

#### 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 witholding of material facts may allow insurance companies to repudiate 5. Intribution provided must be as truthful and accurate as possible. Any white misteries entaited to withouting of material facts may allow insurance companies to reputing 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 16:10 (SGT) Date of Accident 08/02/2022 12:00 (SGT) Exact Location of Accident Singapore Additional Location Information PIE(CHANGI) AT TPE EXIT. Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SJN4791G

#### INSURED/POLICYHOLDER

Is company? Name Of Registered Owner TAN SEW HONG NRIC No S2688145E Email Address sandy8.tan@gmail.com Mobile Phone No (Phone) +65-93681363 Alternative Phone No +65-93681363

### VEHICLE PARTICULARS

Manufacturer Honda Model Jazz Variant Exact purpose for which vehicle was being used at time of Private hire accident Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Private hire Transmission Auto 1300

# INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd Type of Coverage Comprehensive Fleet Policy Policy Number 5075725473-05 Cover Note Number

### DRIVER

Name of Driver MAN CHONG LENG NRIC No S2688144G



Date Of Birth 24/12/1960 Occupation Outdoor Date Of Driving Pass 19/10/1988 Driving experience 33 YEARS AND 4 MONTHS Gender Mobile Number (Phone) +65-98419406 Alt. Phone Number Email Address sandy8.tan@gmail.com Address BLK 502 BEDOK NORTH STREET 3 #10-62 Address complement Postcode 460502 Is the driver the policyholder? No If No. Relationship of the Driver with the Insured Spouse Does Driver Own Other Vehicles? Nο 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 Was anybody injured in the Accident? Nο Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? PASSENGER 1 Name **UNKNOWN** Gender ..... Female DETAILS OF POLICE ACTION Was the accident reported to the police? Nο Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO SKETCH PLAN ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Reasons for not uploading a video of the accident SENT TO MOTORVIDEO@INCOME.COM.SG Was there any audio recorded? No **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SNA7702R Vehicle Manufacturer

Honda

Vehicle Variant Vehicle Colour

Vehicle Model

Vehicle Category	Private car
Name of Driver	UNKNOWN
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

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- 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 (all insurer(s) who have insured Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s)
  - 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: 9/2/22 /577

Driver's Signature (If driver is not the policyholder) Date & Time: 9/1/11/118

Reporting Centre Personnel's Signature

Name: 184710 NRIC/FIN No.: 177171

	TPÉ	
		A - SJH47916 B - SNATTOLR
	6	
	PIE (CHANGI) EXIT OF TPE	
DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT	
No. 0/2/2222 at accus	d 1200 hrs, as I was about to en	ter TPE(SLE) from PIElChangi)
Un Spinor at aroun	I IDDUNIS, VI	
		- J . J JJ SNATTOOR
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