

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 24/02/2022 16:53 (SGT)
Date of Accident 20/02/2022 17:30 (SGT)
Exact Location of Accident Upper E Coast Rd & Bedok S Rd, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMU6295L

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner SIA BUN HAN
NRIC No SXXXX165E
Email Address siabill00@gmail.com
Mobile Phone No (Phone) +65-97515191
Alternative Phone No +65-97515191

VEHICLE PARTICULARS

Manufacturer Bentley
Model Continental
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 5998

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMPCSNW00122942100
Cover Note Number -

DRIVER

Name of Driver SIA BUN HAN
NRIC No SXXXX165E

Date Of Birth	03/06/1945
Occupation	Indoor
Date Of Driving Pass	17/11/2012
Driving experience	9 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97515191
Alt. Phone Number	+65-97515191
Email Address	siabil00@gmail.com
Address	437 KEW CRESCENT
Address complement	-
Postcode	466260
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 - Change/cross lane
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?	Yes
Police Station Name	Bedok North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002449999
Alt. Police Station Phone No	(Fax) +65-62447258
Police Station Address	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE ATTACHED STATMENT AND POLICE REPORT ANNEX E

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	SMY7254C
Vehicle Manufacturer	BMW
Vehicle Model	520i
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

Name of Driver	YEOW JIA HAO
NRIC No	SXXXX255I
Contact Number	(Phone) +65-91111444
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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 insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The 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.
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 the (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 insurer's 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 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, investigation, 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:

24/Feb/2022
3.55 pm




Driver's Signature

(If driver is not the policyholder) Name:

Date & Time:

24/Feb/2022
3.55 pm

 24/02/2022

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No:

I hereby authorise SME Motor P/L Send my accident report to:

reports@maxmotors.com.sg

Sketch Plan



A - SMH
6295
A

B - SMY
7254
B

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 20.2.22 at 5.30pm, I was driving toward upper East Coast rd (Junction of upper East Coast rd & Bedok South rd). AT TRAFFIC LIGHT TURNED GREEN R.H.SIDE AT FRONT, TURNED AT SAME TIME. R.H.S. CAN'T SEE L.H.SIDE AT BLIND SPOT. L.H.SIDE AT THE BACK. WHILE TURNING, ROAD NARROWS AND NO LINE DIVIDER, MY CAR IS HUGE PREVENTED HITTING CENTRE DIVIDER, HAD TO TURN AT BIGGER CORNER, LEFT H. CAR AT BACK SEE CLEARLY, RUSH FORWARD AND MERGED TO HIT MY LEFT H HUGGARD.
MINOR CRACK AT HUGGARD.


NO PASSENGER ON BOTH CARS, NO INJURY


(A) RIGHT H SIDE MY CAR
BENTLEY

(B) LEFT H SIDE MR YEOW JIA HAO

DECLARATION

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


Policyholder's Signature
Date & Time
24/2/22 3.55pm


Driver's Signature
(If driver is not the policyholder)
Date & Time
24/2/22 3.55pm

 24/02/2022
Reporting Centre Personnel's Signature
Name:
NRIC / FIN NO:

