



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	06/08/2022 17:24 (SGT)
Reported by	Both
Date of Accident	06/08/2022 12:15 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ALONG PIE TOWARDS CHANGI BEFORE EXIT 17D
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLZ8168T
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAN WEY HORNG
NRIC No	SXXXX851H
Email Address	skyhawky_88@hotmail.com
Mobile Phone No	(Phone) +65-92740889
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Qashqai
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	1197

INSURANCE COMPANY

Name of Insurance Company	Singapore Life Ltd
Policy Number / Cover Note Number	10821877

DRIVER

Name of Driver	TAN WEY HORNG
NRIC No	SXXXX851H
Date Of Birth	14/11/1978
Occupation	Indoor

Date Of Driving Pass	12/05/1997
Driving experience	25 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92740889
Alt. Phone Number	-
Email Address	skyhawky_88@hotmail.com
Address	BLK 54 LENGKOK BAHRU
Address complement	#01-347
Postcode	150054
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	4
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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	Passenger 1
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

I was traveling along pie towards Changi just before exit 17D it was a 4 lane traffic and my vehicle was positioned in the 1st lane then vehicle ahead of me jam braked and I also jam my brakes and came to an complete stop then third party vehicle which was behind me was not able to stop in time and collided onto my vehicle rear and that impact rolled my vehicle forward and hit onto the vehicle ahead of me . No injuries involved.

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	SJE9338Y
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Vehicle Manufacturer	Toyota
Vehicle Model	Axio
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Private car
Name of Driver	ERIC NG KOON SIONG
NRIC No	SXXXX315Z
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2


Vehicle Registration Number	SMA6125A
Vehicle Manufacturer	Toyota
Vehicle Model	Harrier
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Private car
Name of Driver	NG SOO KIAT MAX
NRIC No	SXXXX976D
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SKN3298J
Vehicle Manufacturer	Mercedes
Vehicle Model	B180
Vehicle Variant	-
Vehicle Colour	Black
Vehicle Category	Private car
Name of Driver	LIM CHENG SAN
NRIC No	SXXXX589D
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**

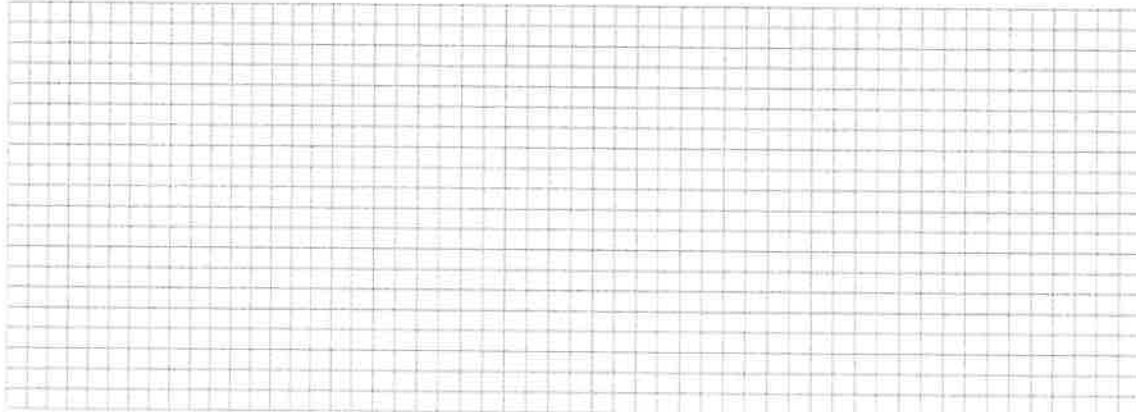
1. Please report **correctly** the details of the accident to speed up the claims process.
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available 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 **6 Aug 2022**
Sketch Plan

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

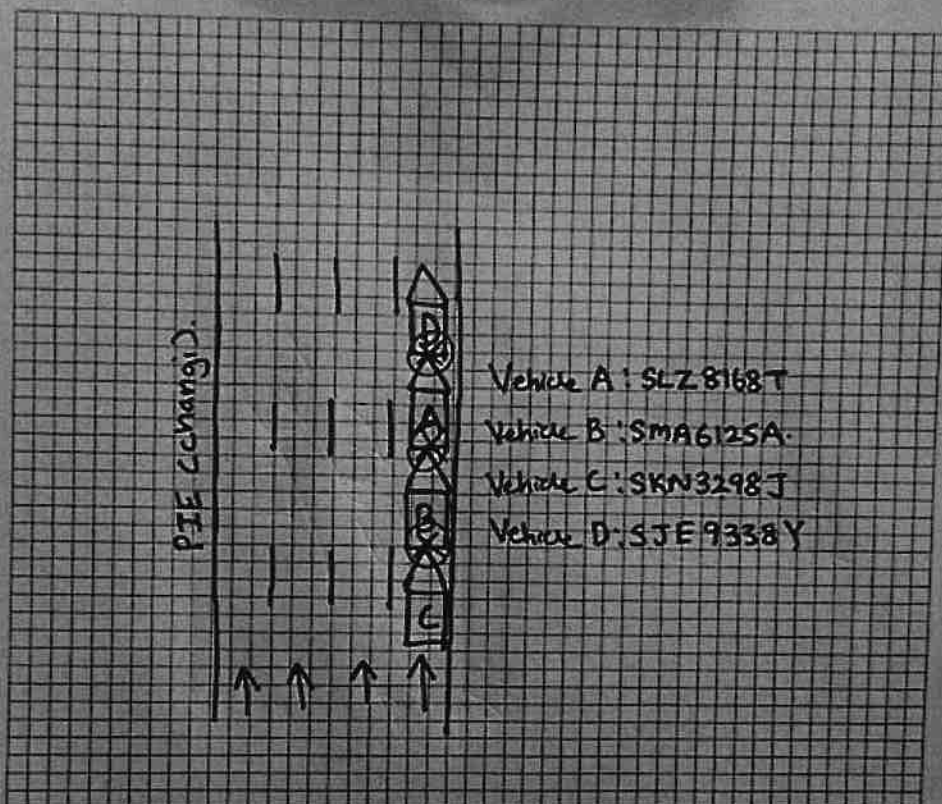
Witnessed By Reporting Officer
Mohamed Saifullah S/O Syed Masood

Witnessed by Reporting Centre
Personnel



ACCIDENT DIAGRAM

Ver. Jun2022



Policyholder's Signature / Date & Time

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

Witnessed By Reporting Officer
Mohamed Saifullah S/O Syed Masood
Witnessed by Reporting Centre
Personnel

AJAX MARS PTE LTD

Describe Circumstances of the Accident

I was traveling along pie towards Changi just before exit 17D it was a 4 lane traffic and my vehicle was positioned in the 1st lane then vehicle ahead of me jam brakod and I also jam my brakes and came to an complete stop then third party vehicle which was behind me was not able to stop in time and collided onto my vehicle rear and that impact rolled my vehicle forward and hit onto the vehicle ahead of me . No injuries involved.

Declaration

We declare the foregoing particulars are true in every respect.


Policyholder's Signature / Date &
Time: 6 Aug 2022

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

Witnessed By Reporting Officer
Mohamed Saifullah S/O Syed Masood
Witnessed by Reporting Centre
Personnel













