

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	15/02/2021 17:34 (SGT)
Date of Accident	14/02/2021 00:01 (SGT)
Exact Location of Accident	Yishun Ave 1, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLH7860D
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	NGO YUN LING JOANNE
NRIC No	SXXXX773I
Email Address	JNYL07@YAHOO.CO.KR
Mobile Phone No	(Phone) +65-92719777
Alternative Phone No	(Home) +65-93392058

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Harrier
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
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	Allied World
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	AVPPSB0551422002
Cover Note Number	-

DRIVER

Name of Driver	LIM YING LI CHARA JOY
NRIC No	SXXXX442G
Date Of Birth	21/08/1995
Occupation	Indoor

Date Of Driving Pass	27/01/2021
Driving experience	1 MONTH
Gender	Female
Mobile Number	(Phone) +65-93392058
Alt. Phone Number	-
Email Address	JNYL07@YAHOO.CO.KR
Address	BLK 605 YISHUN STREET 61
Address complement	#08-313
Postcode	760605
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Friend
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)	4
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	NGO YUN LING JOANNE
Gender	Female

PASSENGER 2

Name	NGO ZHEN YI JACELYN
Gender	Female

PASSENGER 3

Name	NGO SI HAN DESMOND
Gender	Male

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 SKETCH PLAN AND ADDENDUM FORM

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	SHD2456P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
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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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.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

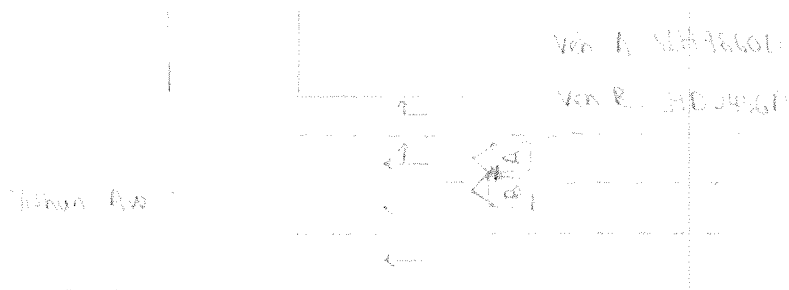
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [Form] and any other personal information provided by me or possessed by my insurer (collectively the "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 a 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

On 14 Feb 2021 @ 12 01 am, I am travelling along Yishun Ave 1 on lane 2.

As I was thinking of wanted to turn right or go straight at a very low speed about 35km/h

Out of sudden, the vehicle "B" SHD2456P cut into my lane at the fast speed and hit onto my left side of the front vehicle bumper, fender and left front door without stopping. And we have to horn at he till he stopped after the traffic junction. And the taxi driver just said lets insurance company do the accdient repairs settlement.

I (Owner/ In -charge/ Driver) _____ Nric No _____ Vehicle no _____

will be sending my above stated damaged vehicle to Company name _____ for my vehicle damaged repairs and insurance claims

GPE had clearly informed me on new GIA rules. I accepted all liabilities and discharged Goodbell Engineering Pte Ltd

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



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00 UEN: S66550020G / GST Reg. No.:
M400012735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

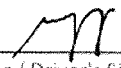
Original Report No : SG0F212F0005 Vehicle Registration No: SLH 7860 D
Name (as shown in NRIC) : Lim Ying Li, Chara Joy NRIC/FIN/Passport No : S9530442G
(*Vehicle Driver / ~~Vehicle Owner~~) (*) Please delete as appropriate
Address : Block 605, Yishun Street 61, #08-313 Singapore (760605)
Contact (Tel) : N.A Mobile No. : 93392058
Email Address : charaajoy@gmail.com
Date of Accident : 14 February 2021 Time of Accident : 00:00
Place of Accident : Yishun Avenue 1
Insurance Company : Allied World


(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

On 14th February 2021 at 00:00, I was driving motor vehicle SLH7860D intending to go home. Whilst I was driving along Yishun Avenue 1 on lane 2, I had intended to go straight. I was driving slowly at est 35 kph in my lane. Then suddenly, motor taxi vehicle SHD2456P came at a fast speed from my left from the 3rd lane, brushed across my vehicle's front left side door and hit into the front left vehicle bumper fender. After the accident, the driver of the taxi did not stop immediately but continued driving ahead. I would assume he wants to escape from his responsibility of this accident. I had to horn at him and followed him from behind until he finally stopped his car.

He then came out of his car and said let the insurance company to do the accident repair settlement. His motor taxi sustained scratches to the centre right side of his car. Unfortunately, the car I drove did not have any recordings in the SD card due to some card error which we tried to retrieve via different means, but to no avail. The other motor taxi has it and he should allow his cctv footage to be used if he disputes the claim for the damage caused to my car. No one suffered any injury.


Policyholder / Driver's Signature
Date:


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Date: