# 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.

  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 08/08/2022 14:57 (SGT) Reported by Date of Accident 06/08/2022 10:35 (SGT) Exact Location of Accident Bedok North Rd, Singapore Additional Location Information ALONG BEDOK NORTH ROAD Country/State of Loss Singapore

#### **DETAILS OF OWN VEHICLE**

Private hire

No - Reporting only

Vehicle Registration Number **SMW396H** 

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner LEOW TECK CHOON MAURICE NRIC No. S6910072D Email Address mauriceleow1@gmail.com Mobile Phone No (Phone) +65-96278472

Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Noah

**HYBRID 7-SEATER 1.8X CVT** 

Exact purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to your vehicle? Vehicle Category

Private hire Transmission Auto 1797

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.

Policy Number / Cover Note Number DMHCSNW00012792100

DRIVER

Name of Driver LEOW TECK CHOON MAURICE NRIC No S6910072D Date Of Birth 31/03/1969 Occupation Outdoor

Date Of Driving Pass	22/09/1988
Driving experience	33 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96278472
Alt. Phone Number	-
Email Address	mauriceleow1@gmail.com
Address	2 PARKSTONE ROAD
Address complement	-
Postcode	437649
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	
Towns of Assistant	
Type of Accident	Side Swipe
Weather Conditions Road Surface	Clear
Rodu Sullace	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)	N -
soliciting/offering accident claims assistance? Translator's name	No
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?	Ma
Was notice of intended Prosecution given?	No No
If yes, against whom?	No
ii yes, against whom:	•
CIRCUMSTANCES OF ACCIDENT	
ON 6/8/22 AT ABT 1035AM I WAS TRAVELLING ALONG BEDOK TURN & VEHICLE B: SME1982D SWIPE THROUGH MY RIGHT S	
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	SME1982D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant Vehicle Colour	-
Vehicle Category	- Drivete cor
	Private car
Name of Driver	

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

- Please report <u>correctly</u> 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.
- 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
- 7. By the lodgment 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)
  - (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.
- my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time:

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

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

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lok North Rd. A	is I was abt to turn into the junction
turn & vehicle &	: SME1982A SWIPE through my right side
Tarri J. To To J.	0 - 31 ( 1. 0 )
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CLARATION	
CLARATION Ve declare the foregoing particula	ars are true in every respect.
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We declare the foregoing particula	
We declare the foregoing particula	Reporting Centre Personnel's Signature
ECLARATION  We declare the foregoing particula policyholder & Signature ate & Time:	

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The price of the p		Motor Hire Car				
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4. Date of Loany of Insurance  18/11/2022  Excess Sect. It (Outside Singapore)  5. Persons or Classes of Persons entitled to often As per Named Driver(s) stated below. Provided that the person driving is permitted in accordance with the isonating or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not or qualified by order of regulations to drive the Motor Vehicle or has been so permitted and is not or qualified by order of regulations to drive the Motor Vehicle or has been so permitted and is not or qualified by order of regulations to drive the Motor Vehicle.  1. Limitations as to use.*  (1) Use for the carriage of passengers or goods in connection with the Policy/holder's business. (2) Use for social diometric pressure purposes and toxiness purposes of any person to whom the vehicle is hired.  The Policy does not considered insperative by section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Mallaysia).  **Limitations rendered insperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Mallaysia).  **Limitations rendered insperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Mallaysia).  **Limitations rendered insperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Mallaysia).  **Limitations rendered insperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Mallaysia).  **Limitations rendered insperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Mallaysia).  **Limitations rendered insperative by Section 8 of the Motor Vehicles (Third-Party Risks a						
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