



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 08/02/2022 21:10 (SGT)
Date of Accident 08/02/2022 12:50 (SGT)
Exact Location of Accident Singapore
Additional Location Information BKE SLE BEFORE MANDAI ROAD EXIT
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SFM9089X

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner NG KIM HUAT
NRIC No S1608166C
Email Address SN112211@GMAIL.COM
Mobile Phone No (Phone) +65-96186933
Alternative Phone No +65-96186933

VEHICLE PARTICULARS

Manufacturer Mercedes
Model Cla180
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 - Claiming third party
Vehicle Category Private car
Transmission Auto
CC 1600

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 5111261883-02
Cover Note Number -

DRIVER

Name of Driver NG KIM HUAT
NRIC No S1608166C

Accident report SN072228000W

Date Of Birth 11/02/1963
Occupation Indoor
Date Of Driving Pass 30/07/1980
Driving experience 41 YEARS AND 7 MONTHS
Gender Male
Mobile Number (Phone) +65-96186933
Alt. Phone Number +65-96186933
Email Address SN112211@GMAIL.COM
Address BLK 303 SHUNFU ROAD #10-59
Address complement -
Postcode 570303
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 Side Swipe
Weather Conditions Clear
Road Surface Dry

OTHER INFORMATION




Transmission	Auto
CC	1600

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5111261883-02
Cover Note Number	-

DRIVER

Name of Driver	NG KIM HUAT
NRIC No	S1608165C

 Accident report SN072228000W

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Date Of Birth	11/02/1963
Occupation	Indoor
Date Of Driving Pass	30/07/1980
Driving experience	41 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96186933
Alt. Phone Number	+65-96186933
Email Address	SN112211@GMAIL.COM
Address	BLK 303 SHUNFU ROAD #10-59
Address complement	-
Postcode	570303
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	Side Swipe
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


I WAS TRAVELLING ON THE LEFT LANE & INTENDED TO TAKE THE EXIT AT MANDAI ROAD WHEN SUDDENLY THERE WAS A LORRY ON MY RIGHT SIDE VEERED ONTO MY LANE AND COLLIDED WITH MY RIGHT PORTION. AS THERE WAS HEAVY TRAFFIC, I DIDN'T IMMEDIATELY TAKE PHOTOS OF THE SCENE HOWEVER WE MOVED TO THE ROAD SHOULDER AND EXCHANGE CONTACT NUMBER & TOOK SOME PHOTOS. NO INJURIES SUSTAINED.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

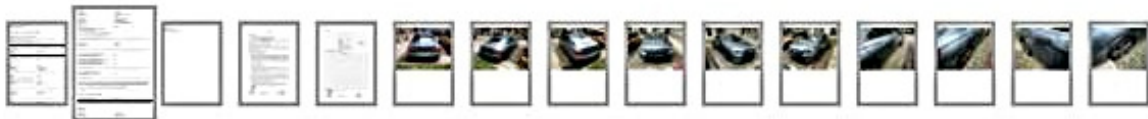
DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	XE3095X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	GANESAN
Contact Number	(Phone) +65-98909660

