# **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.

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   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 19/12/2022 15:55 (SGT) Reported by Date of Accident 17/12/2022 18:00 (SGT) Exact Location of Accident KPE, Singapore Additional Location Information KPE EXIT TWDS NICOLL HIGHWAY Country/State of Loss Singapore

## **DETAILS OF OWN VEHICLE**

Private use

2500

Vehicle Registration Number SKW5881P

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner SNG KOK WAH SELWYN GREGORY NRIC No S1534409A Email Address GREGSNG@GMAIL.COM Mobile Phone No (Phone) +65-94550472 Alternative Phone No +65-92391390

VEHICLE PARTICULARS

Manufacturer Lexus Model Is250 Variant LEXUS IS250 AUTO STD Exact purpose for which vehicle was being used at time of

accident Are you claiming under your own insurance policy for repair to

No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto

**INSURANCE COMPANY** 

Name of Insurance Company Sompo Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number D22MTOV01007563

DRIVER

CC

Name of Driver CHUA BEE LIAN HELENA (CAI MEILIAN) NRIC No S7426000D Date Of Birth 18/08/1974 Occupation Indoor

Date Of Driving Pass 02/12/2000 Driving experience 22 YEARS Gender Female Mobile Number (Phone) +65-92391390 Alt. Phone Number Email Address GREGSNG@GMAIL.COM Address 201 SERANGOON CTRL Address complement #08-24 Postcode 550201 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Spouse Does Driver Own Other Vehicles? Nο 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 Chain Collision Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) 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? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLS REFER TO THE SKETCH PLAN BY DRIVER ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SNE7312L Vehicle Manufacturer Vehicle Model Vehicle Variant

Private hire

S8404742B

TAN TENG YANG

Vehicle Colour
Vehicle Category

Name of Driver

NRIC No

Contact Number	(Phone) +65-80223921
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident  No. Of Passenger (Including Driver)	-
Insurance Company Name Nature Of Damage	- - - -

# DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLE319M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	JAYSON RAI S/O NADARAJAN
NRIC No	S8517008B
Contact Number	(Phone) +65-91061747
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

### 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 Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- The 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.
- By the lodgment 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:
  - 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")
- 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time: 19/12

N A 40

Driver's Signature / (If driver is not the policyholder)

Date & Time: 10

Reporting Centre Perso

Company

Name:

NRIC/FIN No.:

My Vehicle A: SKETCH PLAN	SKW5881P	Vehicle B:	M Location: SNE 7312L	Vehicle C:_	SLE 319M
KPE KPE	exit towar	d Nicoll flig	hway	Stadio > Driv	
		Carlotte has be greated to the fifth	7	Nicoll High	way
DESCRIBE CIRCUN	ASTANCES OF THE	ACCIDENT			
A was trav	elling toward	Stadium Driva	e after exito	d KPE. C W	came to
an abrupt	t stop and	A managed	to stapply	brake to :	stop the
behind ca	r C. When	B hit A , th	1 impact car	ised A to r	norz and
Car C.					
Remarks : Pleas My workshop Email address	: : :	or Claim Of of my efile accident i	D/TP at other wor	kshop  Rep	porting Only
Remarks: Pleas My workshop Email address & myself Email address Note: Please ta	se forward a copy o : : : : : ske note that your i		eport to : timeframe for you	to submit own dam	
Remarks: Pleas My workshop Email address & myself Email address Note: Please ta you own policy.	se forward a copy o : : : : : ke note that your i Kindly check with	of my efile accident i	eport to : timeframe for you	to submit own dam	





