

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	05/11/2021 10:00 (SGT)
Date of Accident	03/11/2021 18:20 (SGT)
Exact Location of Accident	Braddell Rd, Singapore
Additional Location Information	BRADDELL ROAD (ENTRANCE RAMP ONTO FLYOVER AT BISHAN ROAD -BRADDELL ROAD INTERSECTION)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGR6881G
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	GOH SER SIAN ARDEN (WU SHIXIAN ARDEN)
NRIC No	S7432673J
Email Address	ARDENGSS@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-81988481
Alternative Phone No	(Office) +65-98289603

VEHICLE PARTICULARS

Manufacturer	Volkswagen
Model	Passat
Variant	VW PASSAT 1.8 L
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 - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1800

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	SP2000515915
Cover Note Number	

DRIVER

Name of Driver	GOH SER SIAN ARDEN (WU SHIXIAN ARDEN)
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NRIC No	S7432673J
Date Of Birth	10/10/1974
Occupation	Indoor
Date Of Driving Pass	12/09/1995
Driving experience	26 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81988481
Alt. Phone Number	(Office) +65-98289603
Email Address	ARDENGSS@YAHOO.COM.SG
Address	3A ONTARIO AVE
Address complement	#02-05
Postcode	576192
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 - Head to Rear
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

PLEASE REFER TO THE SKETCH PLAN & ACCIDENT STATEMENT

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	SLM4656X
Vehicle Manufacturer	Hyundai
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	XIE ZHENYU COSMO
Contact Number	(Phone) +65-81254083
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

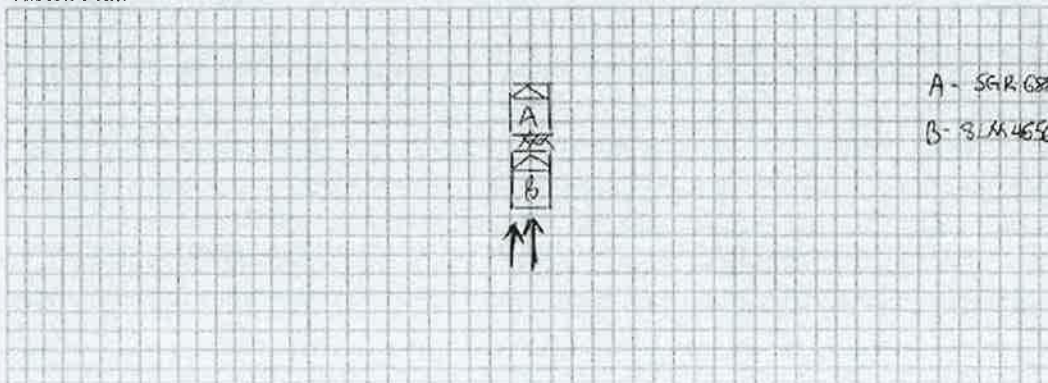
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**
I understand, acknowledge, agree and consent that :
(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.


Policyholder's Signature / Date &
Time 5 Nov 21, 0830hrs

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


Witnessed by Reporting Centre
Personnel

Sketch Plan



Describe Circumstances of the Accident

I was conveying along Braddell Road, awaiting to enter the slip-ramp (RHS) onto the flyover at Bishan Road - Braddell Road intersection. Traffic flow was heavy, so cars were slowly inching forward. I was travelling slowly (<40km/h) when my rear was knocked into by a car from behind.


My car jolted forward and I came to a halt when I realised I was knocked into.

The 3rd party driver approached me and apologised for knocking into my car's rear end.

He explained he was being pressured by a lorry who was behind him to speed up, and did not pay attention to my car's proximity when he hit me.

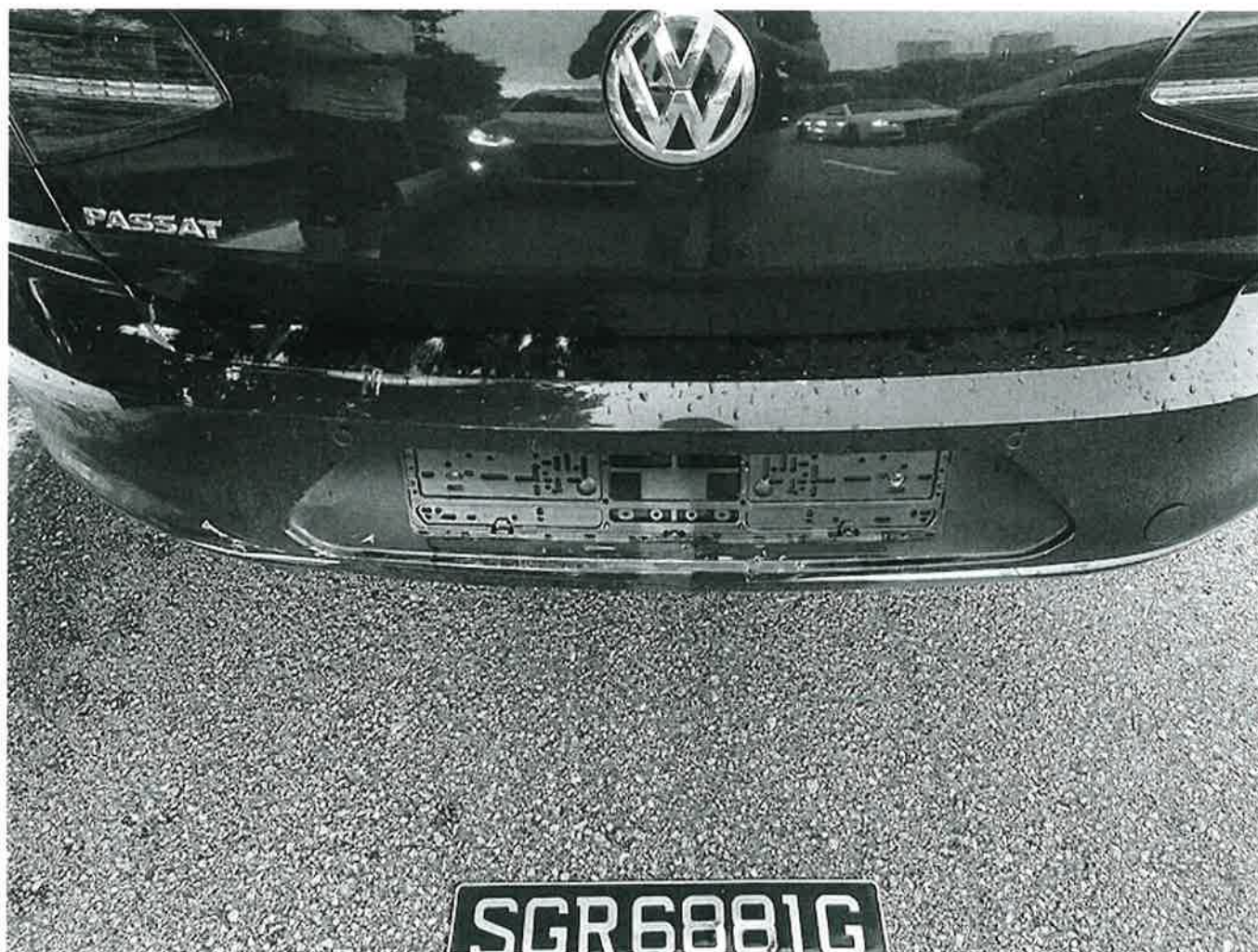
Declaration

We declare the foregoing particulars are true in every respect.


