

*[Signature]*

**ACCIDENT INFORMATION**

Date of accident	04/10/2022	Time of accident (Hrs)	8:30am
Location of accident	TPE (before PPE Exit) Towards Tampines direction.		

**DETAILS OF OWN VEHICLE**

Vehicle registration number	5GF 4051L
Name of registered owner	Tan Yong Hui, James
NRIC/FIN/Passport no.	58908825/1
Email address	yh.tan.james@gmail.com
Mobile phone no.	9173 2395
Alternative phone no.	

**VEHICLE PARTICULARS**

Manufacturer	Honda	Model	Civic 2.0
Insurance company	direct asia	Policy No.	MT/01034060
Insurance coverage	Comprehensive	Third Party Only	Third Party Fire Theft
Fleet policy	Yes	(No)	
Vehicle Category	(Private Car) Private Hire / Others:		
Reporting purpose	Own Damage	Third Party	Reporting Only

**DRIVER'S PARTICULARS**

Name of driver	Tan Yong Hui, James	Same as owner:	(Yes) / No
NRIC/FIN/Passport no.	58908825/1		
Date of birth	13/03/1989		
Occupation	Account manager		
Date of driving pass	07/05/2010		
Gender	(Male)	Female	
Mobile phone no.		Alternative phone no.	
Email address			
Address	Blk 613 woodlands Ave 4 #07-481 (S) 730613		
Postcode		Relationship with owner	

**GENERAL INFORMATION OF ACCIDENT**

Type of collision	(Head to rear) / Chain / Side Swipe / Others:		
Weather conditions	(Clear) / Raining	Road Surface	(Dry) / Wet
Number of passengers		Name:	Gender:
		Name:	Gender:
		Name:	Gender:
Was anybody injured?	Yes	(No)	Police report made?
Videos captured?	Yes	(No)	Yes
			(No)

\* Please pass the video to person in charge if you would like to attach to the report.

Name of person injured	
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**DETAILS OF OTHER VEHICLE**

	Vehicle 1	Vehicle 2	Vehicle 3
Vehicle registration no.	YM 4635 C		
Name of driver	mitsubishi F450		
NRIC/FIN/Passport no.	Thomas chih ret Yang / 51759531H		
Contact Number	8874 1312		
Name of person injured			
Workshop Name & Email address:	hiap lek Automobile Trading, hiaplek@hotmail.com		

**Describe Circumstance of the Accident**

On 04/10/2022 @ about 8.30am, I am travelling along TPE towards Tampines direction. (Before KPE Exit), the cars ahead of me slow down and stop, I too stopped. Moments later, I felt an impact on my rear portion.

The vehicle will be repaired at hiaP 101c Automobile Trading.

*[Signature]*

**Declaration**

I/We declare the foregoing particulars are true in every respect.

*[Signature]*

Policyholder's Signature / Date & Time

*[Signature]*

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

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



## 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.
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 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

⑧ YAM 4635K

⑨ JGF 4051L

TPE (before KPE EXIT)