

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	24/11/2022 15:35 (SGT)
Reported by	Both
Date of Accident	23/11/2022 18:51 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JUNCTION OF CHANGI SOUTH AVE 1 & CHANGI SOUTH AVE 2
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SNE7528G

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	OW KOK SHENG ZACHARY
NRIC No	SXXXX839B
Email Address	liquorkun@gmail.com
Mobile Phone No	(Phone) +65-87538750
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Noah
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Reporting only
Vehicle Category	Private hire
Transmission	Auto
CC	1797

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMHCSNW00005682200

DRIVER

Name of Driver	OW KOK SHENG ZACHARY
NRIC No	SXXXX839B
Date Of Birth	13/11/1991
Occupation	Outdoor

Date Of Driving Pass	17/07/2010
Driving experience	12 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-87538750
Alt. Phone Number	-
Email Address	liquorkun@gmail.com
Address	BLK 230C TAMPINES ST 24
Address complement	#04-11
Postcode	526230
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	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	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)	7
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	-

PASSENGER 1

Name	PASSENGER
Gender	Male

PASSENGER 2

Name	PASSENGER
Gender	Male

PASSENGER 3

Name	PASSENGER
Gender	Male

PASSENGER 4

Name	PASSENGER
Gender	Female

PASSENGER 5

Name	PASSENGER
Gender	Female

PASSENGER 6

Name	PASSENGER
Gender	Female

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

I WAS TRAVELLING ALONG CHANGI AVE 1 TURNING RIGHT INTO CHANGI SOUTH AVE 2.WHEN CAR B SUDDENLY STOP/E-BRAKE IN THE MIDDLE OF THE ROAD INFRT OF TRAFFIC LIGHT OF A PEDESTRIAN CROSSING.HENCE HAVING FULL LOAD OF PASSENGERS,I COULDN'T E-BRAKE INTIME WHICH RESULTED IN THE ACCIDENT.HIS DRIVING BEHAVIOUR WAS VERY MISLEADING AND UNSAFE AS HE BEING THE 1ST CAR WHEN HE MOVED OFF.FAILED TO EVEN CHECK FOR PEDESTRIAN B4 MOVING FROM HIS BOX JUNCTION.

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 SNE6912L
 Vehicle Manufacturer -
 Vehicle Model -
 Vehicle Variant -
 Vehicle Colour -
 Vehicle Category Private car
 Name of Driver AL HADAD BIN ABDUL AZIZ
 NRIC No SXXXXX362A
 Contact Number (Phone) +65-88763486
 Address -
 Address complement -
 Postcode -
 Insurance Company Name -
 Nature Of Damage -
 Details of property damaged in accident -
 No. Of Passenger (Including Driver) -

SKETCH PLAN


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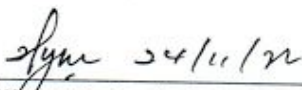
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

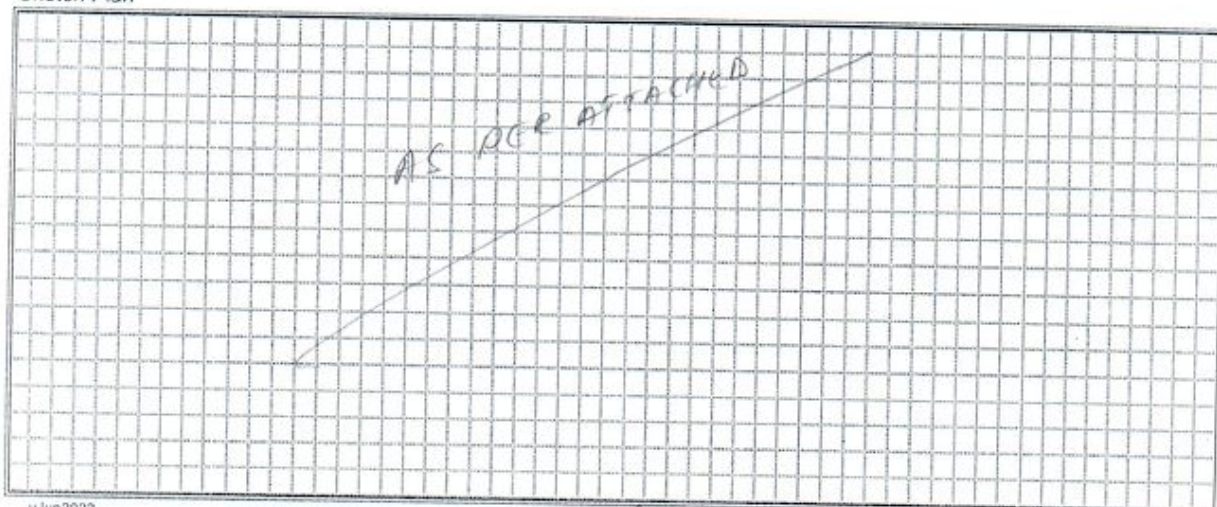
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

