



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	01/07/2021 12:01 (SGT)
Date of Accident	30/06/2021 16:10 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	UPPER THOMSON TOWARDS YISHUN
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBC7991D
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	SUTL CORPORATION PTE LTD
Company Reg No	196800047D
Email Address	Steve.toh@sutl.com
Mobile Phone No	(Phone) +65-98329819
Alternative Phone No	+65-98329819

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv200
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	710

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	5115408551-01
Cover Note Number	-

DRIVER

Name of Driver	NG KIEN CHOON
NRIC No	S1720835G



Accident report SN0721710008

Date Of Birth	14/01/1965
Occupation	Outdoor
Date Of Driving Pass	03/04/1985
Driving experience	36 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98329819
Alt. Phone Number	-
Email Address	Steve.toh@sutl.com
Address	BLK 490 ADMIRALTY LINK #06-89
Address complement	-
Postcode	750490
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	4
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle 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 TO 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	SLM61S6E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	TOH BOON CHAI
NRIC No	S7124248Z
Contact Number	-
Address	-



Accident report SN0721710008

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

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLS5291B
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	QUEK GEK SIN
NRIC No	S7707548H
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SLQ9322E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private hire
Name of Driver	HO KUM FOOK
NRIC No	S1638834C
Contact Number	-
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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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.

SUTL CORPORATION PTE LTD
SUTL House

100, Pagar Road, Singapore 078800

Policyholder's Signature

Date & Time: 01/01/2020

Driver's Signature

(If driver is not the policyholder)

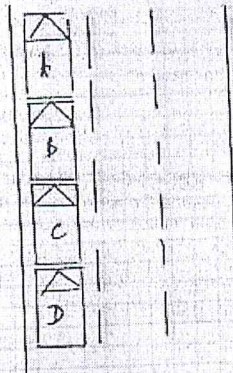
Date & Time: 01/01/2020

Reporting Centre Personnel's Signature

Name: HLEA 34161

NRIC/FIN No.:

SKETCH PLAN



A - GBC799LD
B - SL46166E
C - SL55291B
D - SL09322F

UPPER THOMSON TOWARDS YISHUN

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 30/06/2021 at around 1610hrs, I stopped along Upper Thomson towards Yishun as a police car in front of me stopped when suddenly SL46166E collided into my rear. There was a total of 4 vehicles involved in the accident. No injuries were sustained in the accident.

DECLARATION

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

SUTL CORPORATION PTE LTD

SUTL House

100-J Pasir Panjang Road #05-00

Singapore 118525

Tel: 6342 5555 Fax: 6342 3555

Date & Time: 2/7/21

1700

Driver's Signature

(If driver is not the policyholder)

Date & Time: 01/07/21

1700

Reporting Centre Personnel's Signature

Name: *[Signature]*

NRIC/PIN No.: CP207595