SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>
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.

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 25/07/2022 16:30 (SGT) Reported by Both Date of Accident 24/07/2022 14:00 (SGT) Exact Location of Accident Orchard Rd, Singapore Additional Location Information OUTSIDE TANG SHOPPING MALL Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMT6211J

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner NG ZHENG WANG NRIC No S9030245J Email Address calng23@icloud.com Mobile Phone No (Phone) +65-91750272 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Mercedes Model C180 Exact purpose for which vehicle was being used at time of 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 1600

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd Policy Number / Cover Note Number 5122292867-01

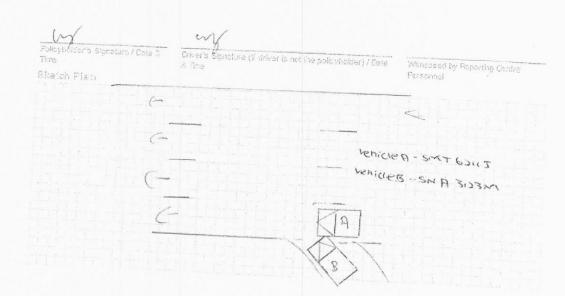
DRIVER

Name of Driver NG ZHENG WANG NRIC No S9030245J Date Of Birth 23/08/1990 Occupation Indoor

Date Of Driving Pass	20/05/2021				
Driving experience	1 YEAR AND 2 MONTHS				
Gender	Male				
Mobile Number	(Phone) +65-91750272				
Alt. Phone Number	-				
Email Address	calng23@icloud.com				
Address	BLK 727 TAMPINES STREET 71 #08-13				
Address complement					
Postcode	520727				
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 - Major/Minor Rd				
Weather Conditions	Raining				
Road Surface	Wet				
OTHER INFORMATION					
Was any foreign vehicle involved in the accident?					
Number of vehicles involved in the accident	No				
Was anybody injured in the Accident?	2				
Was any injured conveyed to hospital by ambulance?	No				
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				
Translator's name					
Translator's ID	[19] [1] [1] [1] [2] [2] [2] [3] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4				
Translator's phone number					
Translator's email	5 -1 686 116 116 11 116 116 116 1				
Original language used in the statement					
DETAILS OF POLICE ACTION					
Was the accident reported to the police?					
Was notice of intended Prosecution given?	No				
If yes, against whom?	No				
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CIRCUMSTANCES OF ACCIDENT					
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ATTACHMENT(S)					
A					
Are accident photos available for attachment?	Yes				
Was there any video captured by Car Camera?	No				
DETAILS OF OTHER	VEHICLE PROPERTY 1				
Vehicle Registration Number					
Vehicle Manufacturer	SNA3123M				
Vehicle Model					
Vehicle Variant					
Vehicle Colour					
Vehicle Category	Private car				

Contact Number	-
Address	
Address complement	
Postcode	
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	VEHICLE B
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- 8. Consent under the Personal Date Protection Act (PDPA)
- (a) My insurer into workshop and the General Insurance Ascratision of Singapore ("GIA") may fare permitted to collect, use, distribute and/or process my particul deterpersonal information set out in his Found and any other personal information proceed by my assurer (collectively the "Personal information") and disclose and transfer such Personal information to all information is at my other personal information to all informati poverations agency exchang (such as the police), for the purpose(s) of
- (i) processing, harving sucher dealing with my cleans including the seutement of the stains and my necessary investigations relating to (ii) investigating the accident and/or my claims.
- (ii) carrying out and/or dealing with my instructions or reaponding to any enquiries by ma-
- (tv) sondhistering my claims (including the neithy of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal care about mo to bring about delivery of the panie as well as on the ordered cover of envelopes/med
- (v) complying with applicable law in administering, processing, handling end/or dealing with my claims. (collectarely the Perposes)
- (b) all usurer(s) who have insured vehicle(s) involved in this occident and the histness lawyersdaw thris, maylers permitted to colors. uses, declose ancier process my Personal reformation for one or more of the above Purposes; and
- (a) by Porsonal Exemption may/can be disclosed by any of the insurers and/or Giv to their third party service providers or agents (highding their levings daw firms), which may be sized outside of Singapore, for one or more of the above Purposes.



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