 Policyholder's Signature / Date & Time
 5 Nov '21, 0830hrs

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


 Witnessed by Reporting Centre Personnel



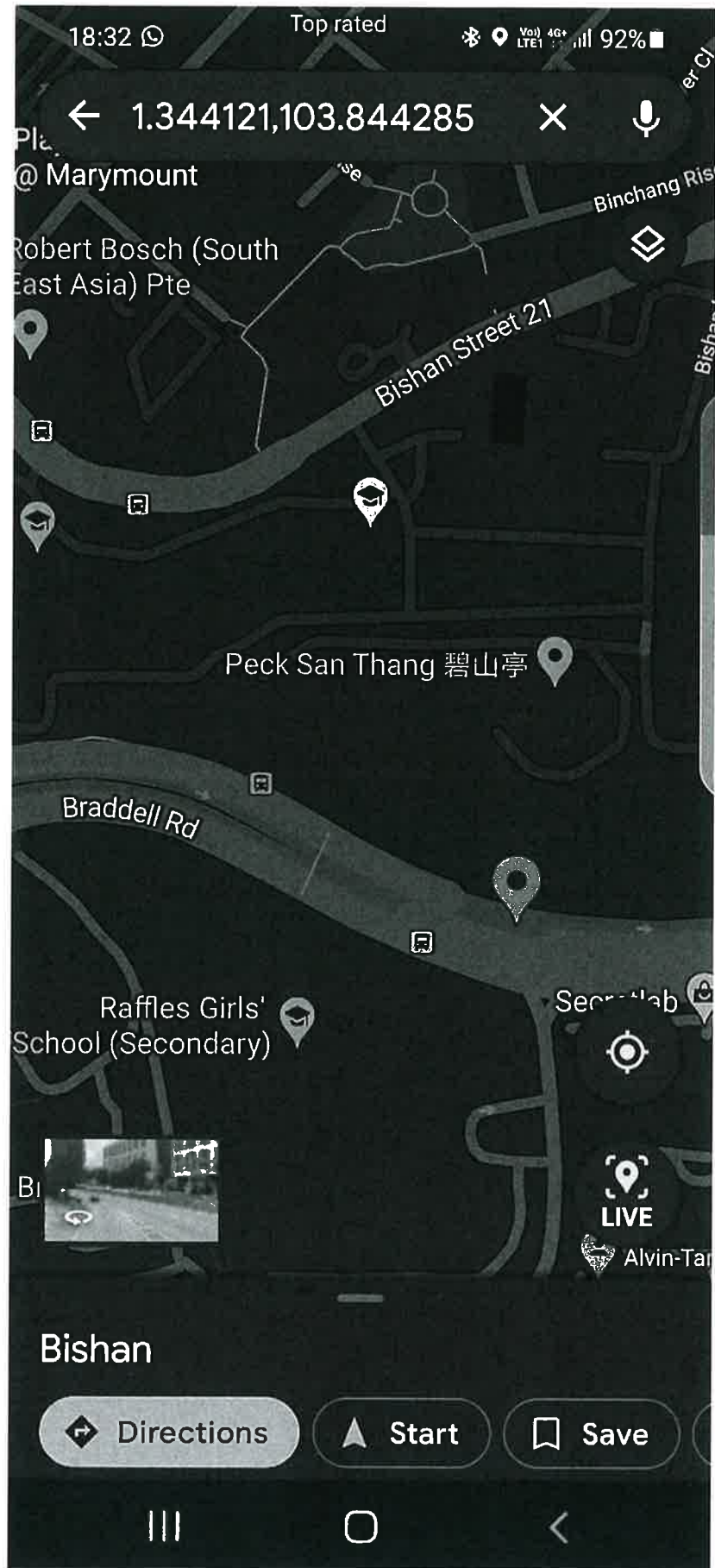










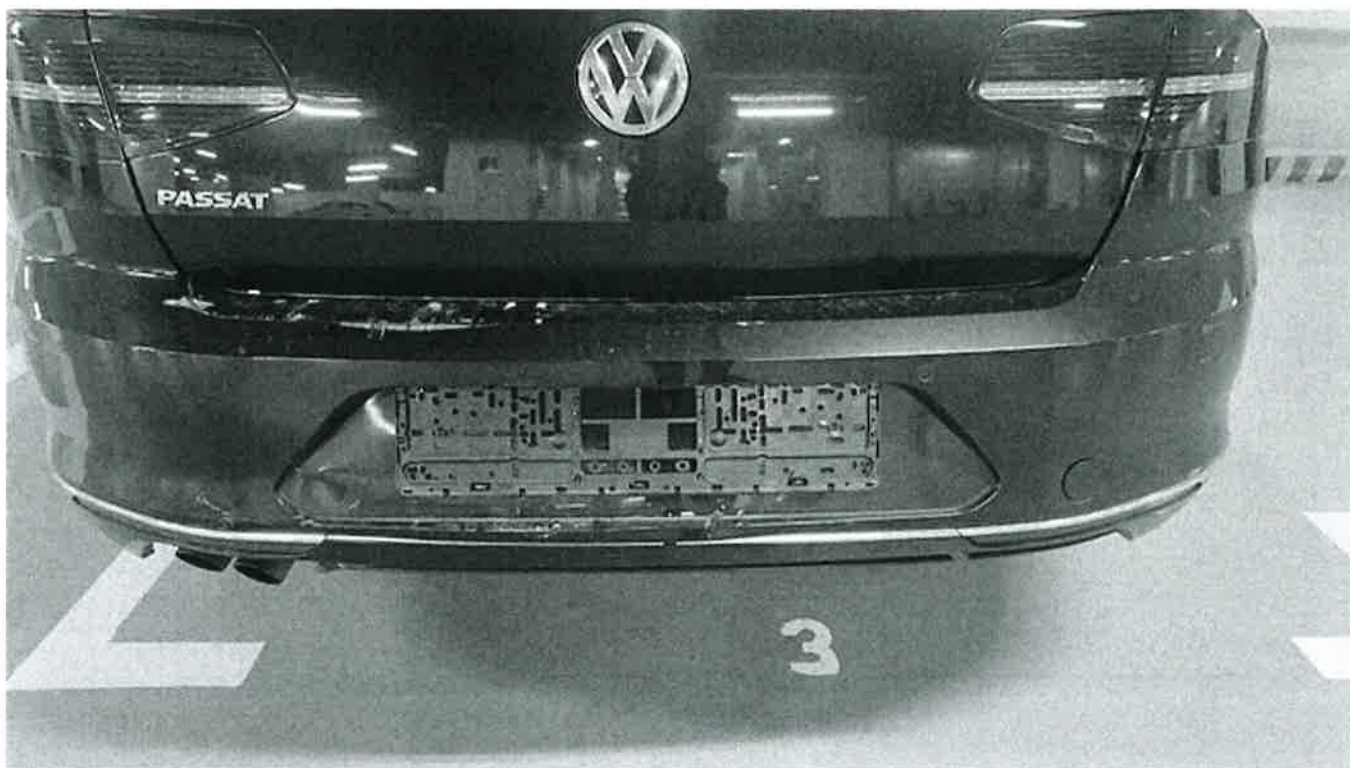




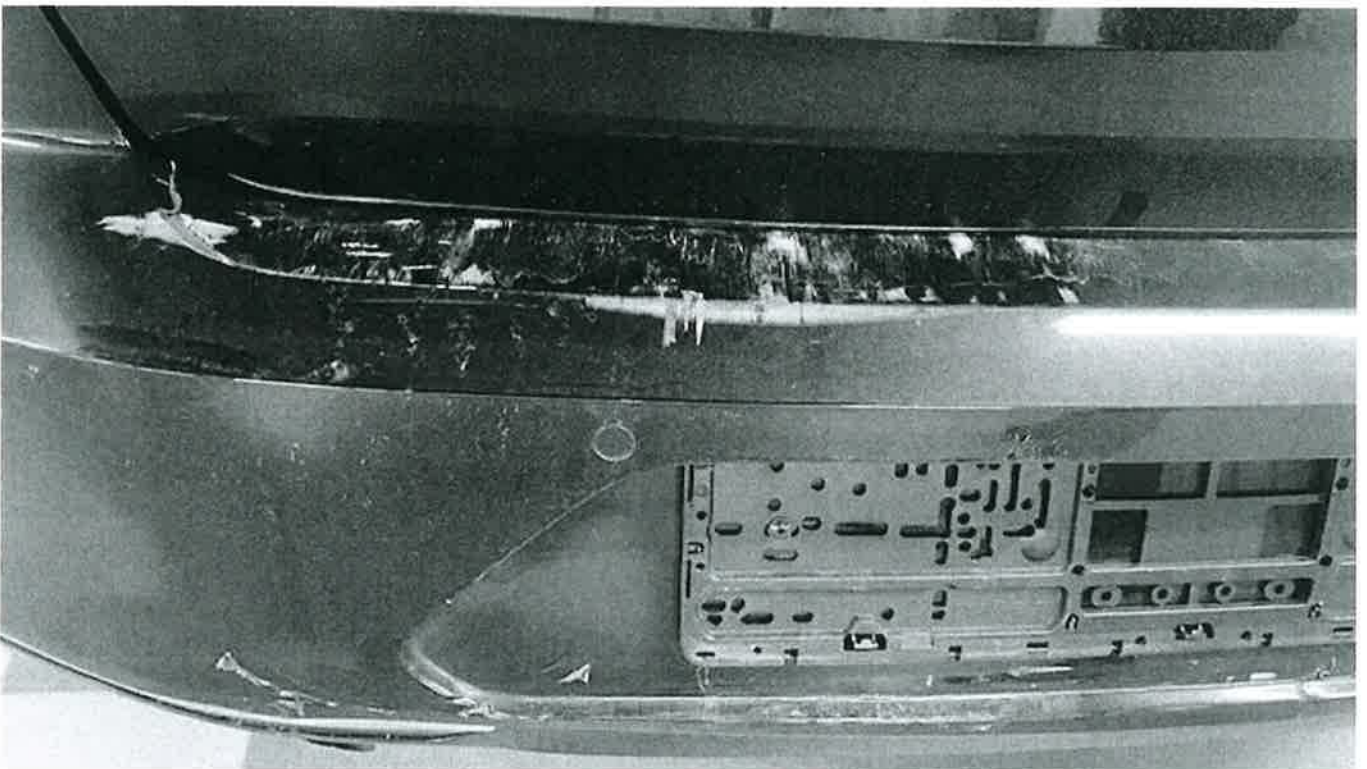
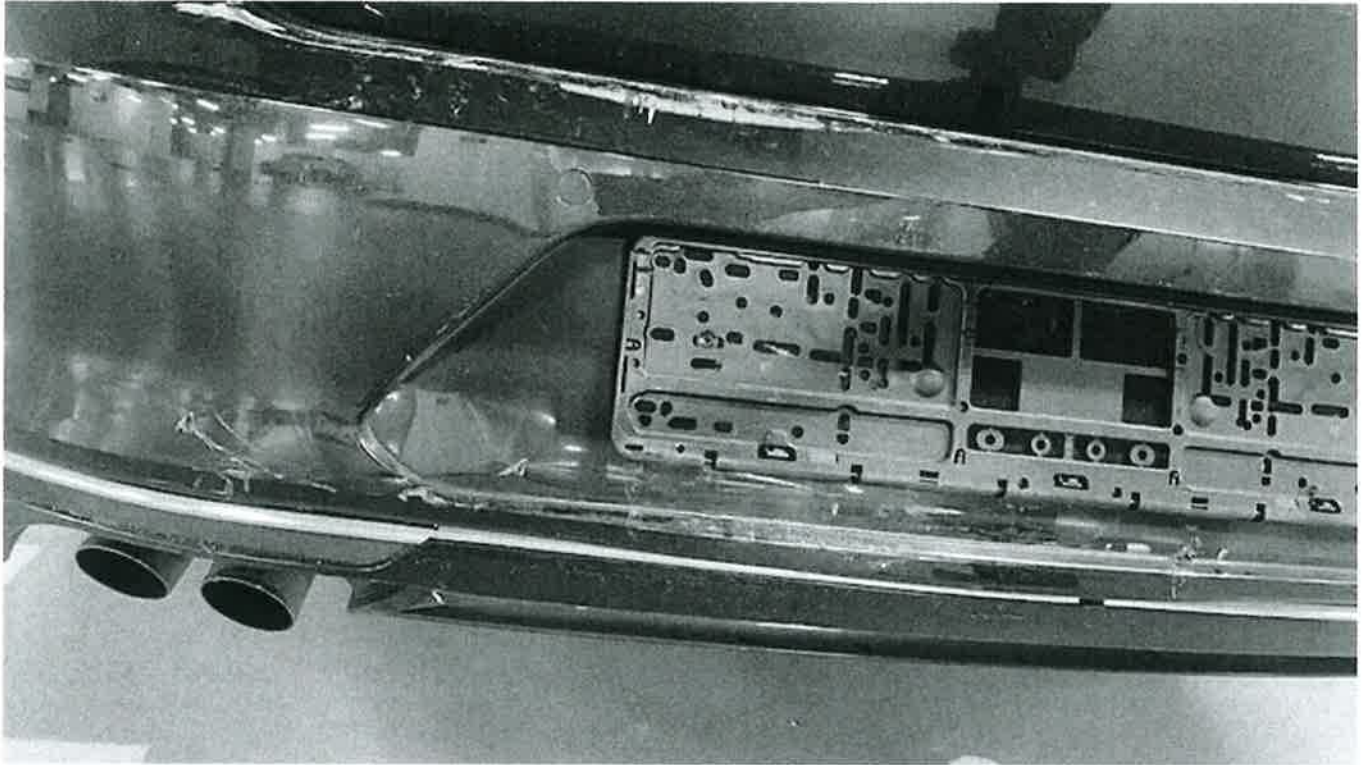