 Accident report SN072228000W

Page 2 of 15

Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-



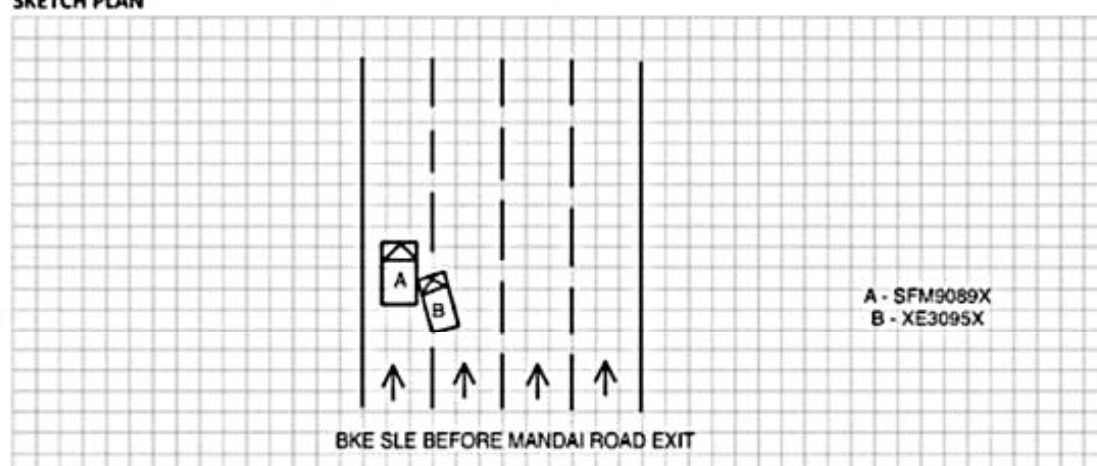
©2005 Autodesk, Inc. All rights reserved.

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

Reporting Centre Personnel's Signature
Name: **GADDAFI**
NRIC/FIN No.: **S993841**

SKETCH PLAN #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

[illegible]

DECLARATION

I/We declare that the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time: 08/02/2022

GIAAMC SketchPlatform_V3

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

Reporting Centre Personnel's Signature
Name: GADDAFI
NRIC/FIN No.: S993841

NR/C/FIN No.: S993841

IMAGES



SKETCH PLAN

SKETCH PLAN

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- 7. By the lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.


Policyholder's Signature
Date & Time: 08/02/2022

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

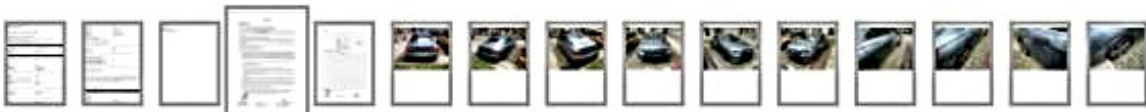

Reporting Centre Personnel's Signature
Name: GADDAFI
NRIC/FIN No.: S993841

GIARAC SketchPlanForm_V3

1

SKETCH PLAN #2

SKETCH PLAN



12:58



+65 9321 0284 >

iMessage
Yesterday 12:57

Hi Steve, this is Xue fen from Kim Bock contractor. On behalf of my driver, we apologize for the damages to your car.

Kindly send me photo of the damage. I'll inform my mechanic of the damage and let them know you'll be coming over for the repairs.

This is our mechanic address.
Convince Autocare
176 sin ming drive. #04-04 Sin
ming autocare S575721



iMessage



L

LTA

LTA-VTL@lta.gov.sg

...

To: You chris_chanbebe@hotmail.com

Thursday, 17 February, 1:05 PM



Notification of Successful Vehicle Insurance Search for
Receipt No.: ITNET-00000-220217-001651

Dear Sir/Madam

We wish to inform you that your transaction on "Enquire Vehicle Insurance Particulars" performed on 17 Feb 2022 was successful and the Receipt No. is ITNET-00000-220217-001651.

2. The details of the search results are as follow:

Vehicle No.	Search Date	Search Time	Search Result
XE3095X	08 Feb 2022	12:50:00	CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

3. Please contact our customer service officers at tel : [1800-CALL LTA \(1800-2255 582\)](tel:1800-2255582) should you require further assistance.

4. Visit onemotoring.lta.gov.sg for more information, or go to www.lta.gov.sg/feedback if you have any feedback. This email is auto-generated, please do not reply to this email.

5. Thank you.

If you are not the intended recipient of this communication, please delete it.

As it may contain confidential or official information, do not retain it or disclose the contents to any person as it may be an offence under the Official Secrets Act.

If you are not the intended recipient of this communication, please notify the sender and delete it.

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