720hrs along Woodlands Road Lamppost No. 153. The traffic accident does not consist of the below following criteria:

- i) Involvement with Pedestrian/Cyclist
- ii) At this moment, involving parties did not obtain more than 3 days of Medical Leave.
- iii) No Government property/vehicle damaged
- iv) Hit and Run Accident
- v) No foreign vehicle was involved
- vi) Nobody involved in the accident was conveyed by ambulance

Involving the following vehicles:

V1) SME4111G, (Driver: Ivan Su Jing Quan, S8615344J. Hp: 89092613)

V2) SLG3794T, (Driver: Tan Woon Hui (Chen Enhui), S7918325C. Hp: 97554665)

2 If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: Sc/Sgt Shawn Pheng

Date: 26/01/2021

Time: 2105hrs

S/D Ref: 74

Police Post/Unit: Bukit Batok NPC


BUKIT BATOK NPC
21 BUKIT BATOK EAST AVENUE 4
SINGAPORE 659840
TEL: 1800-865 9999