

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	16/11/2022 13:54 (SGT)
Reported by	Both
Date of Accident	12/11/2022 14:00 (SGT)
Exact Location of Accident	Sunrise Ln, Singapore
Additional Location Information	19 Sunrise Lane S(806480)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKB5689P
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Soh Soon Jooh
NRIC No	S6849786H
Email Address	audi6868@gmail.com
Mobile Phone No	(Phone) +65-97257250
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Altis
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	1600

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5122427780-01

DRIVER

Name of Driver	Soh Soon Jooh
NRIC No	S6849786H
Date Of Birth	21/11/1968
Occupation	Outdoor

Date Of Driving Pass	01/10/1986
Driving experience	36 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-97257250
Alt. Phone Number	-
Email Address	audi6868@gmail.com
Address	19 Sunrise Lane
Address complement	-
Postcode	806480
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	Hit and run / Vandalism / Damaged whilst parked
Weather Conditions	Raining
Road Surface	Wet

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)	0
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	-

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

refer attached report.

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	XD8504E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	Rasit Bin Wan
NRIC No	S6803092G

Contact Number -
Address -
Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

WITNESS DETAILS

WITNESS 1

Name Soh Jian En
Phone (Phone) +65-88239373
Email -

SKETCH PLAN

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8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

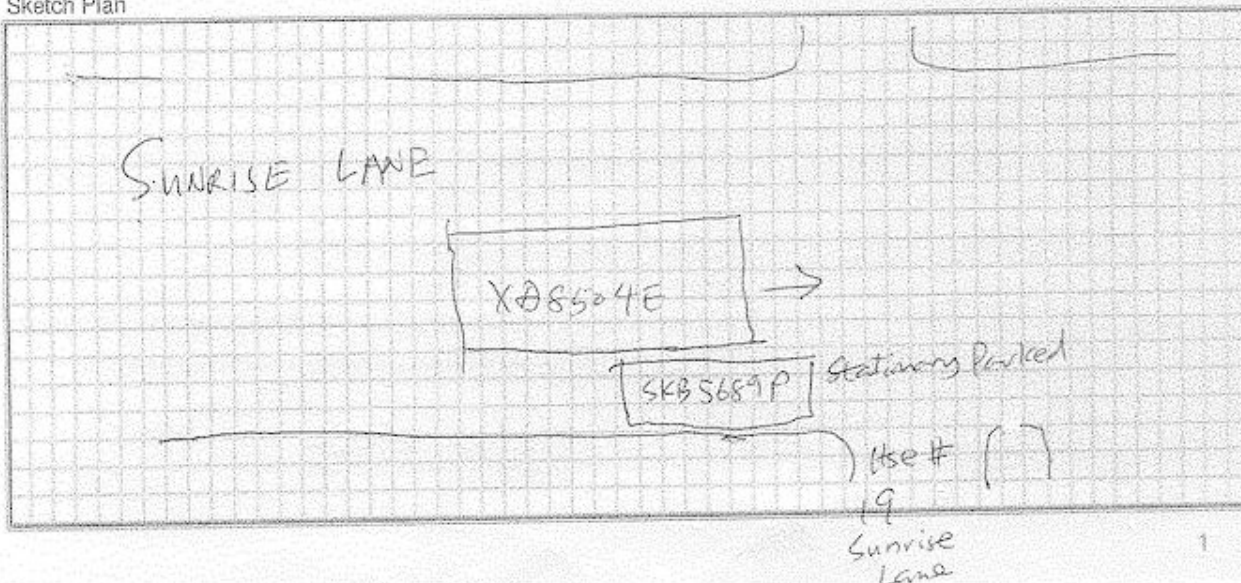
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

On the 12th Nov 2022, at about 2pm, Super 800 p/c garbage truck number XD8504P, driven by Mr. Rabbit Bin Wan (I/c: S68030926) travelling along Sunrise Lane; side swapped and scratches my car (SKB5689P).

Vehicle SKB5689P was parked stationary outside of my house 19 Sunrise Lane S(806460) and was not in motion.

As a result, of the side swapped & impact; my car left rear / Front wheel hub / rims / bumper was damaged. Left rear tyre was also punctured.

As I am not at home; driver Rabbit rang our door bell; given his I/c particular to my daughter; Soh Jia En who took the photos of my car damage.

Rabbit also given his supervisor contact Mr. Alan Toh (97331800) for us to call & admitted it was his negligence & mistakes in damaging our parked car.

I subsequently contacted Mr. Alan Toh & one supervisor Mr. Mike Lim (96706800) on this matter. Both Alan & Mike admitted it was their driver negligence. As it was late into the afternoon on Saturday and raining plus my car tyre was punctured; I had no choice but to arrange a tow truck to tow my car to my workshop as per agreed by Mike Lim.

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

16/11



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





















