

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	17/01/2022 18:48 (SGT)
Date of Accident	16/01/2022 17:02 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	TRAFFIC JUNCTION ALONG TELOK BLANGAH RD TOWARDS SENTOSA INTERCROSS WITH KAMPONG BAHRU RD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMS9039B
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	CHUA HAN HUI
NRIC No	SXXXX800Z
Email Address	DAVISCHH@GMAIL.COM
Mobile Phone No	(Phone) +65-85229981
Alternative Phone No	(Home) +65-85229981

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Vezel
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	0

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5120968671
Cover Note Number	-

DRIVER

Name of Driver	CHUA HAN HUI
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NRIC No
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

SXXXX800Z
01/12/1987
Outdoor
27/04/2007
14 YEARS AND 9 MONTHS
Male
(Phone) +65-85229981
(Home) +65-85229981
DAVISCHH@GMAIL.COM
BLK 627 WOODLANDS AVE 6 #09-866

730627

Yes

No

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
Weather Conditions
Road Surface

Collision - Head to Rear
Clear
Dry

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 vehicle or property damaged?
Number of Passengers (Including Driver)
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

No
2
No
-
Yes
3
No

PASSENGER 1

Name
Gender

PASSENGER
Male

PASSENGER 2

Name
Gender

PASSENGER
Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?
Was notice of intended Prosecution given?
If yes, against whom?

No
No
-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED

ATTACHMENT(S)

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

Yes
Yes
No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SHC8113U



SKETCH PLAN

4. Please report correctly the details of the accident to speed up the claims process.

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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 be permitted to collect, use, disclose and process my information provided 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 Insurers (i) who have insured vehicle(s) involved in this accident (all Insurers) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"; the Insurers' law/enforcement firms, the Monetary Authority of Singapore and any relevant governing authority/authority (such as the police), for the purposes of (a) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;

(b) Investigating the accident and/or my claims;

(c) Carrying out and/or dealing with my instructions or responding to any enquiries by me;

(d) 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

(e) complying with applicable law in administering, processing, handling and/or dealing with my claims.

(collectively the "Purposes")

(b) All Insurers (who have insured vehicle(s) involved in this accident and the Insurers' law/enforcement firms, may be permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes;

(c) my Personal Information may be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law/enforcement firms), which may be situated outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time  17 JAN 2022 13.05PM	Driver's Signature (If driver is not the policyholder) / Date & Time 	SHUYI Witnessed by Reporting Centre Personnel	Sketch Plan  <p>SKETCH indicating location of vehicle involved.</p>
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Describe Circumstances of the Accident

MY CAR, SMS9039B (HONDA VEZEL) WAS STATIONERY AT JUNCTION, WAITING FOR TRAFFIC LIGHT TO TURN GREEN BEFORE TURNING INTO KAMPONG BAHRU ROAD ON THE RIGHT. WHILE STATIONERY, A COMFORT
DEGRO TAXI, SHC8113U, HIT ME FROM BEHIND, CAUSING MY BUMPER AND REAR BOOT DOOR DAMAGED.