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 witholding 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 Date of Accident Exact Location of Accident Additional Location Information	02/03/2022 14:08 (SGT) 01/03/2022 13:30 (SGT) Singapore ALONG BUKIT TIMAH ROAD (AFTER TAN CHONG MOTOR BUILDING)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDF707R
INSURED/POLICYHOLDER	

Toyota

Is company?	No
, ,	INO
Name Of Registered Owner	PANG SAY KONG
NRIC No	S0101013A
Email Address	pangsaykong@gmail.com
Mobile Phone No	(Phone) +65-98333683
Alternative Phone No	+65-98333683

VEHICLE PARTICULARS

Manufacturer

C-HR HYBRID 1.8G CVT
-
-
No - Claiming third party
Private car
Auto
, tato

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number	United Overseas Insurance Ltd Comprehensive No DHOM110156631704

DRIVER

Name of Driver PANG SWEE LENG NEE LAU NRIC No S0106279D Date Of Birth 16/08/1949 Occupation Indoor Date Of Driving Pass 11/02/1969 Driving experience 53 YEARS AND 1 MONTH Gender Female Mobile Number (Phone) +65-98219789 Alt. Phone Number Email Address pangsaykong@gmail.com Address 16 JALAN BINGKA Address complement Postcode 588914 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Spouse 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 - Major/Minor Rd 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? No 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? 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 driving along Bukit Timah Road just passing Tan Chong Motor Building on the 2nd lane when this car (SMN 8261H) exited from

the inner slip road, dash across lane 3 and hit my car on the front left. The lady driver of the other car admitted her fault on the spot saying she was trying to get to the U-turn in front to turn to Dunearn Road. She offered to pay for the repairs but the repair was too costly and advise to claim her insurance.

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	SMN8261F
Vehicle Manufacturer	Mercedes
Vehicle Model	_
Vehicle Variant	_
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	ADELINE

	S7933834F
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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- 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)

Lunderstand, 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
- (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.

Time

Witnessed by Reporting Centre Personnel

Sketch Plan

DUNGARN ROAD TIMAH SLIP ROAD

Describe Circumstances of the Accident
1/3/22
1/3/22 1-30pm clean, olvy-
I was driving along Bulcit Timah Road
just passing Tan Chong motor suilding on the
and have when this car (SMN8261H) exited
from the inner slip road, dash across lane 3
and hit my can on the front left.
The lady driver admitted of the other can
admitted her fault on the spot saying sh
was frying to get to the Uturn infront
to turn to Dunearn Road.
she offered to pay for the rapain but
the repair was too costly and advise to
1
claim her Insurance. That's All
11100 - 1111

Declaration

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

***** decide and no agoing particulars are due in every respect

Sicyholder's Signature / Date & Driver's

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

SIN MING

Witnessed by Reporting Centre Personnel





















