

# 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 ..... 22/04/2022 14:09 (SGT)  
Date of Accident ..... 14/04/2022 09:00 (SGT)  
Exact Location of Accident ..... Keppel Rd, Singapore  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SKL4738K

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... STEPHANE ROBERT SCHMID  
NRIC No ..... SXXXX723E  
Email Address ..... dimhcass@gmail.com  
Mobile Phone No ..... (Phone) +65-96827444  
Alternative Phone No ..... +65-96827444

### VEHICLE PARTICULARS

Manufacturer ..... Volkswagen  
Model ..... SPORTSVAN  
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 - Reporting only  
Vehicle Category ..... Private car  
Transmission ..... Auto  
CC ..... 1395

### INSURANCE COMPANY

Name of Insurance Company ..... Sompo Insurance Singapore Pte. Ltd.  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... D21MTPV01005988  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... STEPHANE ROBERT SCHMID  
NRIC No ..... SXXXX723E

Date Of Birth .....	27/02/1968
Occupation .....	Indoor
Date Of Driving Pass .....	31/03/1998
Driving experience .....	24 YEARS AND 1 MONTH
Gender .....	Male
Mobile Number .....	(Phone) +65-96827444
Alt. Phone Number .....	+65-96827444
Email Address .....	dimhcss@gmail.com
Address .....	10 SUNSET TERRACE
Address complement .....	-
Postcode .....	597267
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 - 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 .....	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? .....	No
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO 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 .....	SLQ4469Z
Vehicle Manufacturer .....	Toyota
Vehicle Model .....	Prius
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private hire
Name of Driver .....	-
Contact Number .....	(Phone) +65-97477881
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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8. **Consent under the Personal Data Protection Act (PDPA)**

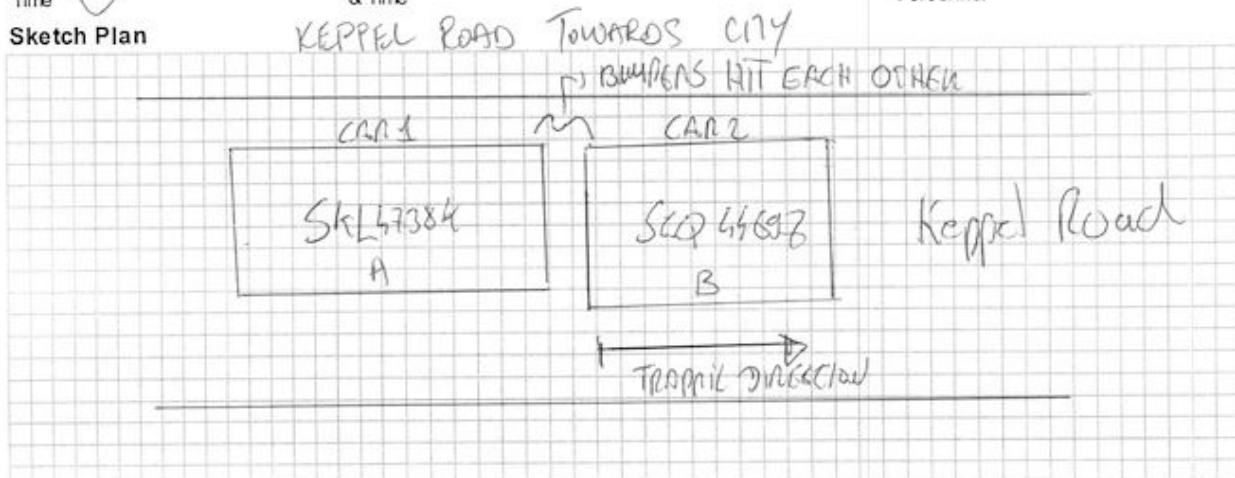
I understand, acknowledge, agree and consent that:

- (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.

*[Signature]*  
22 April 2022  
Policyholder's Signature / Date & Time

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

*[Signature]* 22/04/2022  
Witnessed by Reporting Centre Personnel

**Sketch Plan**

## Describe Circumstances of the Accident

- 1) 9AM heavy office morning traffic on Kippel Road
- 2) "Bumper to Bumper" traffic due to traffic light,
- 3) Car in front sudden stop after moving forward.  
I did hit my brakes but ended with a LIGHT touch from my car bumper to his
- 4) We exchange phone numbers + took photo. He said no need to have my IC (he = taxi driver (sub))
- 5) He indicated "very small matter and if you agree, I won't report insurance but look for repair quote" which I agreed.
- 6) He called me 9h49 am (proof available) to indicate that I must pay \$200 - compensation + cost of repair. I said to give me quote - which he said he will after then commented "you are just a foreigner living here". He never wanted (I barely came close as minor incident) - instead he went to report "behind my back" then Songo wrote me letter to urgently file (received 21 April, 2nd day after).
- 7) US my plate damage is USD from this accident.

## Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time



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

28 April 2012  
10h50 am

Witnessed by Reporting Centre Personnel

  
22/04/2012

























Thu, Apr 14

🔒 Messages and calls are end-to-end encrypted. No one outside of this chat, not even WhatsApp, can read or listen to them. Tap to learn more.

My name is Stephane. Ref accident this morning you can contact me on this mobile.  
Thanks !

9:11 AM ✓✓

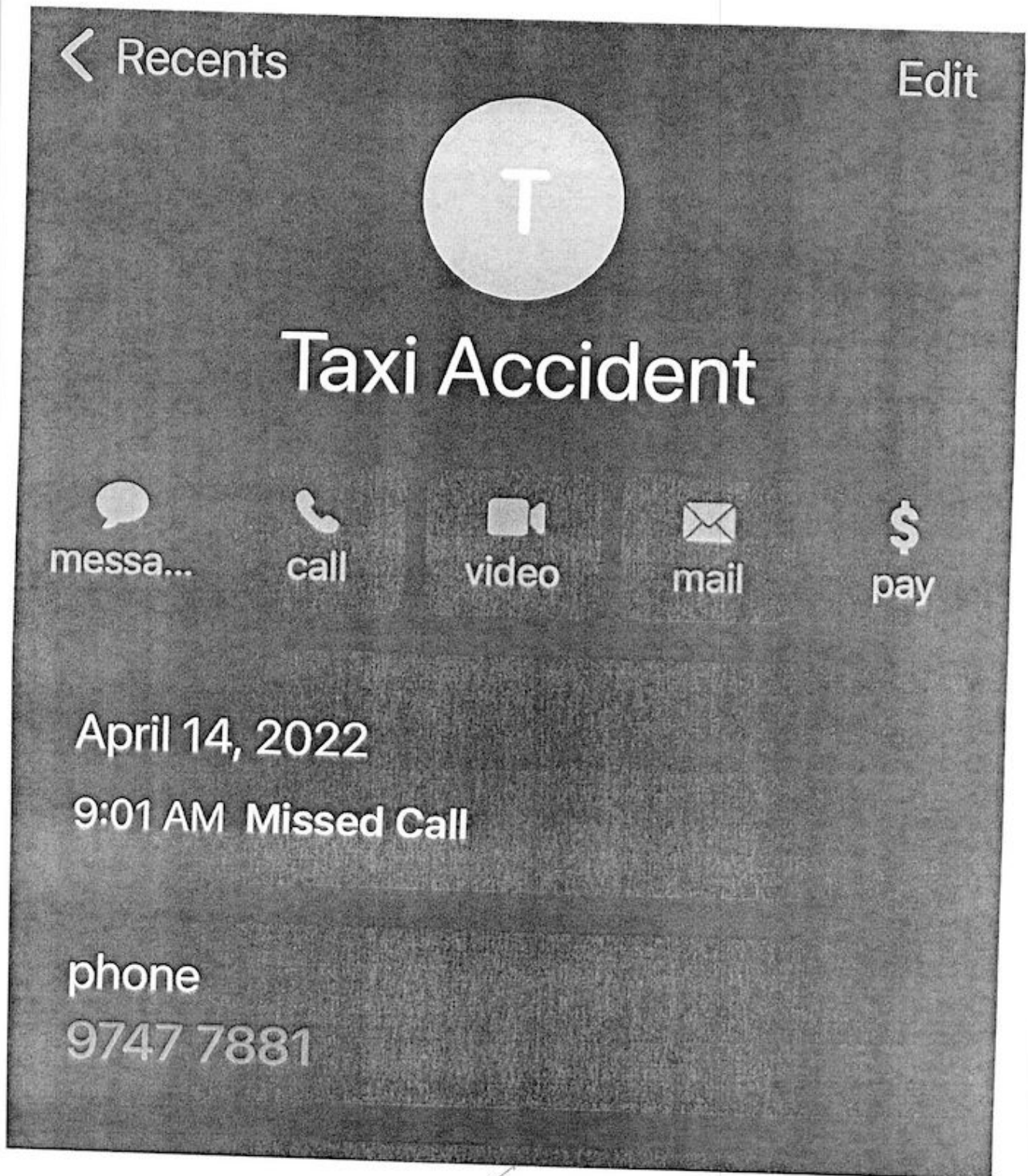
Today

My insurance contacted me. You told me you did not want to file ! I was fair but you are not. Very disappointing. The minimum would have been to inform me.

3:27 PM ✓✓

*aw 22/04/2022*





*over 22/04/2022*

< Recents

Edit



Taxi Accident

 messa...

 call

 video

 mail

 pay

April 14, 2022

9:49 AM **Incoming Call**  
2 minutes

phone **RECENT**

9747 7881

*gw 22/04/2022*