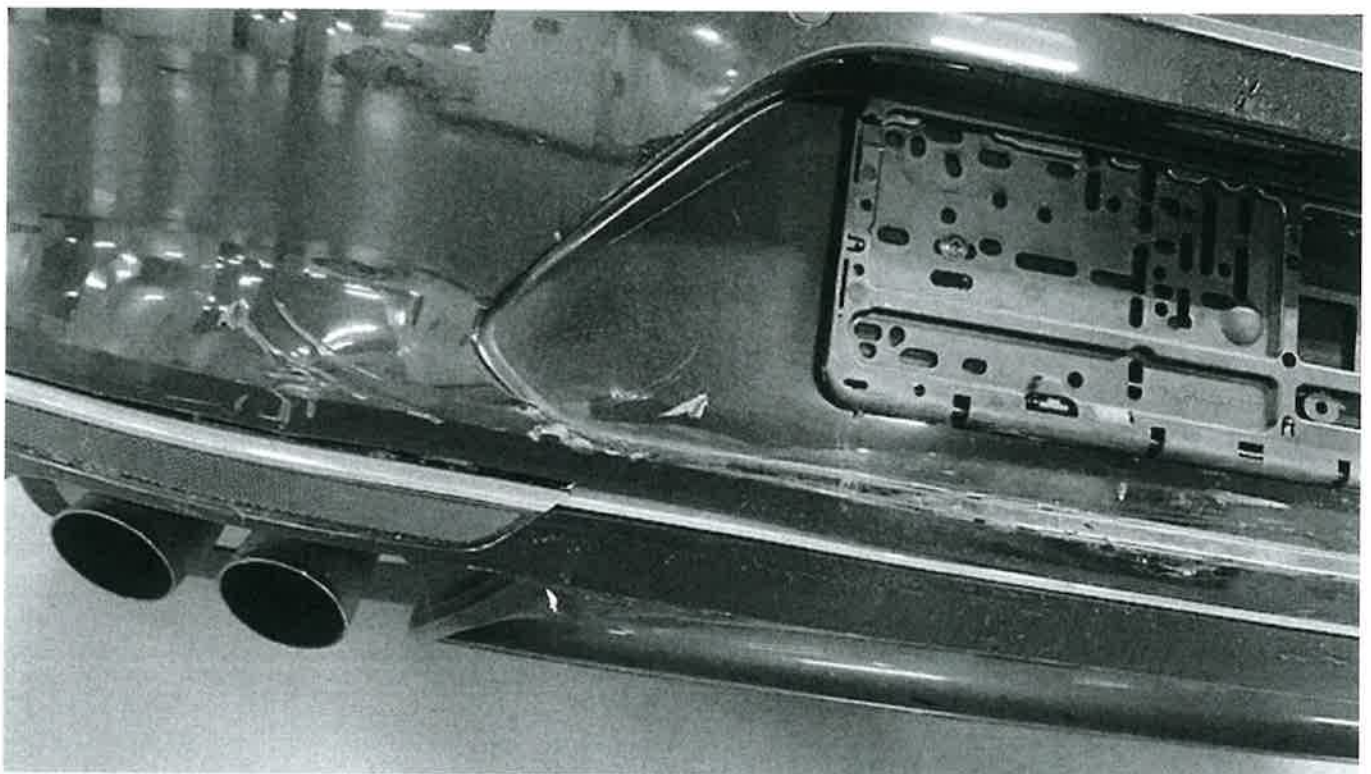
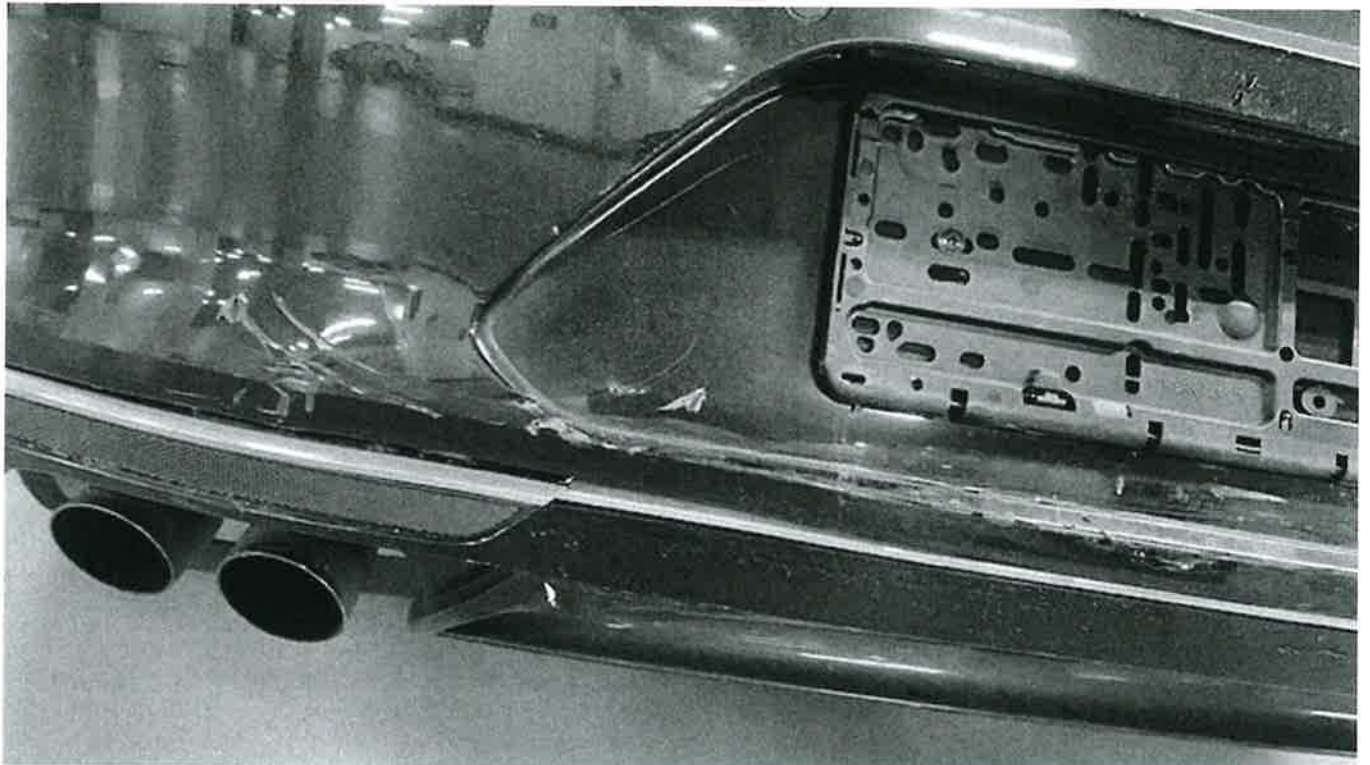