 24/11 1242pm
Policyholder's Signature / Date & Time

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

 24/11/22
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan

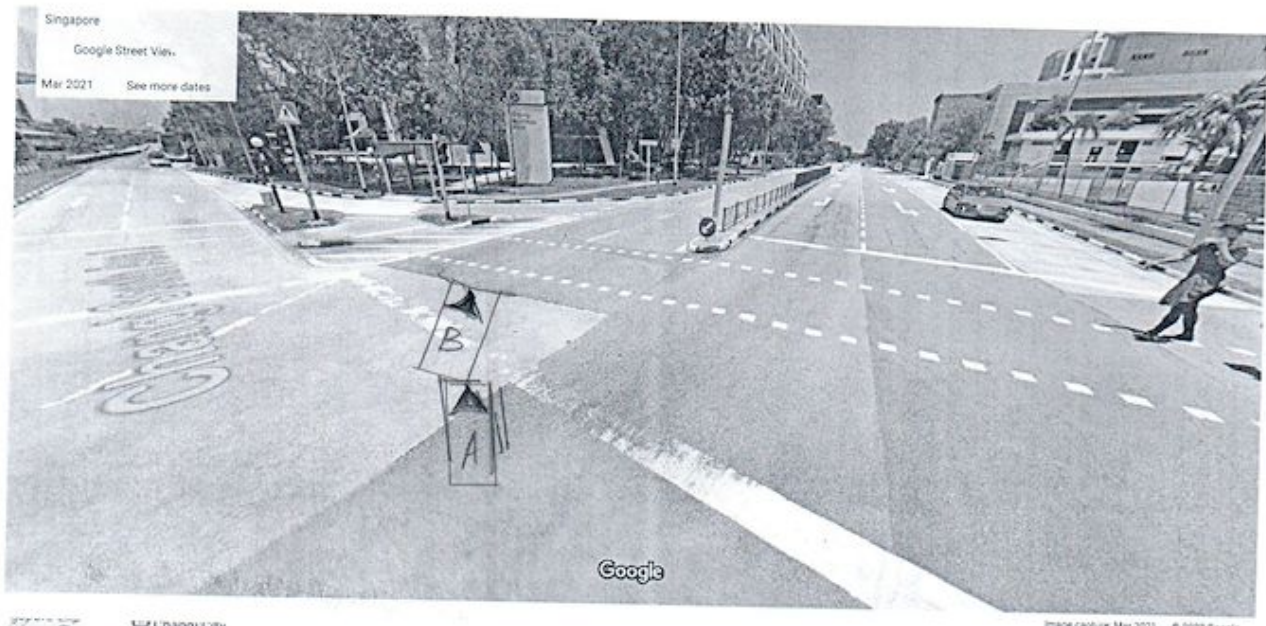


vJun2022

11/24/22, 12:37 PM

Changi South Ave 1 - Google Maps

Google Maps Changi South Ave 1



A - SNE75286
B - SNE6912L


JUNC OF CHANGI SOUTH AVE 1 & CHANGI SOUTH AVE 2

Describe Circumstance of the Accident


I WAS TRAVELLING ALONG, (HANGI SOUTH AVE 1) TURNING RIGHT INTO HANGI SOUTH AVE 2, WHEN CAR B SUDDENLY STOP/EBRAKE IN THE MIDDLE OF THE ROAD IN FRONT OF TRAFFIC LIGHT OF A PEDESTRIAN CROSSING, ~~NOT~~ ~~HAT~~ HENCE HAVING FULL LOAD OF PASSENGERS I COULDNT E-BRAKE IN TIME WHICH RESULTED IN THE ACCIDENT. HIS DRIVING BEHAVIOR WAS VERY MISLEADING AND UNSAFE AS HE BEING THE FIRST CAR WHEN HE MOVED OFF ~~FAILED~~ FAILED TO EVEN CHECK FOR PEDESTRIAN, ~~GET~~ BEFORE MOVING FROM HIS BOX JUNCTION.

Declaration

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

 24/11 1242pm
Policyholder's Signature / Date & Time

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

 24/11/22
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)





