# **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 10/08/2021 15:10 (SGT) Date of Accident 07/08/2021 11:55 (SGT) Exact Location of Accident Marine Parade Rd, Singapore Additional Location Information Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Hyundai

Vehicle Registration Number SJI 7477F

#### INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner UNS (PTE) LTD Company Reg No 2XXXXX785M Email Address unssg@singnet.com.sg Mobile Phone No (Phone) +65-97168823 Alternative Phone No +65-97168823

### VEHICLE PARTICULARS

Manufacturer

Model Azera Variant Exact purpose for which vehicle was being used at time of Employment accident Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Private car Transmission Auto CC 3342

# **INSURANCE COMPANY**

Name of Insurance Company Lonpac Insurance Bhd Type of Coverage ThirdPartyFireTheft Fleet Policy Policy Number Z21VP05028262 Cover Note Number

## DRIVER

Name of Driver TAN HOCK CHUAN NRIC No. SXXXX091B

Date Of Birth 30/01/1952 Occupation Indoor Date Of Driving Pass 22/06/1972 Driving experience 49 YEARS AND 2 MONTHS Gender Mobile Number (Phone) +65-97168823 Alt. Phone Number Email Address unssg@singnet.com.sg Address BLK 250 BANGKIT ROAD #11-406 Address complement Postcode 670252 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured **OWNER** Does Driver Own Other Vehicles? Nο 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 Side Swipe Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 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? Yes Police Station Name Traffic Police Police Station Phone No (Phone) +65-65470000 Alt. Police Station Phone No (Fax) +65-65474900 Police Station Address 10 Ubi Avenue 3 Singapore 408865 Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO POLICE REPORT T/20210807/7015 ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SLM5979H Vehicle Manufacturer Vehicle Model Vehicle Variant

Private car

Vehicle Colour
Vehicle Category

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

#### SKETCH PLAN

#### IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Formmust be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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. The 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.
- 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

l 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.

Policyholder's Signature / Date &

Driver's Signature (If driver is not the policyholder) / Date & Time Witnessed by Reporting Centre Personnel

Sketch Plan

REP	To	POLICE	REPORT	7/20210807/7015	5,
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	Jan 1997 (1997)				
claration					
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Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20210807/7015

# REPORT OF A TRAFFIC ACCIDENT

	ne Report N 21 15:26	Made:	Vide Report No.: G/20210807/0091	Station Diary No.:		
Informa	nt's Partic	ulars				
Name of Informant: TAN HOCK CHUAN			Address: 252 BANGKIT ROAD #11-40	6 SINGAPORE 670252		
ID Type / ID No.: NRIC NO / S0213091B		91B	Contact No.: Home/Office:	Mobile: 97168823		
Nationality: SINGAPORE CITIZEN		EN	Email: unssg@singnet.com.sg			
Sex: Age: Date of Birth: Male 69 30/01/1952			Type of Informant: Driver			
Race: Chinese			Language: English	Institution / School Name:		
Occupation: Managing director/Chief executive officer			Driving Licence Information: Class: 3	Date of Expiry:		

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 07/08/2021 11:55	Type of Location Straight Road
Location: MARINE PAF	RADE ROAD			
Weather: Clear		Road Surface: Dry		Road Speed Limit: 30 Km/h
Weather: Clear Traffic Flow: One Way				

Vahiala Na	Tuno	Make	Model	Color	Conditio	No of
Vehicle No.	Туре	Iviake	Model	COIOI	Conditio	10 01
SJL7477E	Car	HYUNDAI	AZERA3.3	Maroon	Slightly Damaged	0
SLM5979H	Car				Slightly Damaged	0





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20210807/7015

#### CONTINUATION OF REPORT

Details of Vehicle Insurance						
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date		
SJL7477E	LONPAC INSURANCE BHD.	NIL	03/01/2021	02/01/2022		

Details of Perso	n Involved	SUCE PROPERTY	COOK BUILDING			
Any Pedestrian I	nvolved: No					
No. of Pedestrian	s Injured: NIL		Use of Pe	f Pedestrian Crossing: NA		
Driver			Different Control			
Name	TAN HOCK CHUAN		ID No.	S0213091B		
Related Vehicle	SJL7477E (Car)			Contact No	. 97168823	
Hospital/Clinic	NIL			Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL	
Date	NIL		Date	NIL		
No. of Days gran	ted Medical Leave	NIL	Degree of	NIL		

# Brief Details.

ON 07/08/2021 I WAS DRIVING ALONG MARINE PARADE ROAD TOWARDS CITY. IT IS A 3 VEHICLE LANE, I WAS DRIVING STRAIGHT IN THE MIDDLE. AS I WAS DRIVING IN MY LANE SUDDENLY SLM5979H FROM 3RD LANE CUT INTO MY LANE AND COLLIDED INTO MY VEHICLE.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

3 of 3 Report No. T/20210807/7015

CONTINUATION OF REPORT

Sketch Plan

Authentication Stamp

NP168

Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 07/08/2021 15:26
Officer In Charge Of Case: TP / TPIB / VILTON HIA WEE SIANG Contact No.: 65476232	Classification Of Case: