

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 27/08/2021 14:32 (SGT)
Date of Accident 26/08/2021 11:20 (SGT)
Exact Location of Accident CTE, Singapore
Additional Location Information TOWARDS ANG MO KIO AVENUE 1
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKF1676G

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner LEE LAY ENG
NRIC No S8124515J
Email Address siewdes1976@yahoo.com
Mobile Phone No (Phone) +65-98465721
Alternative Phone No (Home) +65-98465721

VEHICLE PARTICULARS

Manufacturer BMW
Model 318i
Variant 2.0 AT D/AB 2WD 4DR GAS/D SR DRL
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? Yes
Vehicle Category Private car
Transmission Auto
CC 1995

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMPCSNW00076262100
Cover Note Number -

DRIVER

Name of Driver SIEW CHAN MUN (XIAO ZHENWEN)
NRIC No S7621009H

Date Of Birth	10/07/1976
Occupation	Outdoor
Date Of Driving Pass	19/08/1997
Driving experience	24 YEARS
Gender	Male
Mobile Number	(Phone) +65-82551818
Alt. Phone Number	-
Email Address	siewdes1976@yahoo.com
Address	BLK 174A HOUGANG AVENUE 1 #10-1501
Address complement	-
Postcode	531174
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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 - Change/cross lane
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 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

On 26 August 2021 @ 1120hrs, i was driving my car SKF1676G along CTE (towards Ang Mo Kio Ave 1) on the 3rd lane of the expressway when the accident happen. I was trying to change lane to the 4th lane to my right side and i hit the car infront on his right hand rear side fender & right rear rim. His car plare number is SLL7030L, (Gold) Honda vezel.

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

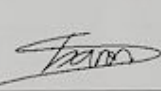
Vehicle Registration Number	SLL7030R
Vehicle Manufacturer	Honda
Vehicle Model	Vezel
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-

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


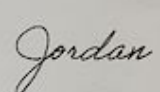
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8. **Consent under the Personal Data Protection Act (PDPA)**
I understand, acknowledge, agree and consent that:
(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or 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.

 27/08/2021 - 12pm

Policyholder's Signature / Date & Time

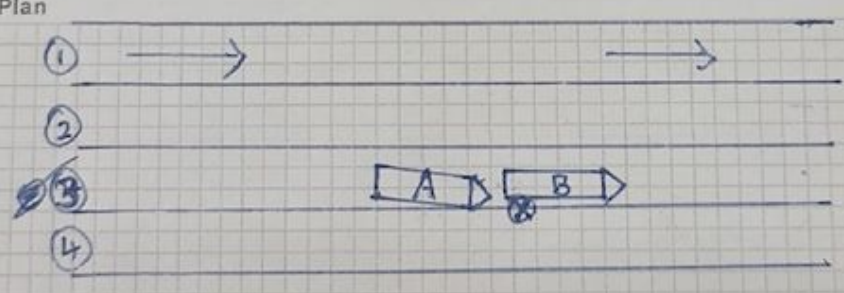
 27/08/2021 12pm

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

Witnessed by Reporting Centre Personnel

Sketch Plan

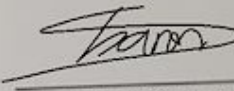



Describe Circumstances of the Accident

On 26 AUGUST 2021 @ 11:20 hrs. I was driving my car SKF 1676G along CTE (Towards Ang Mo Kio AOE 1) on the 3rd lane of the Expressway when the accident happen. I was trying to change lane to the 4th lane to my right side and I hit the car in front on his right hand rear side fender & right rear rim. His car plate number is SLL7030L, (GOLD) HONDA VEZEL.

Declaration

We declare the foregoing particulars are true in every respect.

 27/08/2021 - 12pm
 Policyholder's Signature / Date & Time

 27/08/2021 12pm
 Driver's Signature (If driver is not the policyholder) / Date & Time

Jordan
 Witnessed by Reporting Personnel

