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 witholding 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 22/06/2021 18:01 (SGT) Date of Accident 22/06/2021 09:55 (SGT) **Exact Location of Accident** Cavenagh Rd, Singapore

Additional Location Information

Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Employment

Private car

Auto

1591

No - Claiming third party

Vehicle Registration Number SMY6129M

INSURED/POLICYHOLDER

Is company? Yes

Name Of Registered Owner Ministry of Home Affairs Company Reg No

TXXXXX016D

Email Address ridwan1007@yahoo.com.sg Mobile Phone No (Phone) +65-97215982

Alternative Phone No. +65-97215982

VEHICLE PARTICULARS

INSURANCE COMPANY

Manufacturer Kia Model Cerato

Variant Exact purpose for which vehicle was being used at time of

Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category

Transmission CC

Tokio Marine Insurance Singapore Ltd

Name of Insurance Company Type of Coverage Comprehensive

Fleet Policy No

Policy Number 21-MM000177-R00 Cover Note Number

DRIVER

Name of Driver Tok Teang Wan NRIC No SXXXX394E

Accident report SL03216M0004

Page 1 of 10

Date Of Birth Occupation Date Of Driving Pass

Driving experience

Gender

Mobile Number Alt. Phone Number

Email Address Address

Address complement

Postcode

Is the driver the policyholder? If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

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 Weather Conditions Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident

Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance?

Was any other material or property damaged? Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)

soliciting/offering accident claims assistance?

PASSENGER 1

Name

Gender

DETAILS OF POLICE ACTION

Was the accident reported to the police? Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

Please refer to the attachment.

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera?

Was there any audio recorded?

Vehicle Registration Number

Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category

23/03/1957

13/10/2006

14 YEARS AND 8 MONTHS

ridwan1007@yahoo.com.sg

Blk 309 Yishun Ring Road #06-1244

(Phone) +65-96894421

Outdoor

Male

760309

Employee

Side Swipe

Clear

Dry

No

No

Yes

2

No

Male

No

No

Mohammed Taufik

2

Nο

No

Yes

Yes

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Taxi

Accident report SL03216M0004

SHB5678G

Page 2 of 10

Name of Driver NRIC No Contact Number Address

Address

Address complement Postcode

Insurance Company Name

Nature Of Damage

Details of property damaged in accident No. Of Passenger (Including Driver)

Lye Poh Wah SXXXX743D

Blk 507A Yishun Avenue 4 #03-100

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761507

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SKETCH PLAN

IMPORTANT NOTICE

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8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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 yersilaw firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the poice), 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;
- (a) 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 histories' 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 GA 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.

for Permanent Secretary Ministry of Home Affair

Singapore \ Policyholder's Signature / Date &

Time

2 2 JUN 2021 Sketch Plan

Driver's Signature (# driver is not the policyholder) / Date

2 2 JUN 2021

& Time

Witnessed by Personne) Jenny Lim

Refer to attachment.



Describe Circumstances of the Accident

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22 JUN	2021 & Time	2 2 JUN 2021		Personnel	Jenny Lim