

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 17/02/2022 17:32 (SGT)
Date of Accident 28/01/2022 19:45 (SGT)
Exact Location of Accident Singapore
Additional Location Information JUNCTION OF TAMPINES AVE 7 AND TAMPINES AVE 4
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLZ2359Z

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner ONN CHANG DA (WEN CHANGDA)
NRIC No S8426541A
Email Address RELPHONN@GMAIL.COM
Mobile Phone No (Phone) +65-9853759
Alternative Phone No +65-98535759

VEHICLE PARTICULARS

Manufacturer Audi
Model A3
Variant -
Exact purpose for which vehicle was being used at time of accident -
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Private car
Transmission Auto
CC 1395

INSURANCE COMPANY

Name of Insurance Company Great Eastern General Insurance Limited
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 2021-V0107758-VDP-R002
Cover Note Number -

DRIVER

Name of Driver ONN CHANG DA (WEN CHANGDA)
NRIC No S8426541A

Date Of Birth	16/09/1984
Occupation	Indoor
Date Of Driving Pass	21/12/2007
Driving experience	14 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-9853759
Alt. Phone Number	+65-9853759
Email Address	RELPHONN@GMAIL.COM
Address	601C TAMPINES AVE 9 #08-844
Address complement	-
Postcode	523601
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?	Yes
Police Station Name	Bedok Division Headquarters
Police Station Phone No	(Phone) +65-18002440000
Alt. Police Station Phone No	(Fax) +65-64443009
Police Station Address	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT

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	SKW1458E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

Name of Driver	-
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

IMPORTANT NOTICE

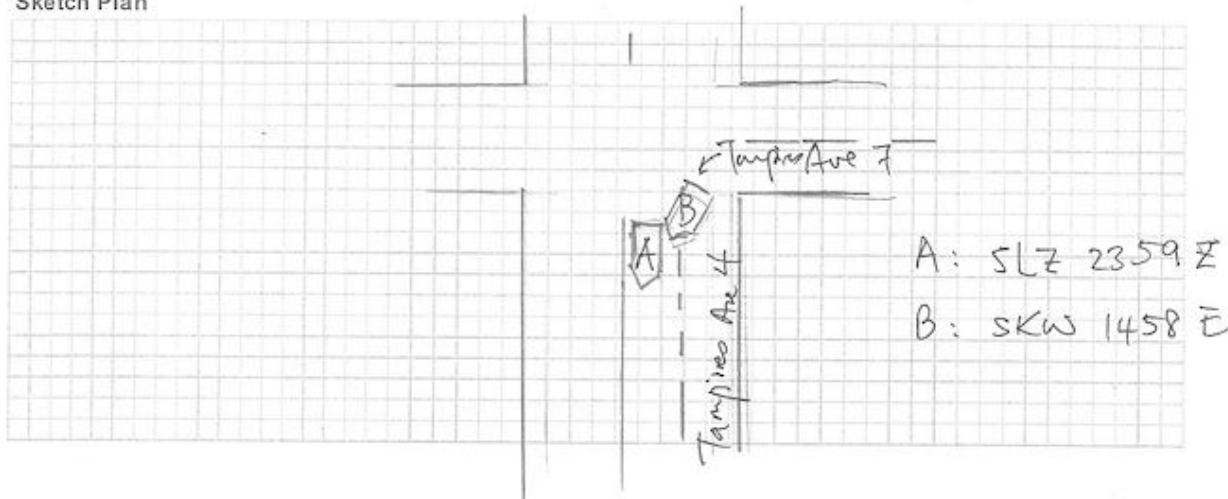
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**
I understand, 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 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.

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

Refer to police report attached.

Declaration

We declare the foregoing particulars are true in every respect.

 17/2 4:15pm
Policyholder's Signature / Date & Time

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


Witnessed by Reporting Centre Personnel



**SINGAPORE
POLICE FORCE**



G/20220130/7043

1 of 2

POLICE REPORT (NP299)

Report No. G/20220130/7043

Police Station Of Origin
Bedok Division HQ
30 Bedok North Road SINGAPORE 469676
Tel No:1800-2440000

Date/Time Report Made 30/01/2022 20:01	Vide Report No.	Station Diary No.
Name Of Informant ONN CHANG DA	Address 601C TAMPINES AVENUE 9 #08-844 SINGAPORE 523601	
ID Type / ID No. NRIC NO / S8426541A	Contact No. Home/Office:	Mobile: 98535759
Nationality SINGAPORE CITIZEN	Email Address relphonn@gmail.com	
Occupation logistic	Sex Male	Age 37
Institution/School Name	Date of Birth 16/09/1984	Race Chinese
Date/Time Of Incident 28/01/2022 19:45 - 28/01/2022 20:15	Location Of Incident 601C TAMPINES AVENUE 9 #08-844 SINGAPORE 523601	

Brief details.

ON 28TH JANUARY 2022, EST TIME FROM 745PM - 815PM AT TAMPINES AVE 7 CROSS JUNCTION (TAMPINES POLYCLINIC) . I WAS TRAVELLING HOME IN MY CAR BEARING PLATE NO.SLZ2359Z .

I HAVE CHECKED THE TRAFFIC IS CLEAR SO I PROCEEDED TO MAKE A RIGHT TURN AT THE STATED JUNCTION .

SHORTLY AFTER I MAKE THE TURN TRAVELLING STRAIGHT ON MY LANE , SUDDENLY I FELT

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 30/01/2022 20:01
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



G/20220130/7043

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20220130/7043

A HUGE IMPACT FROM MY REAR LEFT .I THEN REALISE ANOTHER CAR BEARING PLATE NO.SKW1458E DID A WIDE LEFT TURN FROM THE JUNCTION THEN CAME INTO MY LANE AND COLLIDED INTO MY BACK .

THE FOLLOWING DAY AFTER THE ACCIDENT , I FELT DISCOMFORT ON MY NECK AND BACK .I THEN PROCEEDED TO 24 HOURS CLINIC AT BEDOK TO HAVE A MEDICAL CHECK AND WAS GIVEN 3 DAYS OF MC .

Subjects Involved			
Victim			
Person Name	ONN CHANG DA		
ID Type	NRIC NO	ID No	S8426541A
Gender	Male	Age	37
Race	Chinese	Language	English
Occupation	logistic	Address	601C TAMPINES AVENUE 9 #08-844 SINGAPORE 523601
Mobile No	98535759	Is Informant A Victim?	Yes
Person Name	ONN CHANG DA (Informant)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 30/01/2022 20:01
Officer In-Charge Of Case:	Classification Of Case: