

# 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	19/04/2022 16:45 (SGT)
Date of Accident	17/03/2022 10:30 (SGT)
Exact Location of Accident	Outram, Singapore
Additional Location Information	OUTRAM ROAD TOWARDS CANTONMENT ROAD
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBK9967U
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### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	ETONHOUSE INTERNATIONAL PRE-SCHOOL PTE LTD
Company Reg No	200619185R
Email Address	WINSTON.TAN@ETONHOUSE.EDU.SG
Mobile Phone No	(Phone) +65-90285731
Alternative Phone No	(Office) +65-90285731

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Hiace
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	Commercial vehicle
Transmission	Manual
CC	2982

### INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	22-MQ000531-R01
Cover Note Number	-

### DRIVER

Name of Driver	KOH HOCK ENG
NRIC No	S1661647H

Date Of Birth	30/08/1964
Occupation	Outdoor
Date Of Driving Pass	12/06/1997
Driving experience	24 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97858116
Alt. Phone Number	-
Email Address	WINSTON.TAN@ETONHOUSE.EDU.SG
Address	BLK 55 TELOK BLANGAH DRIVE #10-58
Address complement	-
Postcode	100055
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

ON 12 MARCH 2022 AT ABOUT 10.30 HRS. I WAS DRIVING ALONG OUTRAM ROAD TOWARDS CANTONMENT ROAD. AS I WAS PASSING BY THE LORRY IN LANE 1. AS I PASS/OVERTAKE, ALONG LANE ONE, AS HE IS DRIVING ON LANE 2 SUDDENLY, I HEARD A SCRATCH SOUND ON MY LEFT SIDE I SAW FROM MY LEFT HAND MIRROR. THE LORRY HAD HIT MY LEFT SIDE. REASON FOR LATE REPORT IS DUE TO A PRIVATE SETTLEMENT THAT FAIL.

#### 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	YN4804B
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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 PLANIMPORTANT NOTICE

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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 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 firms/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' law firms/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 firms/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

 19/4/2022  
Policyholder's Signature / Date & Time

 19/4/2022  
Driver's Signature (if driver is not the policyholder) / Date & Time

  
Witnessed by Reporting Centre Personnel

Sketch Plan



A: G6K9967U

B: YN4804B

Describe Circumstances of the Accident

On 12 March 2022 at approx 1030 hrs. I was driving along Curran Road towards Convent Road.

As I was passing by the bridge in lane 1, as I passed over the bridge, along lane one, as he is driving on lane 2. Suddenly I heard a screech sound at my left side. I saw that my left hand mirror. The bridge had hit my left side.

*[Signature]*

Reason for late report is due to a private settlement that had

*[Signature]* 19/4/2022

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

Witnessed by Reporting Centre Personnel