

## 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 Actual 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 .....	29/07/2022 18:28 (SGT)
Reported by .....	Driver
Date of Accident .....	29/07/2022 13:15 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	JALAN PERGAM & JALAN DEMAK
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SLP8425D
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	NI JIA LIANG
NRIC No .....	S8537817A
Email Address .....	nijiali265@gmail.com
Mobile Phone No .....	(Phone) +65-94599099
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Lexus
Model .....	LEXUS IS250 AUTO STD FL
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 .....	2500

#### INSURANCE COMPANY

Name of Insurance Company .....	Sompo Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number .....	D22MTPV01009366

#### DRIVER

Name of Driver .....	LING WHEE YEW
NRIC No .....	S7715814F
Date Of Birth .....	14/06/1977
Occupation .....	Outdoor

Date Of Driving Pass .....	18/01/2000
Driving experience .....	22 YEARS AND 6 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-81215265
Alt. Phone Number .....	-
Email Address .....	kalvin@apxxi.com
Address .....	2 SIM DRIVES #13-14 S387386
Address complement .....	-
Postcode .....	-
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Friend
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 - Change/cross lane
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
Translator's name .....	-
Translator's ID .....	-
Translator's phone number .....	-
Translator's email .....	-
Original language used in the statement .....	-

#### 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 ATTACHED REPORT

#### ATTACHMENT(S)

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 .....	SND5247K
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	NG WILLIAM
Contact Number .....	-

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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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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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' 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

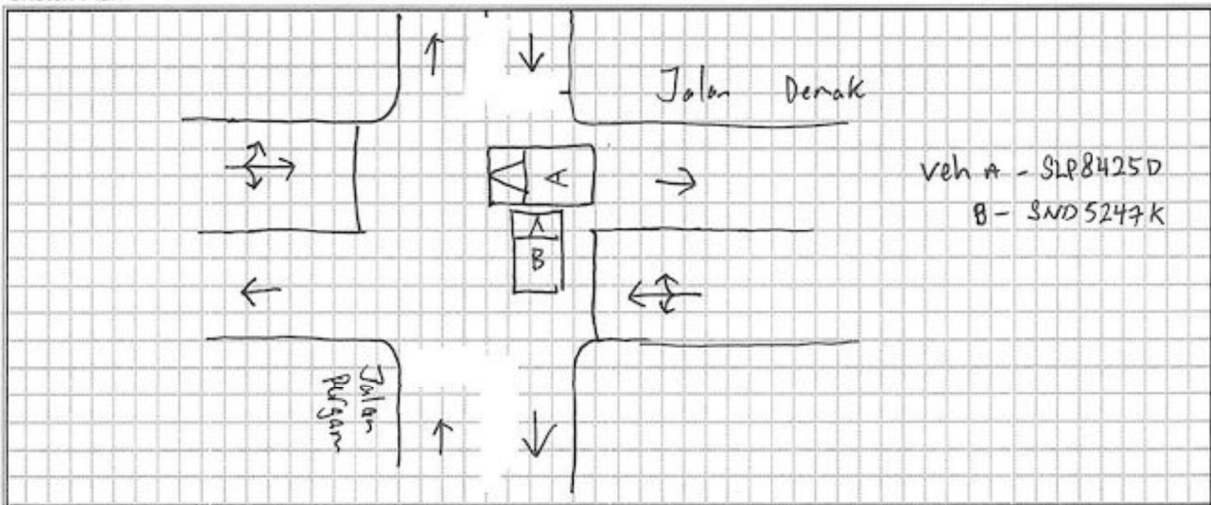
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)

Sketch Plan




## Describe Circumstance of the Accident


As per above date and time, I was driving SLP 4250 along Jalan Demak towards Upper Changi Road East. Somewhere around Jalan Pergam, I was driving straight and out of sudden veh (B) SNP 5247K from Jalan Pergam collided onto my vehicle left portion.

## Declaration

I/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  
16-30  
28/7/22

  
Witnessed by Reporting Service Personnel  
(Name as in NRIC/ID card)






























**Sompo Insurance Singapore Pte. Ltd.**

50 Raffles Place, #03-03  
Singapore Land Tower, Singapore 048623  
Tel: 6461 6555 | Fax: 6221 3302 | www.sompo.com.sg  
Co. Reg. No.: 198905490E | GST Reg. No.: M200903196

**PRIVATE CAR POLICY SCHEDULE**
**Intermediary Code :** 11D09106

**Policy No. :** D22MTPV01009366

This Schedule is issued in accordance and should be read in conjunction with the terms, conditions and exceptions of the PRIVATE CAR Policy wordings, ref. MTP.30

**Insured :** NI JIALIANG  
**Address :** BLK450C  
SENGKANG WEST WAY #04-349  
SINGAPORE 793450

**Business/Profession :** DRIVER

**INSURED DETAILS**

**Date of Birth & Age :** 09 NOV 1985 & 36 years old  
**Driving Experience in Singapore :** 7 years  
**Identification Type :** NRIC(Singaporean)  
**Marital Status :** MARRIED  
**Gender :** Male  
**Identification No. :** S8537817A

**Period of Insurance :** 11 JUNE 2022 00:00 TO 10 JUNE 2023 23:59

**Persons or Classes of Persons entitled to drive :** Refer to Certificate of Insurance

**Limitations as to use :** Refer to Certificate of Insurance

**VEHICLE DETAILS**

**Vehicle Registration No. :** SLP8425D  
**Chassis No. :** JTHBK262202087054  
**Engine No. :** 4GR0532370  
**Vehicle Make & Model :** LEXUS IS 250  
**Engine Capacity :** 2500  
**NCD Entitlement :** 10%  
**Year of Registration :** 2008  
**NCD Protection :** No  
**Estimated value of Vehicle :** Market value at time of loss  
**Hire Purchase Owner :** MAYBANK SINGAPORE LIMITED

**PREMIUM DETAILS**

**Premium after applicable discount(s) :** S\$ 1,451.42  
**GST :** S\$ 101.60  
**Premium (incl. GST) :** S\$ 1,553.02

**Coverage :** Comprehensive - ExcelDrive GOLD

**Excess :** \$ 600 - Section I

**Voluntary Excess :** N/A

**Additional Excess :** Named Young and/or Inexperienced Drivers S\$1,500  
Un-named Young and/or Inexperienced Drivers S\$3,000  
Un-named All Other Drivers S\$500

'Young Drivers' shall be defined as drivers (including the Insured) who are below 27 years old.  
'Inexperienced Drivers' shall be defined as drivers (including the Insured) who have less than 1 year of driving experience in Singapore roads.

**Windscreen Excess :** S\$100.00 for each and every applicable claim.

**Endorsements Applicable :** Endorsement AA2 - ExcelDrive Gold Plan  
Endorsement D1 - Young and/or Inexperienced Drivers  
Endorsement E - Excess Clause  
Endorsement H - Total Loss  
Endorsement L - Hire Purchase  
Endorsement M - Inclusion Of Special Perils  
Endorsement P6 - Riot And Strike Endorsement  
Endorsement Z - Loss of Use Benefit

**Additional Cover :** NIL

Insured Copy