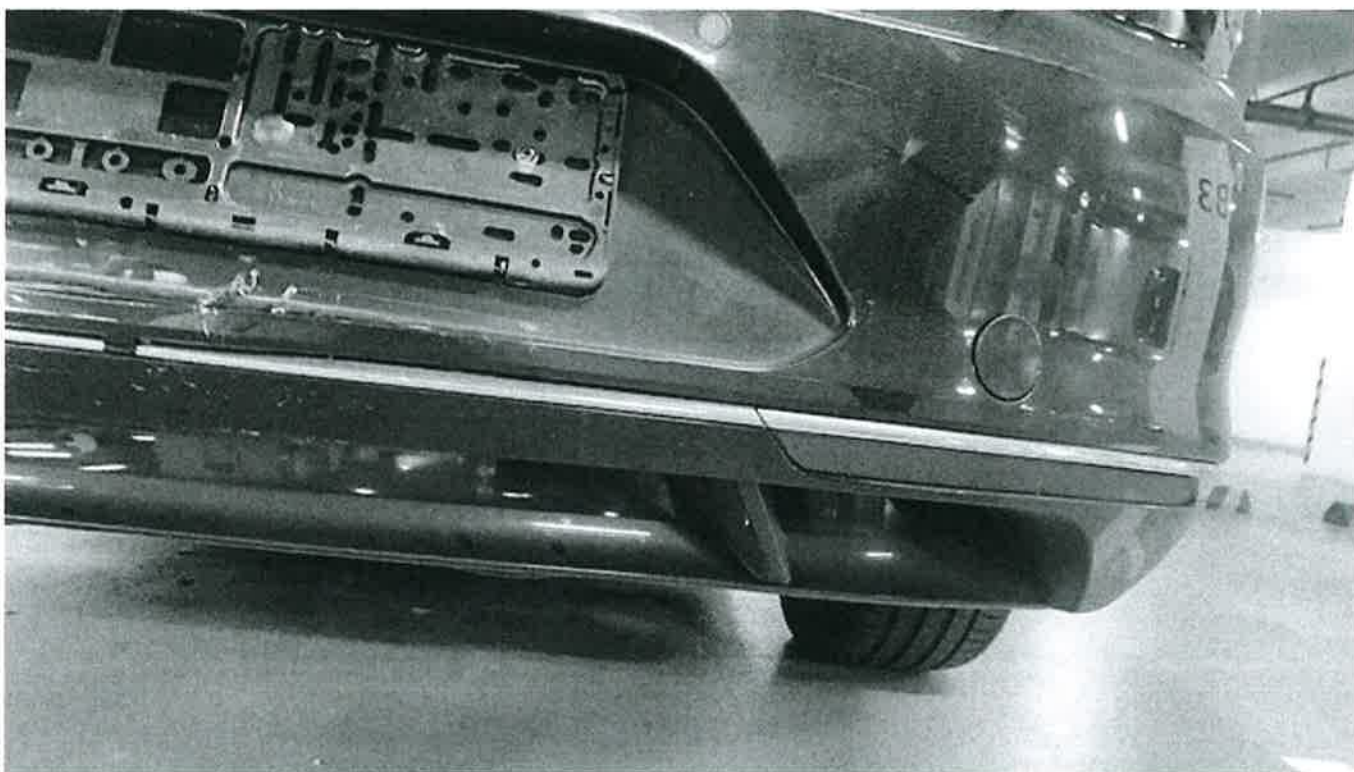
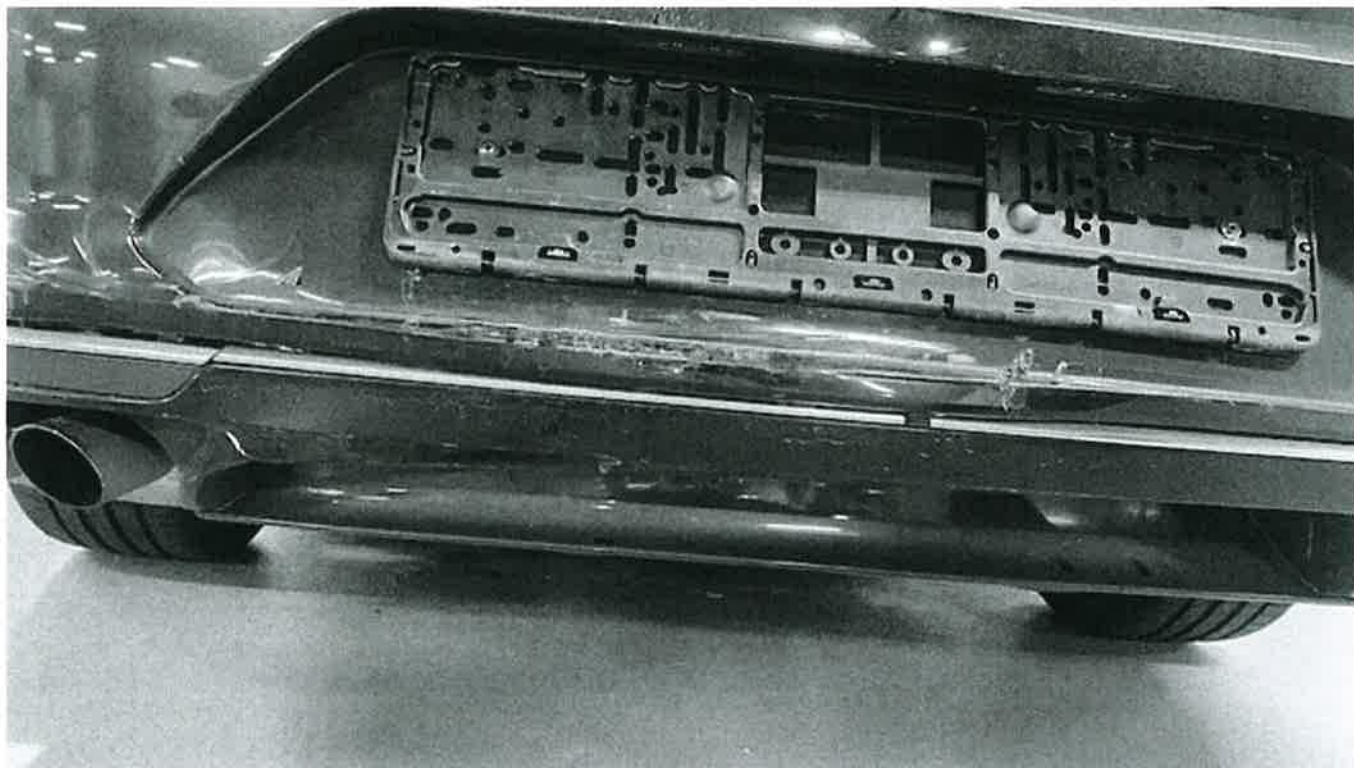


