

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 GlA Records Management Centre established by the General Insurance Association of Singapore (GlA) 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	21/06/2022 17:14 (SGT)
Date of Accident	21/06/2022 11:25 (SGT)
Exact Location of Accident	Ophir Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SCA3200D
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHAN PUI FUN
NRIC No	SXXXX256Z
Email Address	SYLCHIA17@GMAIL.COM
Mobile Phone No	(Phone) +65-91911092
Alternative Phone No	(Home) +

VEHICLE PARTICULARS

Manufacturer	BMW
Model	220i
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	1997

INSURANCE COMPANY

Name of Insurance Company	EQ Insurance Company Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPPHQ21-008048
Cover Note Number	-

DRIVER

Name of Driver	CHIA ENG HENG SYLVESTER
NRIC No	SXXXX153E

Date Of Birth 17/04/1965
 Occupation Indoor
 Date Of Driving Pass 20/01/1989
 Driving experience 33 YEARS AND 5 MONTHS
 Gender Male
 Mobile Number (Phone) +65-96832777
 Alt. Phone Number -
 Email Address SYLCHIA17@GMAIL.COM
 Address 97 YUK TONG AVENUE
 Address complement -
 Postcode 596404
 Is the driver the policyholder? No
 If No, Relationship of the Driver with the Insured Spouse
 Does Driver Own Other Vehicles? Yes
 Vehicle Registration Number of Other Vehicle Owned by Driver SFJ17D
 Insurance Company of Other Vehicle Owned by Driver EQ Insurance Company Ltd

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Side Swipe
 Weather Conditions AFTER RAIN/CLOUDY
 Road Surface Wet

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 CHAN PUI FUN
 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

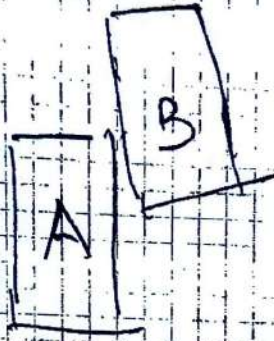
ATTACHMENT(S)

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 SHB435Z
 Vehicle Manufacturer Toyota
 Vehicle Model -
 Vehicle Variant -
 Vehicle Colour -
 Vehicle Category Taxi

Name of Driver	LOON WAI CHUNG
NRIC No	SXXXX229B
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	LEFT
No. Of Passenger (Including Driver)	2



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was waiting for the traffic light to turn green and once it turn green i started to drive forward and suddenly i realise there's a maroon taxi swerving towards my lane and i couldn't avoid his vehicle as i am in lane 2 having another vehicle on my left turning toward Beach Road.

DECLARATION

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

Policyholder's Signature

Date & Time:

CHIEF OF POLICE

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

21/6/2022

@ 16366