# **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.

- 4. The issue and acceptance of this is form by instrained 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 30/05/2022 11:56 (SGT) Date of Accident 29/05/2022 15:15 (SGT) Exact Location of Accident Sixth Ave, Singapore Additional Location Information TOWARDS HOLLAND ROAD Country/State of Loss Singapore

## **DETAILS OF OWN VEHICLE**

Honda

Vehicle Registration Number SKW1338T

#### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner CHIA JEE PHUN JENNIFER NRIC No. SXXXX535Z Email Address jchia@umwgroup.com.sg Mobile Phone No (Phone) +65-96289698 Alternative Phone No +65-96289698

#### VEHICLE PARTICULARS

Manufacturer

Model Odyssey 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 2353

#### **INSURANCE COMPANY**

Name of Insurance Company United Overseas Insurance Ltd Type of Coverage Comprehensive Fleet Policy Policy Number DHOM110181402200 Cover Note Number

## DRIVER

Name of Driver CHIA JEE PHUN JENNIFER NRIC No. SXXXX535Z

Date Of Birth Occupation Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver	02/02/1948 Indoor 07/07/1967 54 YEARS AND 10 MONTHS Female (Phone) +65-96289698 +65-96289698 jchia@umwgroup.com.sg 27 FERNHILL CRESCENT - 259181 Yes
Insurance Company of Other Vehicle Owned by Driver	-
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Collision - Head to Rear Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?  Number of vehicles involved in the accident  Was anybody injured in the Accident?  Was any injured conveyed to hospital by ambulance?  Was any other vehicle or property damaged?  Number of Passengers (Including Driver)  Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No 2 No - Yes 1
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?	
CIRCUMSTANCES OF ACCIDENT	
WHITE VAN DRIVEN BY MR AMIRUL AKMAL BIN MOHD NADZI REAR OF MY HONDA ODYSSEY SKW1338T. THE REGISTRAT EXPRESS" PAINTED ON THE VAN. THE VAN HAD THE FOLLO LTD, 8 CHANG CHARN ROAD #04-01 LINK (THM) BUILDING, S	AND ALLOW A CAR TO TURN RIGHT INTO MING TECK PARK. A RI WITH DRIVING LICENCE SXXXX136E COLLIDED INTO THE ION PLATE OF THE VAN IS GBK7036U WITH THE WORDS "FENG WING PAINTED ON IT PAN PACIFIC VAN & TRUCK LEASING PTE SINGAPORE 159637 COMPANY NO :201511635R. THE ACCIDENT AS HE DID NOT STOP AND COLLIDED O THE REAR OF MY CAR. VERE NO INJURIES TO BOTH PARTIES AND WE EACH DRIVE
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera? Was there any audio recorded?  DETAILS OF OTHER	Yes Yes No  VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model	-

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	AMIRUL AKMAL BIN MOHD NADZRI
NRIC No	SXXXX136E
Contact Number	(Phone) +65-89133923
Address	<del>-</del>
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

#### SKETCH PLAN

### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Formmust 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. 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)

l 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 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 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 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.

20/00 30 May 2022 Witnessed by Reporting Centre Driver's Signature (if driver is not the policyholder) / Date Policyholder's Signature / Date & Personnel & Time Time / //an Sketch Plan SKN/3387 GB 7036 A) SKN 13387

KILLIKE	7. (	300 KMCa	N	91	ATTACHA	AFIAN -			
	10	SO ILLIAM	1/	-	9119091	WAY.			
								\	
								/	
								/	
								/	
								/	
							/		
							/		
							-/-		
						/			
						/			
					_/				
					/				
				/					
				-/-					
			/						
			-						
			1						
			_						
eclaration	1								
eclaration	1								
				a le succ	nu ragnast				
		ing particulars	are true	e in ever	ry respect.				
		ing particulars	are true	e in ever	ry respect.				
		ing particulars	are true	e in eve	ry respect.				
		ing particulars	are true	e in evel	ry respect.				///
		ing particulars	are true	e in eve	ry respect.				
eclaration We declare the		2	are true	e in eve	ry respect.			M 3	0/05/2022
ve declare the	ne forego	7 MAY2022					V/Pd	Jul 3	0/05/2022
	ne forego	7 MAY2022		s Signat		not the policyholder	) / Date	Witnessed by Rep	0/05/2022 porting Centre

Accident on Sunday 29 May 2022 slong bixth Arthur 1. On Sunday 29 May 2022 at about 5.15/5 20 mm tirection of Holland Road. 2. I had stopped and so had the several cars shead of met & allow a car & furn right int Dring Tack Park. 3. A white van driver by ont AMIRULAKMAL BIN MOHD NADZRI with Diring Linence Number 89935136 F. collided into the rear of my Honda Odyesey SKN 13387. 4. The registertion plate of the who is GBK 70364 S. The van Lad the fillowing painted on it Par Pacific Van + Truck Leasing 10th. Ltd & chang chare Road HO4-01 Link (THM) Brilding, Singapre 15-9637 Congary No: 2015/16352. Dur Soldy 6. De accident Laggere of Int Solely & the Leghigence of AMIRUL & Le & I wit stop and collised & the rear of my car. He downted hability and apologised for it 7. Thre were no ajuriti & both partits and we each tract off after exchanging Litails. 8. AMIRAL'S Nobile humbr b: 8913 3 923 and botos





















































