

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 24/02/2021 11:40 (SGT)
Date of Accident 23/02/2021 08:42 (SGT)
Exact Location of Accident KJE, Singapore
Additional Location Information ALONG KJE (PIE TOWARDS TUAS)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBF3903U

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner KEW STRUCTURES PTE LTD
Company Reg No 200000626R
Email Address KEWSTR@SINGNET.COM.SG
Mobile Phone No (Phone) +65-64573891
Alternative Phone No (Office) +65-64573891

VEHICLE PARTICULARS

Manufacturer Toyota
Model TOYOTA DYNA 150 MANUAL
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 - Reporting only
Vehicle Category Commercial vehicle

INSURANCE COMPANY

Name of Insurance Company Lonpac
Type of Coverage Comprehensive
Fleet Policy No
Policy Number Z/20/VC00/108719
Cover Note Number -

DRIVER

Name of Driver ZHENG DEJIAN
NRIC No S2744902F
Date Of Birth 08/02/1963
Occupation Outdoor

Date Of Driving Pass	22/02/2006
Driving experience	15 YEARS
Gender	Male
Mobile Number	(Phone) +65-82136666
Alt. Phone Number	-
Email Address	KEWSTR@SINGNET.COM.SG
Address	28 WOODLANDS DRIVE 16 #03-18
Address complement	-
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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 - Head to Rear
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 SKETCH PLAN

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	SLU7215Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LIM CHENG HAN
NRIC No	S1804287H
Contact Number	(Phone) +65-97858741
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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Kew Structures Pte Ltd
 462, Tagore Industrial Avenue,
 Singapore 787831

Email: Kewstr@singnet.com.sg

Tel: (65)64573891 Fax: (65)64574491

Policyholder's Signature

Date & Time:



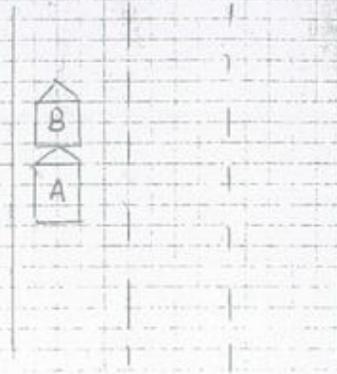
Driver's Signature
 (If driver is not the policyholder)
 Date & Time:



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

SKETCH PLAN

PIE Towards Tuas



Vehicle A: 9BF 3903U

B: SLU 7215Z

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling along PIE Towards Tuas on 23/2/21 @ 8:42 am. Suddenly vehicle B in front of me jam brake and I can't brake in time hit onto rear portion of vehicle B (SLU 7215Z).

DECLARATION

We declare the foregoing particulars are true in every respect.

462, Tagore Industrial Avenue
Singapore 787831

Email: Kewstr@singnet.com.sg

Tel: 64575594 Fax: (65) 6457449
Date & Time:

[Signature]

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

[Signature]

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





