

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	26/04/2021 15:24 (SGT)
Date of Accident	24/04/2021 10:10 (SGT)
Exact Location of Accident	583 Orchard Rd, Singapore 238884
Additional Location Information	Forum Shopping Centre Exit Carpark
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDT172J
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Alvin Tan Teck Chin
NRIC No	SXXXX921F
Email Address	alvin3043@yahoo.com
Mobile Phone No	(Phone) +65-98154181
Alternative Phone No	+65-97861891

VEHICLE PARTICULARS

Manufacturer	Volvo
Model	S60
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
Transmission	Auto
CC	2000

INSURANCE COMPANY

Name of Insurance Company	HL Assurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	MP315249
Cover Note Number	-

DRIVER

Name of Driver	Alvin Tan Teck Chin
NRIC No	SXXXX921F

Date Of Birth	30/03/1965
Occupation	Indoor
Date Of Driving Pass	05/05/1994
Driving experience	26 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98154181
Alt. Phone Number	+65-97861891
Email Address	alvin3043@yahoo.com
Address	15A Eden Grove
Address complement	-
Postcode	539070
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Raining
Road Surface	Wet

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	Tan Siew Lian
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

While i was checking for the traffic to exit the car park (right turn). Suddenly i heard a bang from the rear vehicle B collided onto my vehicle

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	SCY6106Y
Vehicle Manufacturer	Volkswagen
Vehicle Model	Sharan
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Private car
Name of Driver	Ely Yanti
Contact Number	(Phone) +65-91777596
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	3

SKETCH PLANIMPORTANT NOTICE

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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' 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.

26 Apr
1430w
alvin fac

Policyholder's Signature / Date & Time

26 Apr 21
1430
alvin fac

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

26 APR 2021
[Signature]

Witnessed by Reporting Centre Personnel

Sketch Plan

Cuscuton Rd

Hard Rock Cafe

Folium Capital

Describe Circumstances of the Accident

Location: Car Park Exit at Forum Shopping Centre.
Date of Accident: 24/4/21 Time of Accident: 10:00 AM
Vehicle A: SOT 172T Vehicle B: SOT 6106Y. Vehicle C: —
While I was checking for the traffic to exit the car park (right turn), suddenly I heard a bang from the rear vehicle, followed by a collision onto my westcoast vehicle.

Declaration

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

abusefan 26 Apr 1430hrs
Policyholder's Signature / Date &
Time

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

Witnessed by Reporting Centre
Personnel

