

## 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	11/04/2022 18:49 (SGT)
Date of Accident	10/04/2022 09:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JUNCTION OF STAGMONT RING & WOODLANDS ROAD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLM3773Y
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	JASON CHANG PIK EU
NRIC No	SXXXX374G
Email Address	JASONCHANG73@GMAIL.COM
Mobile Phone No	(Phone) +65-97847525
Alternative Phone No	(Home) +65-81230965

### VEHICLE PARTICULARS

Manufacturer	BMW
Model	218i
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	1499

### INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	-
Cover Note Number	-

### DRIVER

Name of Driver	JASON CHANG PIK EU
NRIC No	SXXXX374G

Date Of Birth	03/07/1973
Occupation	Indoor
Date Of Driving Pass	26/06/2003
Driving experience	18 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97847525
Alt. Phone Number	(Home) +65-81230965
Email Address	JASONCHANG73@GMAIL.COM
Address	APT BLK 631 CHOA CHU KANG NORTH 6
Address complement	#02-225
Postcode	680631
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 - Cross Junction
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	JESSICA CHANG LI SHYEN
Gender	Female

#### 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

SEE ATTACHED SKETCH PLAN

#### 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	SMV9646H
Vehicle Manufacturer	Hyundai
Vehicle Model	Ioniq
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private hire

Name of Driver	GOH AH HOCK
NRIC No	SXXXX402F
Contact Number	(Phone) +65-92380298
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

## SKETCH PLAN

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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.

JASON CHAN

Policyholder's Signature

Date & Time: 11/4/22

8.00 am

Driver's Signature

(If driver is not the policyholder)

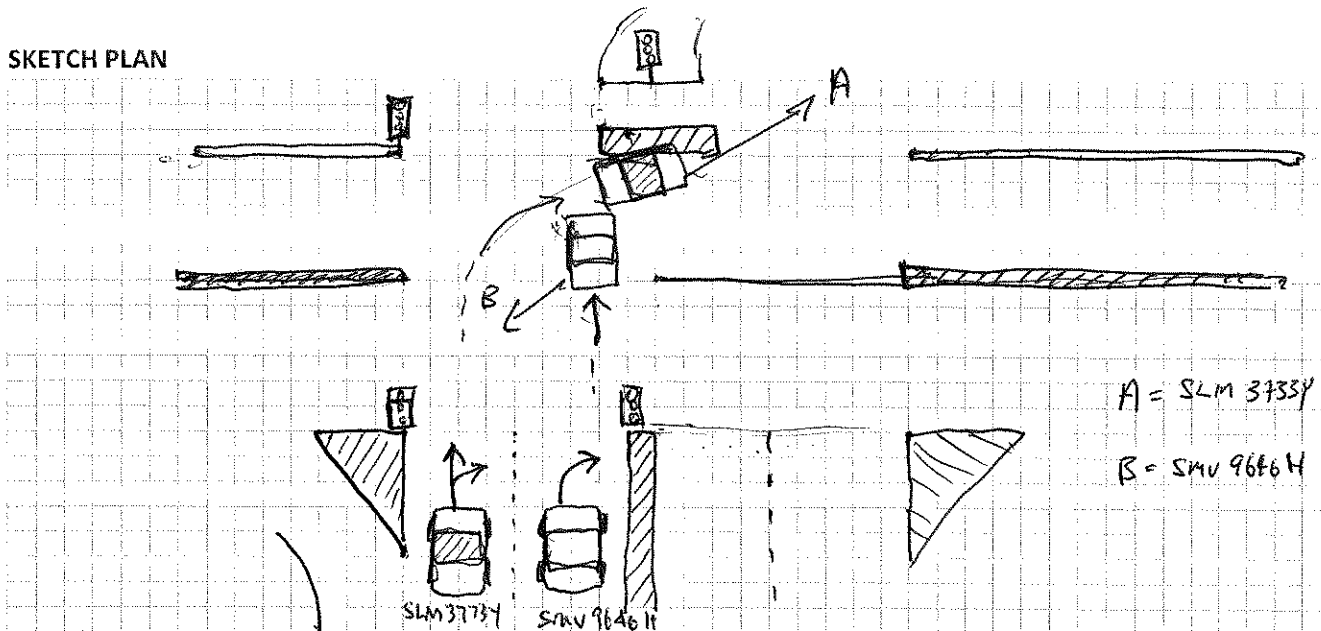
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At 9.00 am on Sunday 10/4/22, I came to a stop at the traffic light of the junction of Stagnant Ring Road and Woodlands Road. It was a clear sunny day. I was on the left lane (for turning right or going straight). In the right lane next to me (for turning right only) was a silver Hyundai Ioniq SMV 9646 H. At the traffic light turned green, I proceeded to make a right turn onto the leftmost lane of Woodlands Road. The silver Hyundai also moved forward at the green light but instead of turning right (he was on the 'right turn only' lane on the right), the driver, Mr Goh Ah Hock drove straight ahead and ~~collided~~ his left front bumper collided with the right rear bumper of my car. As I saw him coming directly at me as I made the right turn, I was forced to swerve to the left to avoid a collision. This caused me to drive over a small road divider. The left rear wheel of my vehicle hit and ascended over the divider.

Neither myself nor my passenger (Jessica Chong) who was in the front passenger seat were injured in any way. I pulled my vehicle to the side of the road. The driver of the Hyundai was also not injured. He admitted that he was in the wrong. The front left bumper of his car was scratched. The rear right bumper of my car was scratched.

## DECLARATION

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

Policyholder's Signature  
Date & Time: 11/4/22  
0840

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

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