DRIVERS: A: SIA BUN HAN 50225165E
B: YEOW JIA HAO 59478255I





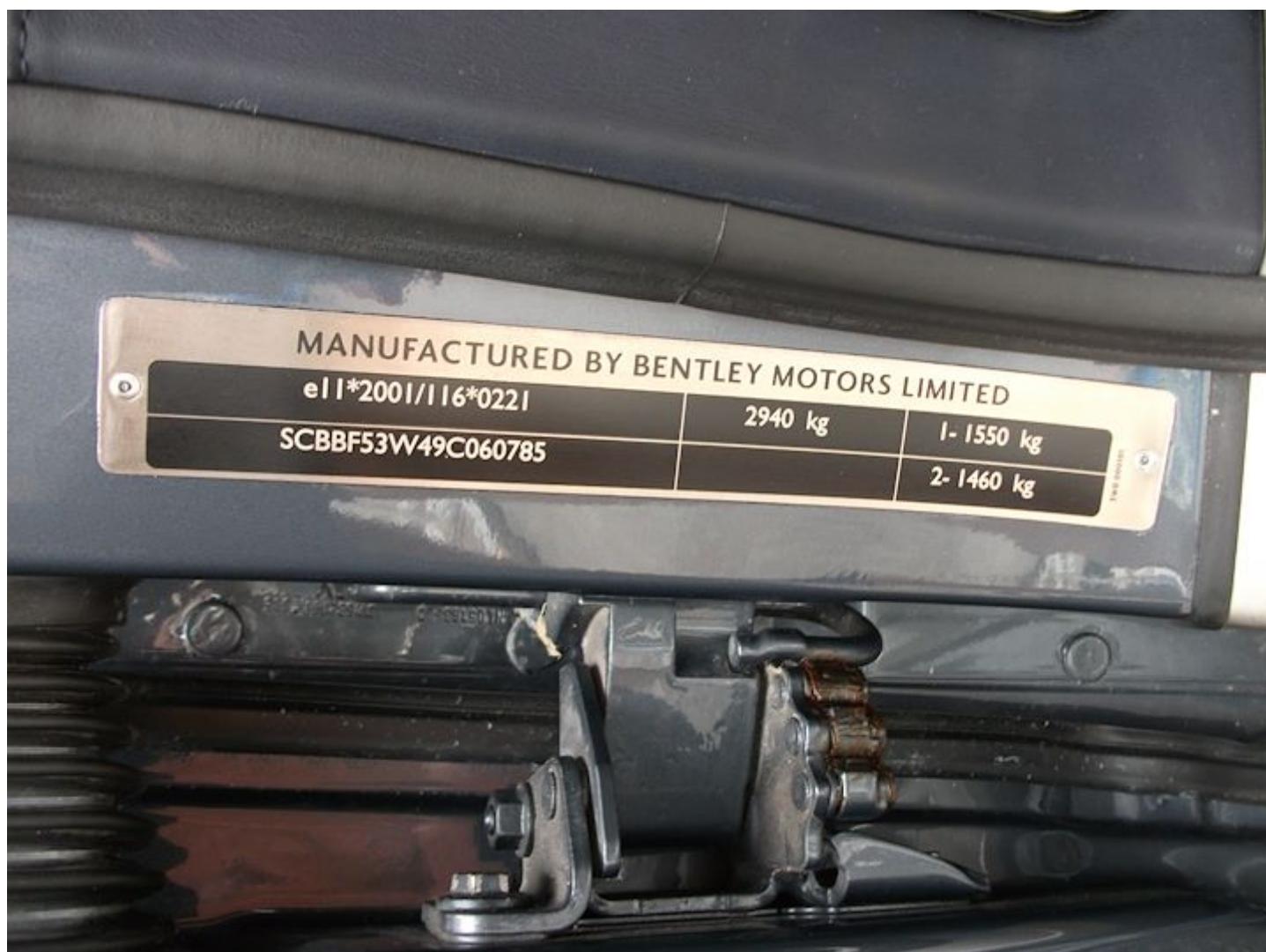














CONFIDENTIAL

ANNEX E

NOTICE OF REPORTING

This is to confirm that Sia Bun Han, NRIC: S0225165E, Tel: 97515191 has reported to the Police a non-injury traffic accident which occurred at the junction of Upper East Coast Rd and Bedok South Rd on 22.02.2022 at 1720hrs, involving the following vehicles:-

- i) SMU6295L (Bentley Flying Spur Continental, Black/Grey)
- ii) SMY7254C (BMW 520i, Green) Driver: Yeow Jia Hao S9238255I, HP: 91111444

2 If this accident was reported to the Police within 24 hours of its Occurrence, then he has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SGT (2) Ari Haikal

Date: 22.02.2022

Time: 1939hrs

Station Diary ref: 92

Police Post/Unit: Bedok NPC

Original - to be issued to informant
Duplicate - to be submitted to Traffic Police

Bedok North NP
No. 30 Bedok North Rd.
Singapore 460674
Tel: 3700 3444

CONFIDENTIAL

version as of 15 Sep 2000

SIA BUN HAN
IC S0225165E

[Handwritten signature]