

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 willful 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.

VEHICLE REGISTRATION AND ACCIDENT STATEMENT DETAILS

Date of Submission 15/02/2021 17:31 (SGT)
 Date of Accident 12/02/2021 15:15 (SGT)
 Exact Location of Accident Singapore
 Additional Location Information Yishun Ave 4
 Country/State of Loss Singapore

VEHICLE REGISTRATION AND DETAILS OF OWN VEHICLE

Vehicle Registration Number SKS4896A

INSURED/POLICYHOLDER

Is company? No
 Name Of Registered Owner ONG JOO LEONG
 NRIC No SXXXX000J
 Email Address garyongjl@gmail.com
 Mobile Phone No (Phone) +65-90938093
 Alternative Phone No (Office) +65-90928364

VEHICLE PARTICULARS

Manufacturer Mitsubishi
 Model Lancer
 Variant -
 Exact purpose for which vehicle was being used at time of accident Private hire
 Are you claiming under your own insurance policy for repair to your vehicle? Yes
 Vehicle Category Private car

INSURANCE COMPANY

Name of Insurance Company AIG
 Type of Coverage Comprehensive
 Fleet Policy No
 Policy Number 2100409544-05
 Cover Note Number -

DRIVER

Name of Driver ONG JOO LEONG
 NRIC No SXXXX000J
 Date Of Birth 22/11/1971
 Occupation Outdoor

Date Of Driving Pass
Driving experience
Gender
Mobile Number
Alt. Phone Number
Email Address
Address
Address complement
Postcode
Is the driver the policyholder?
If No, Relationship of the Driver with the Insured
Does Driver Own Other Vehicles?
Vehicle Registration Number of Other Vehicle Owned by Driver
Insurance Company of Other Vehicle Owned by Driver

02/12/2003
17 YEARS AND 2 MONTHS
Male
(Phone) +65-90938093
(Office) +65-90928364
garyongjl@gmail.com
BLK 604 SENJA ROAD #17-21
-
670604
Yes
-
No
-
-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
Weather Conditions
Road Surface

Collision - Head to Rear
Raining
Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?
Number of vehicles involved in the accident
Was anybody injured in the Accident?
Was any injured conveyed to hospital by ambulance?
Was any other material or property damaged?
Number of Passengers (Including Driver)
Has the driver been approached by unknown person(s)
soliciting/offering accident claims assistance?

No
2
No
-
Yes
5
No

PASSENGER 1

Name
Gender

SANDY SEET
Female

PASSENGER 2

Name
Gender

VENUS SEET
Female

PASSENGER 3

Name
Gender

JOYCE ONG
Female

PASSENGER 4

Name
Gender

SOH JONG ENG
Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?
Was notice of intended Prosecution given?
If yes, against whom?

No
No
-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHMENT

ATTACHMENT(S)

Are accident photos available for attachment?
Was there any video captured by Car Camera?

Yes
Yes

Was there any audio recorded? No

DETAILS OF OTHER VEHICLE PROPERTY

Vehicle Registration Number	GBG1969M
Vehicle Manufacturer	Toyota
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	ONG LAY TENG
Contact Number	(Phone) +65-83322391
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.

[Handwritten Signature]
 15/2/21, 0930hrs

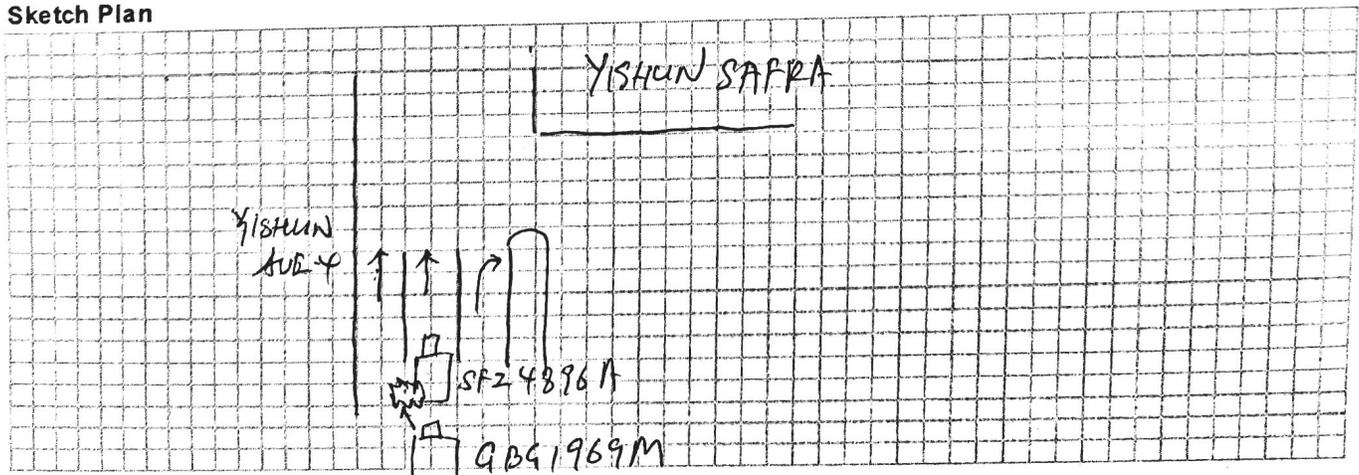
[Handwritten Signature]
 15/2/21

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

On 12 Feb 2021, at about 1515 hrs (weather was raining). I was driving my vehicle SFZ 4896A along Yishun Ave 4 and had to slow down at the junction of ~~the~~ Yishun Ave 4 and Yishun Central (Outside SAPRA Yishun) due to a vehicle cutting from the right. As I was about to move on, a grey Toyota Van GBG 1969M impact the rear of my vehicle. Both vehicles stopped at a bus stop further up the junction.

Driver of GBG 1969M: Ong Lay Teng NRIC: T01008750
Contact No: 9332391.

There was damage to the rear LHS of SFZ 4896A
Damage was to: a) Rear LHS of Bumper
b) Rear LHS of the Boot

⑤ At about 1550 hrs, I reported the accident to Yishun North NPC but was advised no police report required as there is no injury or damage to government property.

⑥ There is in car footage of the accident (front + rear camera) and photo of damage to SFZ 4896A and vehicle involved GBG 1969M.

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time
15/2/21, 0930hrs.

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

Witnessed by Reporting Centre Personnel