

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 04/05/2021 13:53 (SGT)
Date of Accident 03/05/2021 15:00 (SGT)
Exact Location of Accident Guillemard Rd, Singapore
Additional Location Information ALONG GUILLEMARD RD TRAVELLING EAST -AFTER
JUNCTION WITH LOR 36 GEYLANG
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLT3693H

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner JAMES PANG
NRIC No SXXXX753A
Email Address james@pangs.sg
Mobile Phone No (Phone) +65-81808545
Alternative Phone No +65-81808545

VEHICLE PARTICULARS

Manufacturer Peugeot
Model 3008
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 1199

INSURANCE COMPANY

Name of Insurance Company Auto & General Insurance (Singapore) Pte. Limited.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number P10302050R01
Cover Note Number 27/10/2020 TO 26/10/2021

DRIVER

Name of Driver JAMES PANG

NRIC No	SXXXX753A
Date Of Birth	04/10/1979
Occupation	Indoor
Date Of Driving Pass	27/01/2016
Driving experience	5 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81808545
Alt. Phone Number	+65-81808545
Email Address	james@pangs.sg
Address	60 BAYSHORE RD
Address complement	#28-03
Postcode	469982
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 - Major/Minor Rd
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	SARAH PANG
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

REFER TO SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBH8075R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Commercial vehicle
Name of Driver	TAN MENG HUI
NRIC No	SXXXX412G
Contact Number	(Phone) +65-88231118
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

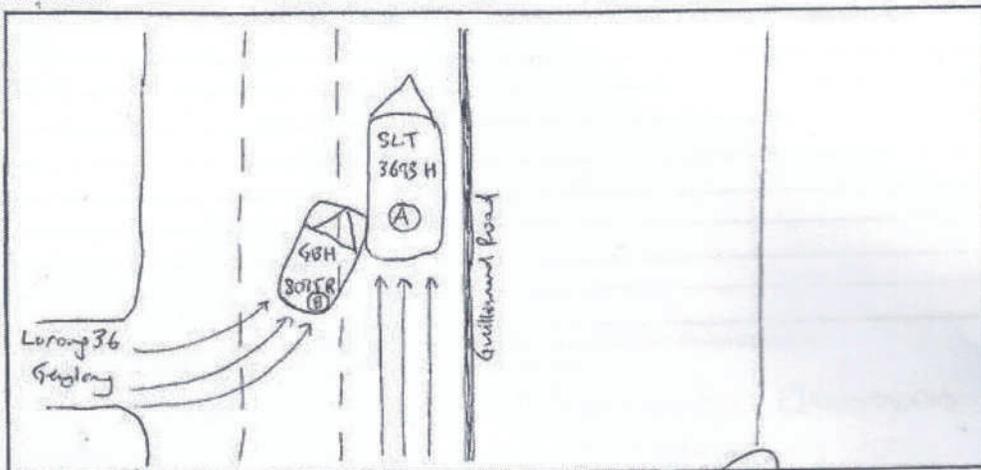
Vehicle: SLT 3693H

Budget Direct

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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.

Sketch Plan



[Signature]
 3 4th May 2021
 1pm.
 Policyholder's Signature / Date & Time

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

[Signature]
 Witnessed by Reporting Centre Personnel
 Neelu
 4/05/2021
 ANSHU MOTOR COMPANY

Date of accident: 3rd May 2021 Time: 3:00 pm Location: Along Guillemard Road travelling east, just past Lor 36 Geylang
My Vehicle A: SLT 3693 H Vehicle B: 6EH 9075 R Vehicle C: ✓

SKETCH PLAN

Describe Circumstances of the Accident.

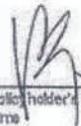
I was driving along Guillemard Road travelling east in the right hand lane. As I passed Lor 36 Geylang on the left, vehicle B was slowly pulling out of Lor 36 Geylang, into Guillemard Road. It looked to me like he vehicle B was pulling into the middle lane, and so I continued along current speed. It was only when I was nearing vehicle B that I realised vehicle B may be attempting to enter my lane on the right, and may not have seen me. By then it was too late to gain brake, so I veered slightly to the right along the edge of the divider in the hope of avoiding a clash. In the next moment I felt an impact to our back left section. I slowed down and stopped on the left side, as did vehicle B.

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information.

Claim OD/TP at Ah Lim Motor Claim OD/TP at other workshop Reporting Only

We declare the foregoing particulars are true in every respect.

Vehicle: SLT 3693 T

 4th May 2021
1pm

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


Witnessed by Reporting Centre Person
Alek
4/05/2021



AH LIM MOTOR COMPANY