

# 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 .....	19/02/2021 14:07 (SGT)
Date of Accident .....	18/02/2021 15:55 (SGT)
Exact Location of Accident .....	4 Hillview Rise, Singapore
Additional Location Information .....	THE HILLIER CARPARK
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SBT1972J
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### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	PEH WOEL LING JUSTINE
NRIC No .....	SXXXX779D
Email Address .....	justwoeilpeh@gmail.com
Mobile Phone No .....	(Phone) +65-98899369
Alternative Phone No .....	+65-91500852

### VEHICLE PARTICULARS

Manufacturer .....	BMW
Model .....	X1
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 .....	United Overseas Insurance
Type of Coverage .....	Comprehensive
Fleet Policy .....	No
Policy Number .....	DHOM120038421801
Cover Note Number .....	-

### DRIVER

Name of Driver .....	LIM WAN CHIN ANANBEL
NRIC No .....	SXXXX559A
Date Of Birth .....	23/11/1974
Occupation .....	Indoor

Date Of Driving Pass .....	15/02/1995
Driving experience .....	26 YEARS
Gender .....	Female
Mobile Number .....	(Phone) +65-91500852
Alt. Phone Number .....	-
Email Address .....	justwoeilpeh@gmail.com
Address .....	194 CANBERRA DRIVE #05-51
Address complement .....	-
Postcode .....	767959
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) .....	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### PASSENGER 1

Name .....	FRIEND
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 AND ATTACHMENT

#### 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

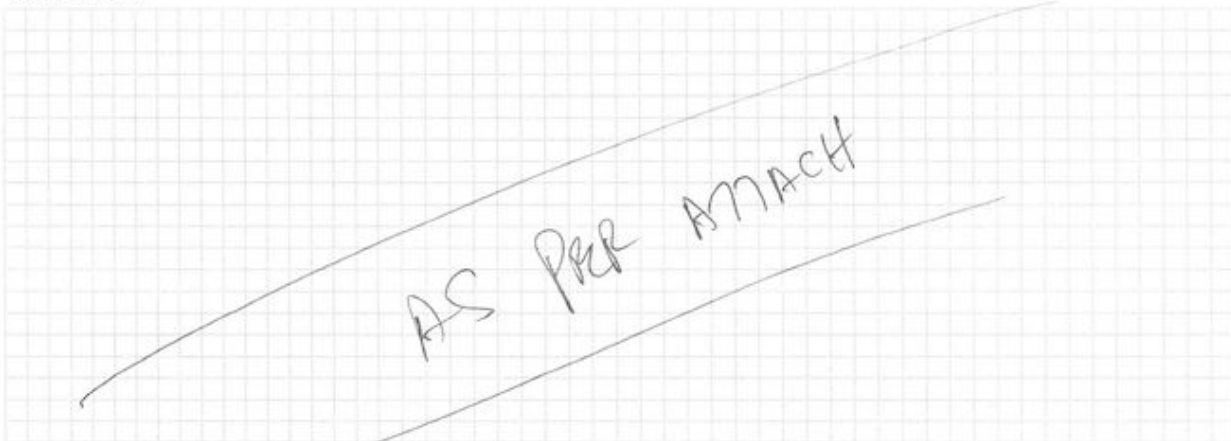
Vehicle Registration Number .....	SMW4285T
Vehicle Manufacturer .....	Toyota
Vehicle Model .....	Corolla
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	DARREN YAP SHENG
NRIC No .....	SXXXX115H

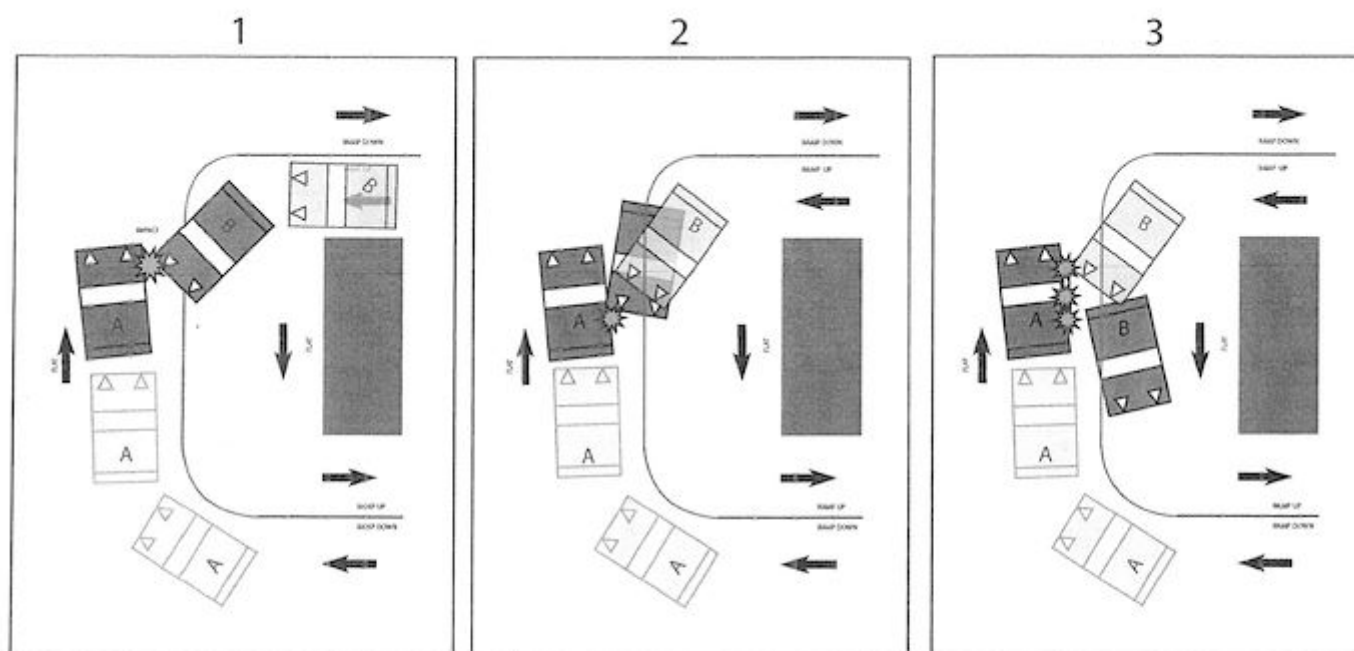
Contact Number .....	(Phone) +65-87888868
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	1

