

**Vin's Automotive Group
Singapore Accident Statement**

Owner/Authorized driver
signature:

ACCIDENT INFORMATION			
Date of accident	15/10/22	Time of accident (Hrs)	3:00 p.m.
Location of accident	Slip Road at Bartley Road towards up Serangoon Rd.		

DETAILS OF OWN VEHICLE	
Vehicle registration number	SJR 9249 D
Name of registered owner	Lay Shi Wei
NRIC/FIN/Passport no.	S8530378/C
Email address	Lay Shi Wei@hotmail.com
Mobile phone no.	97954526
Alternative phone no.	

VEHICLE PARTICULARS			
Manufacturer	VW	Model	Toucan
Insurance company	Taleo Marine	Policy No.	22-M5006362-205
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	Chen Ming Qiang	Same as owner: Yes / No	
NRIC/FIN/Passport no.	S8479918/E		
Date of birth	5/10/1984		
Occupation	Executive		
Date of driving pass	13/1/2010		
Gender	Male	Female	
Mobile phone no.	90189180	Alternative phone no.	
Email address	As above		
Address	B1K 25A, St. George's Lane II 30-51		
Postcode	321025	Relationship with owner	Driver

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	1	Name:	SUWARTI NIN	Gender:	Female
		Name:	ST RASTANA TARM	Gender:	
		Name:	DOMES "L" HELPER	Gender:	
Was anybody injured?	Yes	No	Police report made?	Yes	No
Videos captured?	Yes	No	Please tick if the video is with owner.		
* Please pass the video to person in charge if you would like to attach to the report.					
Name of person injured					

DETAILS OF OTHER VEHICLE			
	Vehicle 1	Vehicle 2	Vehicle 3
Vehicle registration no.	SKA 5841T		
Name of driver	Rachel Hiden Ng Jiah		
NRIC/FIN/Passport no.	S9344209-2		
Contact Number	98267481		
Name of person injured			
Workshop Name & Email address:			

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 reputate 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:

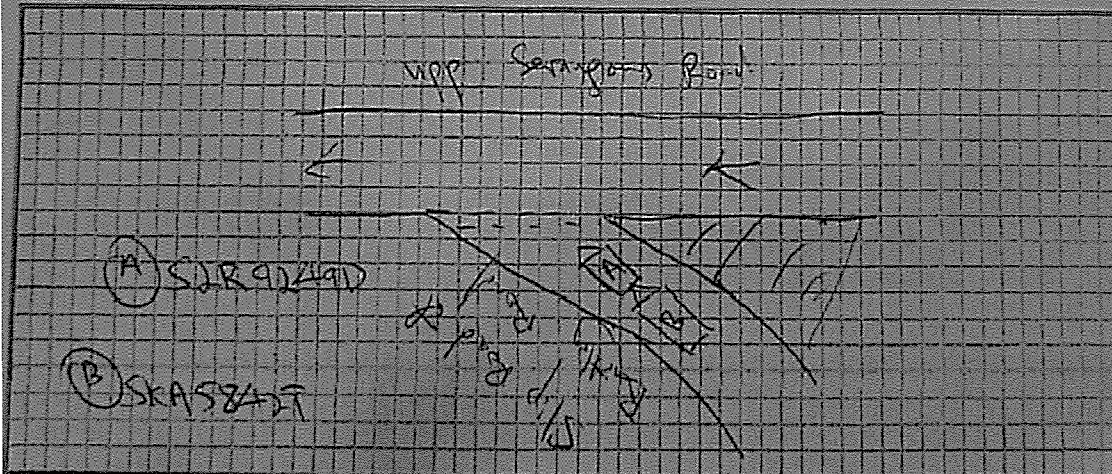
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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



Describe Circumstance of the Accident

I was travelling along the slip road of
Bartley Road towards up Serangoon Road. Before
I exit to up Serangoon Road, I stop before the
give way line to look out for on-coming
traffic. Suddenly vehicle B came from behind &
collided into the rear of my car.

3rd Party claim @ HIAP LEE AUTOMOBILE TRADING

24/10/24

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

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