

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	24/01/2022 15:22 (SGT)
Date of Accident	23/01/2022 11:40 (SGT)
Exact Location of Accident	Near 75 E Coast Rd, Singapore 428782
Additional Location Information	ALONG EAST COAST ROAD (AFTER CEYLON ROAD AND OPPOSITE ROXY SQUARE)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMD2631R
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	JOHNY TJHENG
NRIC No	SXXXX157I
Email Address	JOHNY780@HOTMAIL.COM
Mobile Phone No	(Phone) +65-81579518
Alternative Phone No	+65-91284642

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A5
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1984

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	SP2000439978
Cover Note Number	-

DRIVER

Name of Driver	JOHNY TJHENG
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NRIC No	SXXXX157I
Date Of Birth	18/06/1984
Occupation	Indoor
Date Of Driving Pass	08/01/2013
Driving experience	9 YEARS
Gender	Male
Mobile Number	(Phone) +65-81579518
Alt. Phone Number	+65-91284642
Email Address	JOHNY780@HOTMAIL.COM
Address	35 AMBER GARDENS
Address complement	#09=10
Postcode	439966
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	KWEK PEI PEI LISA
Gender	Female

PASSENGER 2

Name	ANDRE CHEN YU FENG
Gender	Male

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 23/1/22, 1140HRS. I WAS TRAVELLING ALONG EAST COAST ROAD AND COULD NOT BRAKE IN TIME. THEREFOR, HITTING THE BLUE HONDA CIVIC (SCY 3838 M) WHICH IN TURN HIT THE WHITE MAZDA 3 (SMC 3971 H) WHICH WAS VERY CLOSE IN FRONT OF THE BLUE HONDA CIVIC.

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	SCY3838M
Vehicle Manufacturer	Honda
Vehicle Model	Civic
Vehicle Variant	-
Vehicle Colour	Blue
Vehicle Category	Private car
Name of Driver	SHAWN LEE JINXI
Contact Number	(Phone) +65-82823883
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

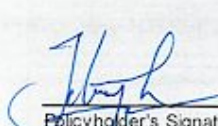
DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMC3971H
Vehicle Manufacturer	Mazda
Vehicle Model	3
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Private car
Name of Driver	CHONG FOOK SING
Contact Number	(Phone) +65-98209410
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2


SKETCH PLAN

IMPORTANT NOTICE

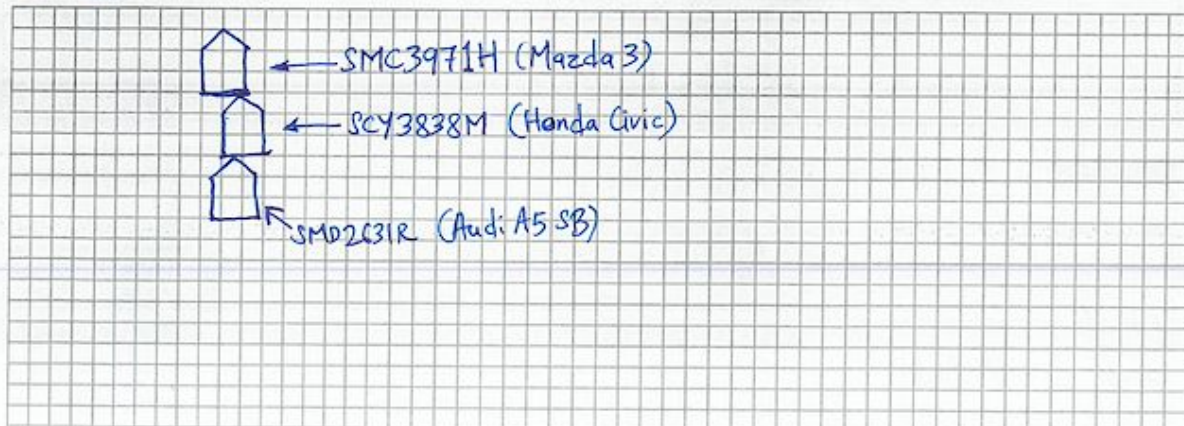
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8. **Consent under the Personal Data Protection Act (PDPA)**
I understand, acknowledge, agree and consent that:
(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or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

09:35am
24/01/2022

Policyholder's Signature / Date & Time

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


Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

Date/Time: 23 Jan 2022, 11:40am.

I was traveling along East Coast Road and could not brake in time therefore hitting the blue Honda Civic (SCY3838M), which in turn hit the white Mazda3 (SMC3971H) which was very close in front of the blue Honda Civic.

Declaration

We declare the foregoing particulars are true in every respect.

 24/01/2022
Policyholder's Signature / Date & Time
09:49am

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

Witnessed by Reporting Centre Personnel



















































