

SV05218V0002 / Vin's Motor Pte Ltd [575722]
 ENTRY DATE & TIME: 31/08/2021 11:51 (SGT)
 SUBMITTED BY: Raymond Tao Yun Loong
 VERSION: 1 (31/08/2021 11:51 (SGT))

Att: Denise Tay
 Fax 67564315

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 Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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	31/08/2021 11:51 (SGT)
Date of Accident	30/08/2021 08:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Along Seng Kang East Rd
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLN7543M

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	NG WEI TAT, EDWIN
NRIC No	S7935646H
Email Address	EDWIN2005S@MSN.COM
Mobile Phone No	(Phone) +65-96978078
Alternative Phone No	(Home) +65-96978078

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Vezel
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 - Reporting only
Vehicle Category	Private car
Transmission	Auto
CC	1496

INSURANCE COMPANY

Name of Insurance Company	FWD Singapore Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	PNPV2018-00005087-01
Cover Note Number	-

DRIVER

Name of Driver	NG WEI TAT, EDWIN
NRIC No	S7935646H

Date Of Birth	05/11/1979
Occupation	Indoor
Date Of Driving Pass	08/09/2007
Driving experience	13 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96978078
Alt. Phone Number	(Home) +65-98978078
Email Address	EDWIN2005S@MSN.COM
Address	Apt Blk 250 Klm Keat Link #03-89
Address complement	-
Postcode	310250
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 - Change/cross lane
Weather Conditions	Raining
Road Surface	Wet

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

Same as 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	GBE3253S
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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

SKETCH PLAN

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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.
8. Consent under the Personal Data Protection Act (PDPA)
I understand, acknowledge, agree and consent that:
 - (i) 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/potential 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 and 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.

By: 3/09/21 11:30am
Policyholder's Signature / Date & Time:

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

Witnessed by Reporting Centre Personnel

Sketch Plan



SKETCH PLAN #2

Describe Circumstances of the Accident

Section: Circumstances of the Accident

Happened along Ganga Gang Ghat Rd towards
Bhamburda Green. That lorry in my left lane cut
into my lane and I had to turn him to alert him
but still late as his back hit my front side.

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre
Personnel