**SKETCH PLAN****IMPORTANT NOTICE**

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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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

 19 Feb 21, 11:20am Policyholder's Signature / Date & Time	 19/Feb/2021 11:26am Driver's Signature (If driver is not the policyholder) / Date & Time	 19/02/2021 Witnessed by Reporting Centre Personnel
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**Sketch Plan**



# Accident Circumstance Sketch Plan

Date of accident : 18 February 2021 at 3.55 pm

Location : Carpark The Hillier, 4-6 Hillview Rise

A) SBT 1912J

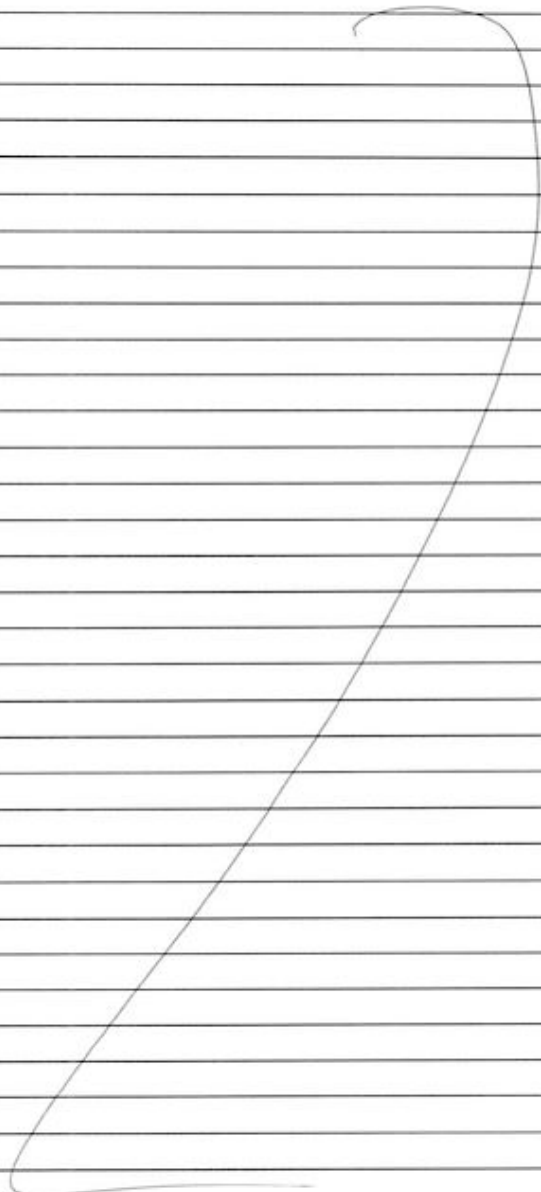
B) SMO 4285T

*gaw 19/02/2021*




## Describe Circumstances of the Accident


REFER TO ATTACHMENT



## Declaration

We declare the foregoing particulars are true in every respect.

 19 Feb 21, 11:20am  
Policyholder's Signature / Date & Time

 19/Feb/2021, 11.20am  
Driver's Signature (If driver is not the policyholder) / Date & Time

 19/02/2021  
Witnessed by Reporting Centre Personnel

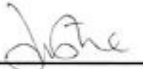



**Describe Circumstances of the Accident**


On 18 February 2021 at 3.55pm, I was driving my BMW 'SBT1972J' (car A as shown in the sketch plan) down the carpark of the condominium 'The Hiller' at 4-6 Hillview Rise, to exit the carpark. Suddenly, a grey Toyota Corolla Altis 'SMW4285T' (car B as shown in the sketch plan, driven by Darren Yap Sheng, NRIC: S9513115H) sped up the carpark ramp, without slowing down to check on oncoming cars. And as the Toyota came around the bend, the accelerated speed it was driven at, resulted in a centrifugal force that pulled the car outwards to make a wide curve and the vehicle crossed the center divider lane of the flat ground level where my car was on. The Toyota came into my lane and crashed into my car on the driver's side. I braked immediately and stopped my car upon impact. However, the Toyota did not stop and instead it continued forward and drove into my car and dented my right passenger back door as well.

**Declaration**

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

 19 Feb 21 - 11:20am.  
**Policyholder's Signature**  
**Date & Time**

  
**Driver's Signature (if driver is not policyholder)**  
**Date & Time** 19 Feb 2021, 11:20am

 19/02/2021  
**Witnessed by Reporting Centre Personnel Name & Signature**













