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 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.

- 4. The issue and acceptance of this is form by instrained 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 05/09/2022 19:38 (SGT) Reported by Date of Accident 03/09/2022 22:40 (SGT) Exact Location of Accident Singapore Additional Location Information CAR PARK AT SERANGOON NORTH AVENUE 1, BLOCK 106 Country/State of Loss Singapore **DETAILS OF OWN VEHICLE** Vehicle Registration Number SLB9228Z INSURED/POLICYHOLDER Is company? No Name Of Registered Owner CHENG KAM YIN NRIC No SXXXX918I **Email Address** Alternative Phone No VEHICLE PARTICULARS Manufacturer Toyota Model Corolla Variant **ALTIS** 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? Yes Vehicle Category Private car Transmission Auto CC 1598 **INSURANCE COMPANY** Name of Insurance Company United Overseas Insurance Ltd Policy Number / Cover Note Number DHOM120051812002 DRIVER Name of Driver CHENG KE JING

SXXXX726A

NRIC No

Date Of Birth Occupation

Date Of Driving Pass	
Driving experience	
Gender	Male
Mobile Number	(Phone) +65
Alt. Phone Number	-
Email Address	
Address	
Address complement	
Postcode	
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
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	Collided into Parked Vehicle
Weather Conditions	Clear
Road Surface	
Noau 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?	NO
Was any other vehicle or property damaged?	- Van
	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s)	A.I.
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	
Marana (Ohana Ka Kan) dana mana 20140 an 2 Oha (Oh) and	Landa de la
My son (Cheng Ke Jing) drove my car at 22:40 on 3 Sep (Sat) and with his handphone no., and the latter called up. We discussed an insurance co. to coordinate each other.	
ATTACHMENT(S)	
Are accident photos available for attachment?	Voc
·	Yes
Was there any video captured by Car Camera?	No
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number	SLG7738E

Private car

A				
G	Accident re	oort SKO)J229500	80

Vehicle Category

Vehicle Manufacturer
Vehicle Model
Vehicle Variant
Vehicle Colour

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)	0

SKETCH PLAN

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.
- 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 Traffic Police Department for investigation.
- 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.
- 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.

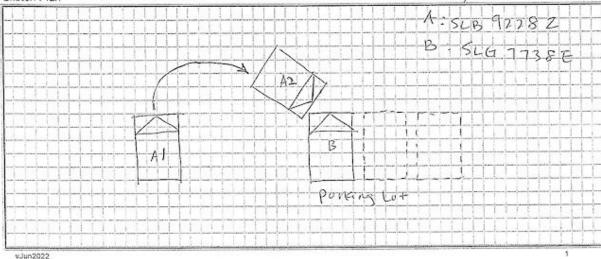
Policyholder's Signature / Date & Time

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

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

TEN

Sketch Plan



PIS See all sched Statement.			MMACHEN STOTECHEMOUNT	PIS CUE
		(100)		
			100	-
	113	-11		
	20 0.00 1000 0.00 0			
		14-4141		15.5
	linal Indiana		i and the same and	
	E	WW.2		
			0)0000000000000000000000000000000000000	
			3451865 - 311	
	103			
claration	AUTO AUTO			
e declare the foregoing particulars are true in every respect.	(S) TEL:	1010-0	ing particulars are true in every respect.	declare the foreg
Sta 2002	6452 7018	61917072		1 1

vJun2022

2



Car damage report Cheng Kam Yin to claim or "Ke Jing", siewkin127

04/09/2022 13:53

Dear Sir.

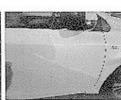
I am Cheng Kam Yin (NRIC my car has been covered under the policy no. DHOM1200-5181-2002 with OUI.

< Highlights of accident >

- My car (SLB9228Z) was driven by My son (Cheng Ke Jing) who is registered driver of this car.
 Victim car (SLG7738E) owned by Mr. Lee Eng Chee (Cheng Ke Jing) who is registered driver of this car.
- Victim car (SLG7738E) owned by Mr. <u>Lee</u> Eng Chee (
 car during the accident.
- My car carelessly hit the parked victim car at carpark at block 106, Serangoon North Ave. 1.
- Nobody was injured as nobody was in the victim car, and my son is not injured at all.
- Condition of Damage :
 - My car damaged the right front + right door portion (see attached photo my car 1 3)
 - Victim car damaged the left front portion (see attached photo victim car 1 3)









my car 1.jpg

my car 2.jpg

my car 3.jpg

victim car 1.jpg





victim car 2.jpg

victim car 3.jpg

< Details of accident >

My son (Cheng Ke Jing) drove my car at 22:40 on 3-Sep (Sat) and carelessly hit the victim car. My son left a paper on the victim car with his handphone no., and the latter called up. We discussed and agreed that we repair the car respectively and let both car insurance co. to coordinate each other.

As today is weekend, no workshop is opening. So I will send my car to workshop for repair tomorrow. Please let me know what the next step which I need to do. Thank you and Best Regards

Cheng Kam Yin Hand phone: +6

Tel. +65-63194260 Fax: +65-62655428 -1-6 Cheng Ke Jing