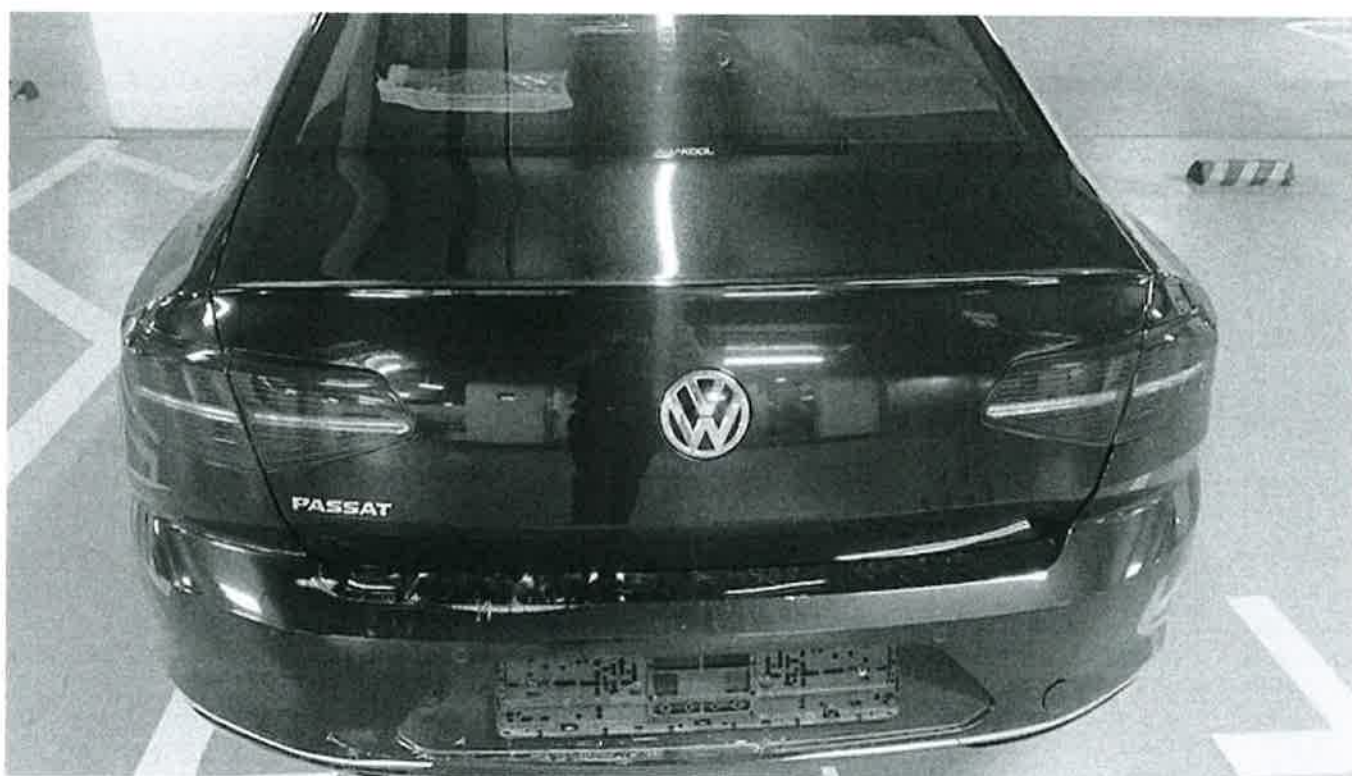
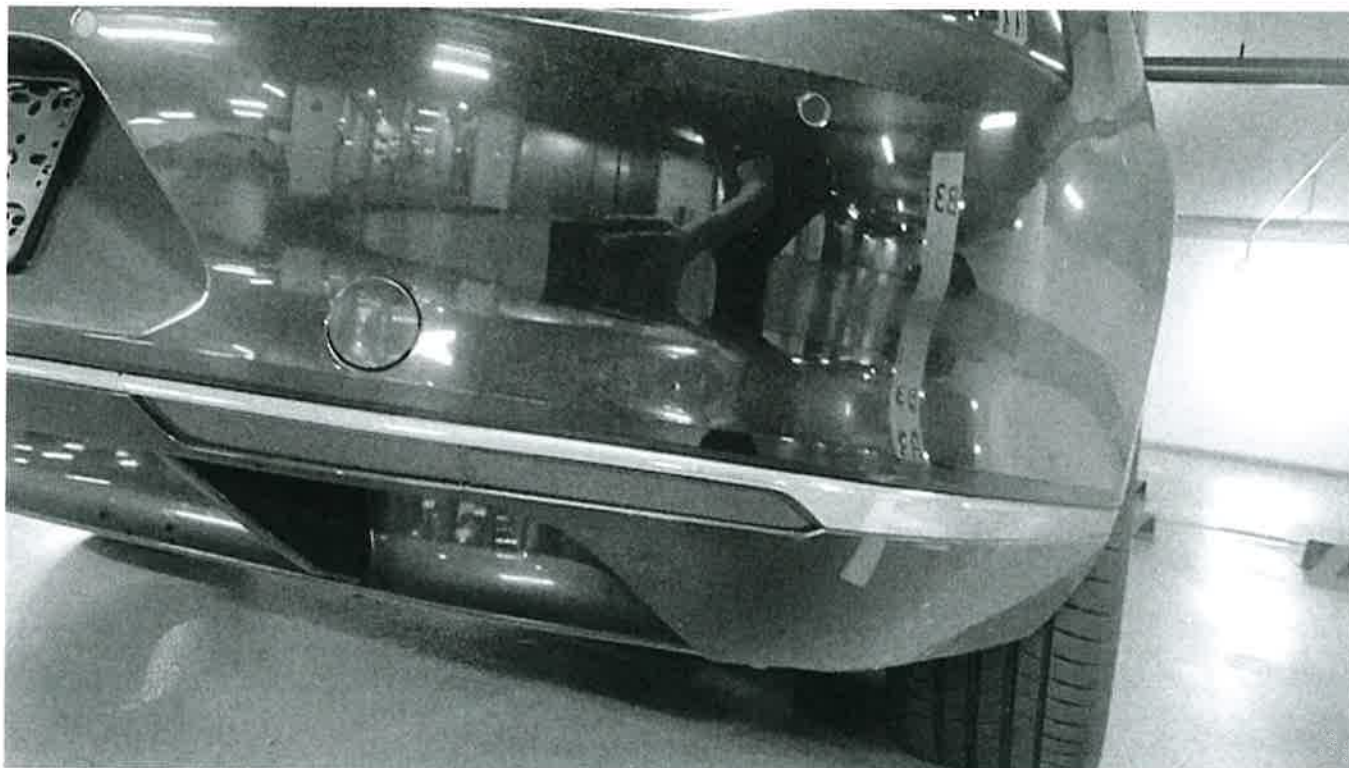


