

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 08/02/2021 15:03 (SGT)
Date of Accident 06/02/2021 10:10 (SGT)
Exact Location of Accident Simei Street 1, Singapore
Additional Location Information SERVICE RD TWDS THE EXIT BARRIER NEXT TO THE
GUARDHOUSE OF MELVILLE PARK CONDOMINIUM
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLW4527H

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TAN YOKE HON
NRIC No SXXXXX303H
Email Address jywongcm@gmail.com
Mobile Phone No (Phone) +65-94304248
Alternative Phone No +65-97485221

VEHICLE PARTICULARS

Manufacturer Honda
Model Jazz
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 Liberty Insurance
Type of Coverage Comprehensive
Fleet Policy No
Policy Number SD20V01580/VPC2/R01
Cover Note Number -

DRIVER

Name of Driver WONG CHI MENG
NRIC No SXXXXX208C
Date Of Birth 01/11/1948

Occupation	Indoor
Date Of Driving Pass	27/02/1971
Driving experience	50 YEARS
Gender	Male
Mobile Number	(Phone) +65-97485221
Alt. Phone Number	-
Email Address	jywongcm@gmail.com
Address	203 TANAH MERAH KECHIL AVE
Address complement	-
Postcode	465729
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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)	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

PLS REFER TO THE ATTACHED 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	GBK2731D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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.

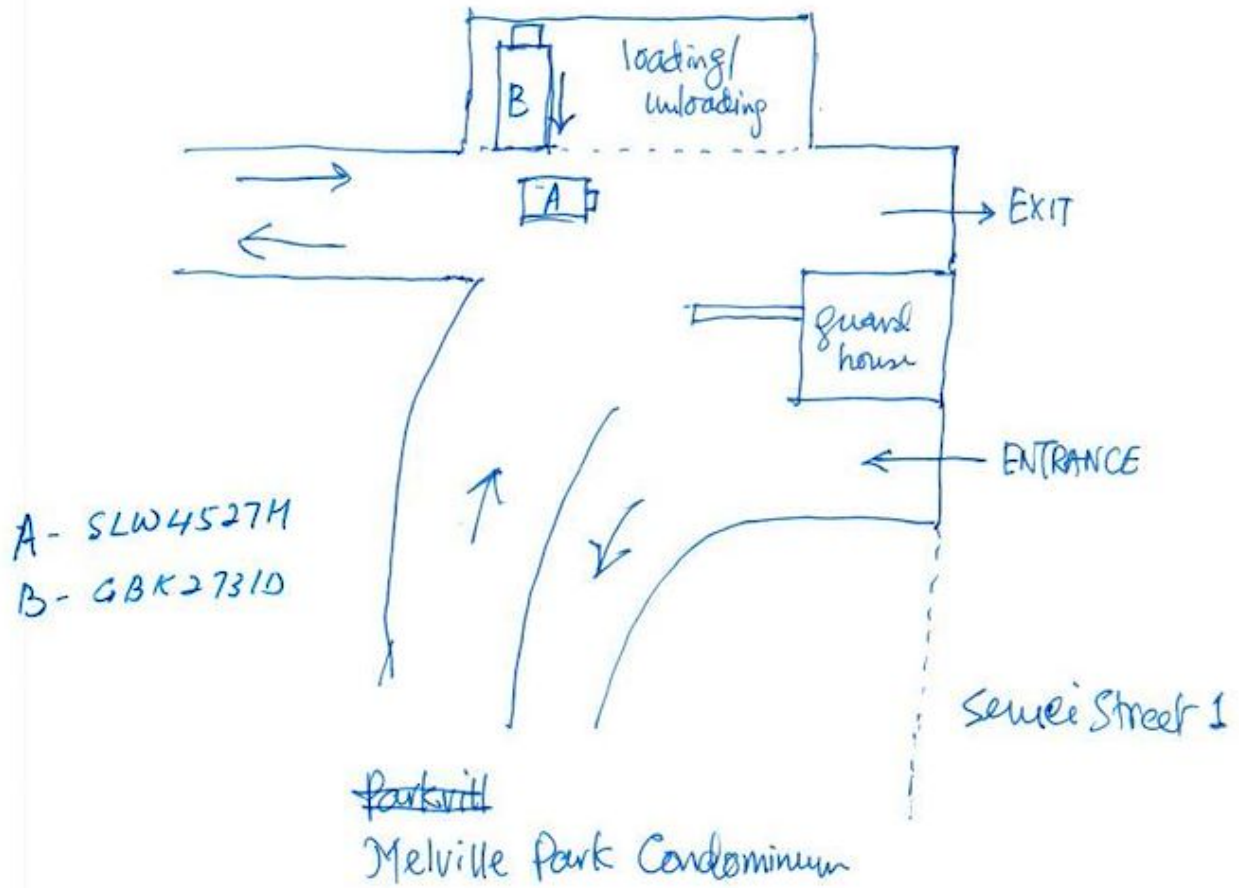
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan





Describe Circumstances of the Accident

P/s refer to the attached statement.

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

Report on Accident happened on Saturday 6 February 2021

A Sunny morning on Saturday 6 February 2021, about 10.10 am, I was driving along the internal service road towards the exit barrier, next to the guardhouse of Melville Park Condominium at Semei Street 1.

When I reached the guardhouse, a Toyota lorry GBK 2731D which belongs to KSB Integrated Services Pte Ltd, parked at the Loading & Unloading Bay, reversed at a fast speed and hit the left rear door of my Honda Jazz car SLW4527H and damaged it badly.

There was no visible damage at the back of the lorry.

The driver together with 2 workers were in the lorry and none of the workers was at the rear directing the reverse of the lorry. This is a common practice when a parked lorry reverses it onto the driveway.

The condominium Security Manager of Interlock Security and Investigation Services Pte Ltd, Mr. De Krester Lesir told them that the driver could have a clear view and avoided the accident if they had reverse-parked their lorry like the other parked lorries & vans, and not drove & parked their lorry head-in.