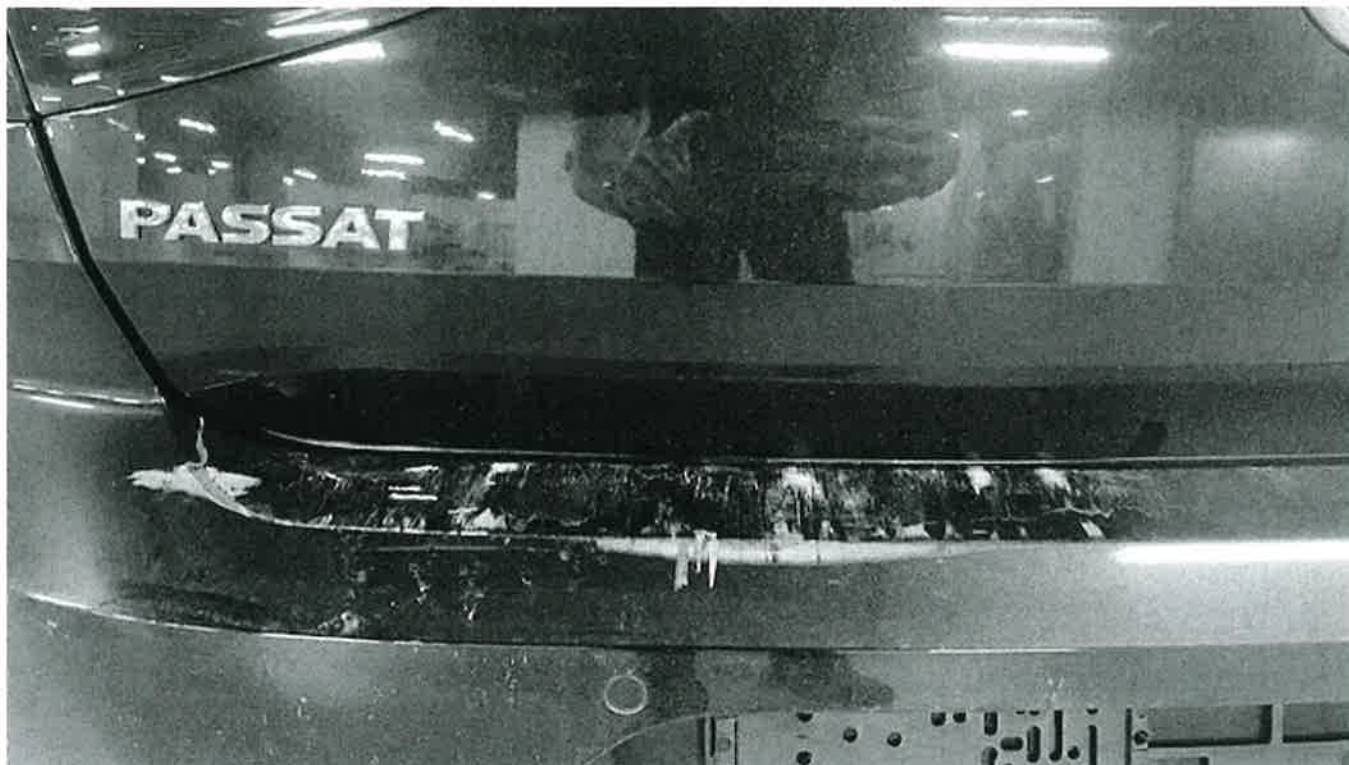


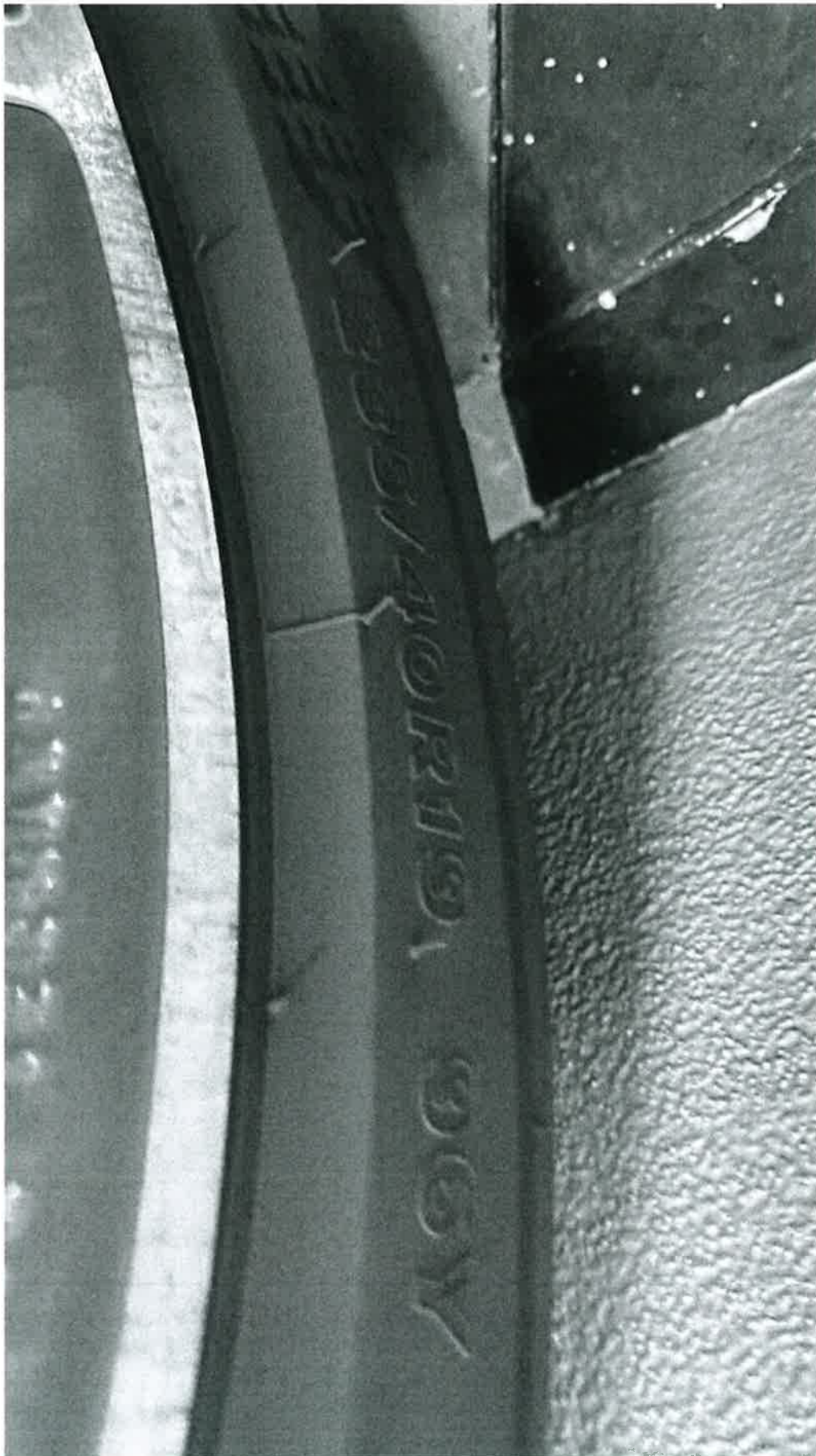


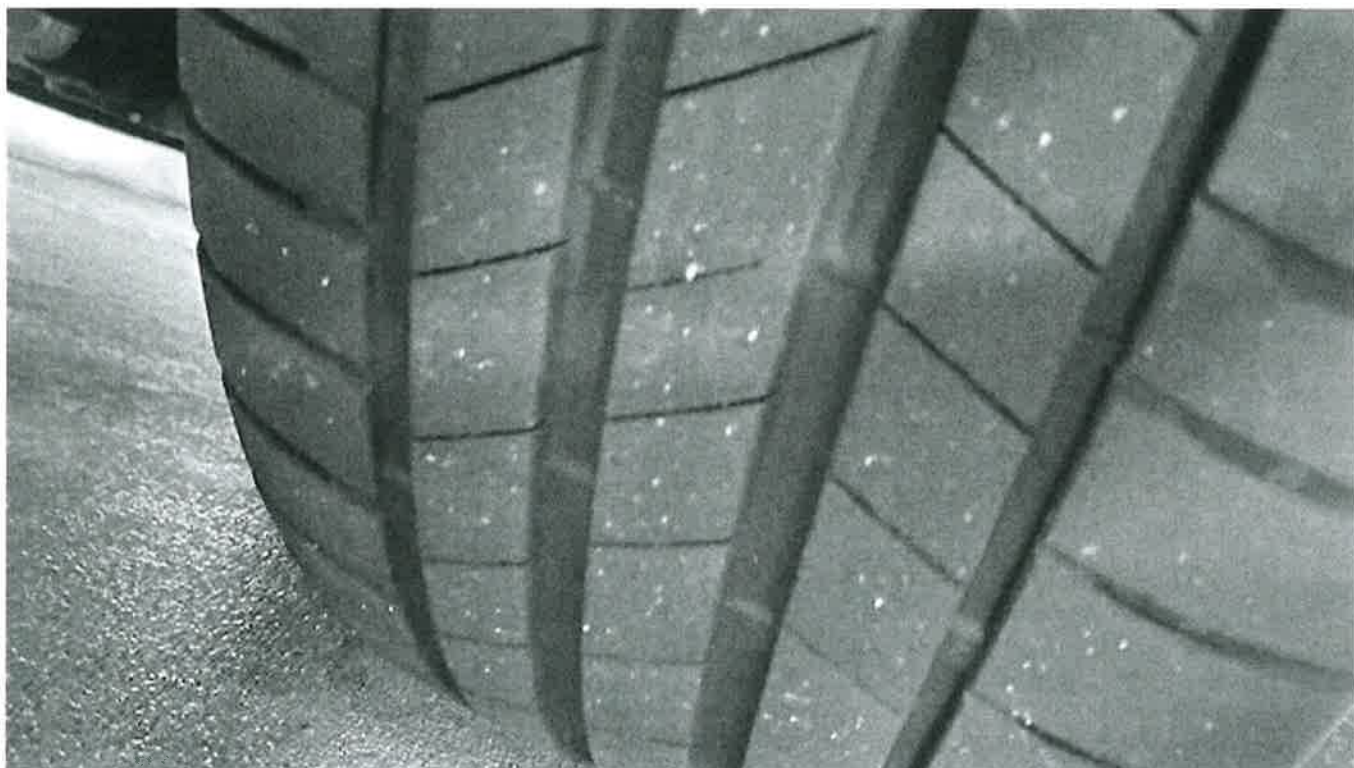




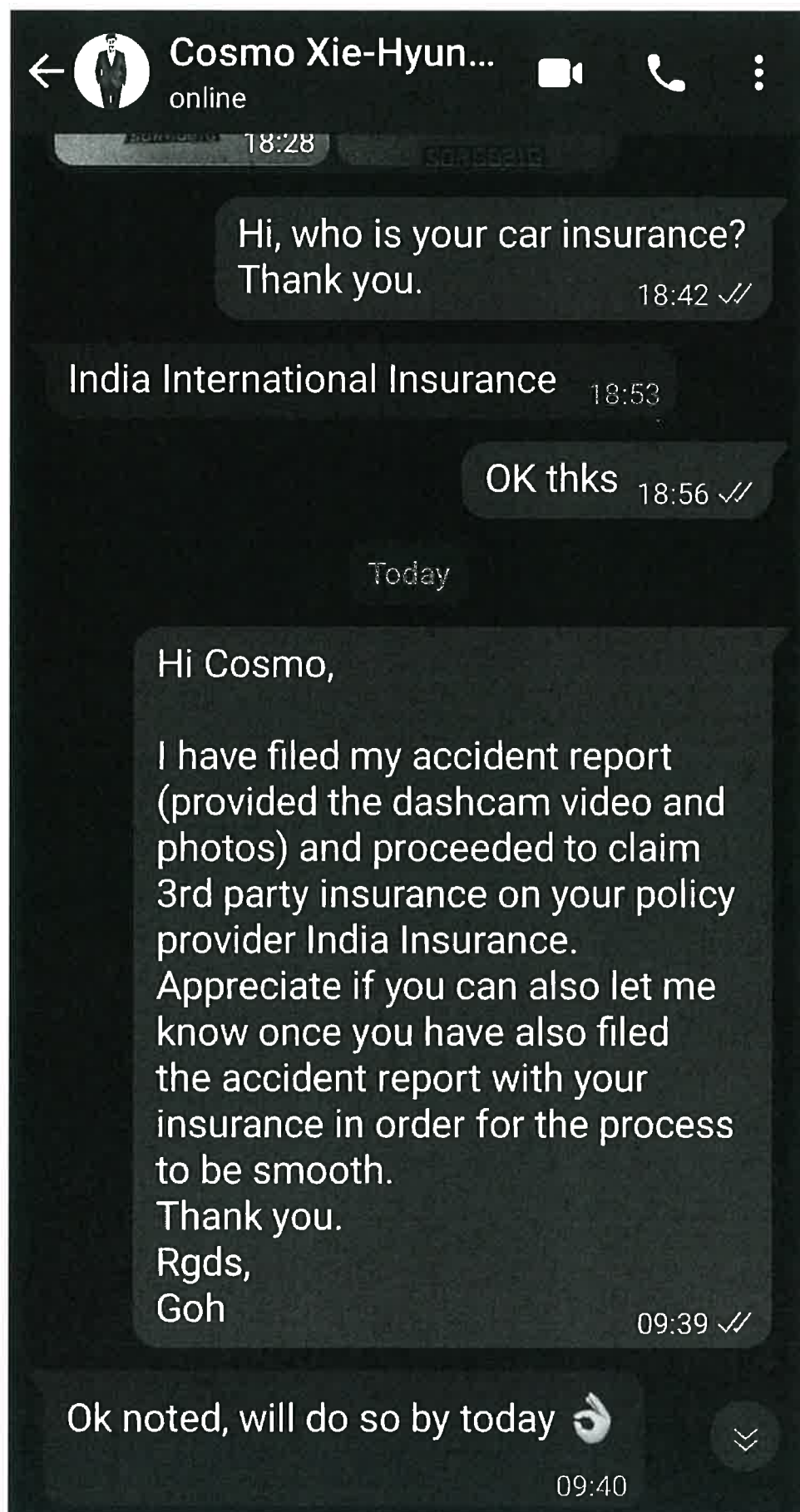












GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-07 Singapore 048580
Tel (65) 6724 0010 Fax (65) 6724 0030
Operating Hours: Monday to Friday, 09.00 - 17.00
12PM: 66498828 / 6611 Reg. No. 6640001779

ADDENDUM

Original Report No. :	SP0P21B50001	Vehicle Registration No. :	SGR6881G
Name (as shown in NRIC) :	GOH SER SIAN ARDEN (WU SHIXIAN ARDEN)	NRIC/FIN/Passport No. :	SXXXX573J
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate			
Address :	3A ONTARIO AVE, #02-05	Singapore(578192)	
Contact (Tel) :	81988481	Mobile No. :	98289903
Email Address :	ARDENGSS@YAHOO.COM.SG		
Date of Accident :	03/11/2021	Time of Accident :	16:20
Place of Accident :	BRADDELL ROAD (ENTRANCE RAMP ONTO FLYOVER AT BISHAN ROAD -BRADDELL ROAD INTERSECTION)		
Insurance Company:	Allianz Insurance Singapore Pte. Ltd.		

To include additional information:

Date: 5/11/2021

Name: Wendy Chan Senior Manager
NRIC/FIN No.: S 7004434
Date: 5/1/2021