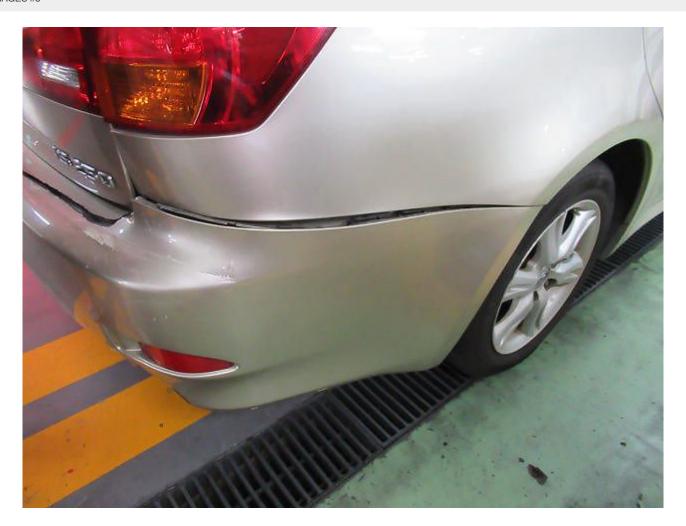












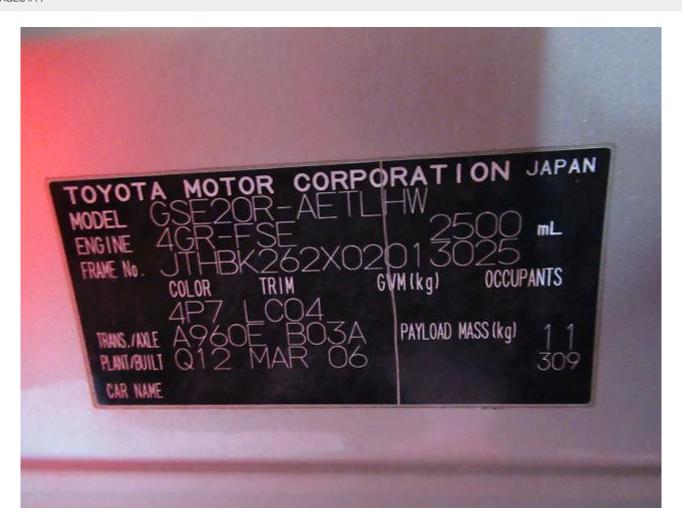






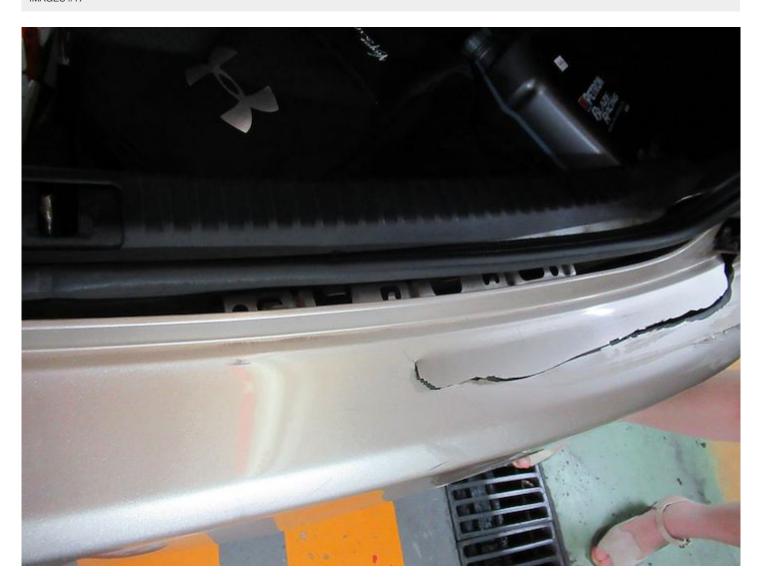




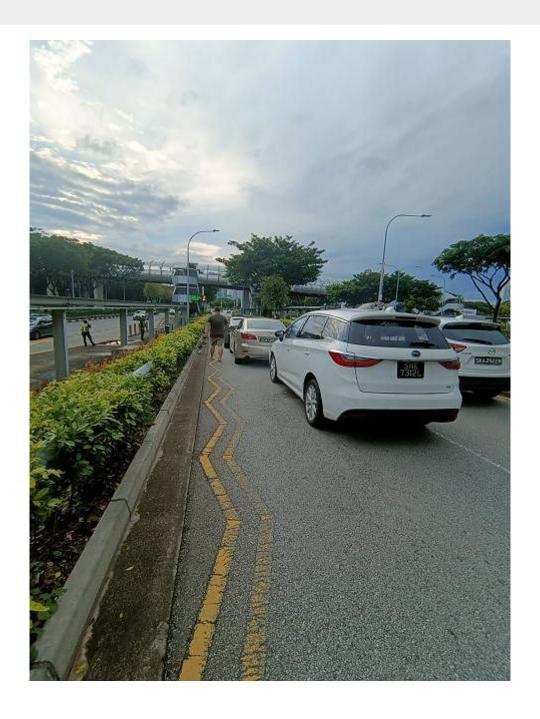






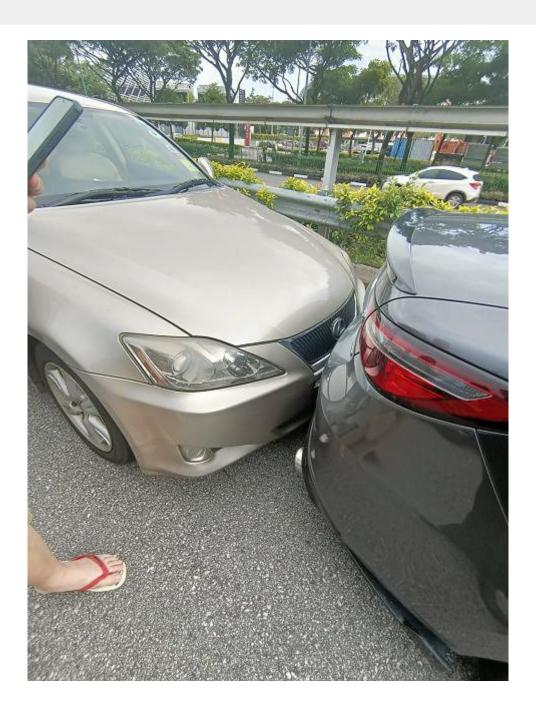


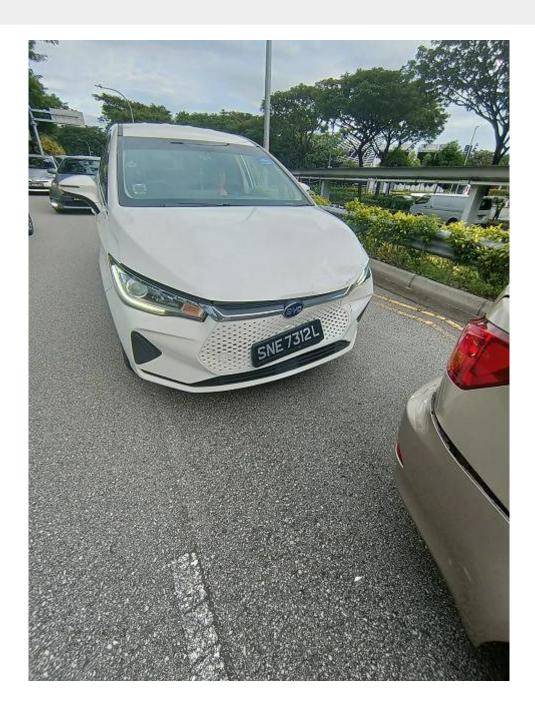




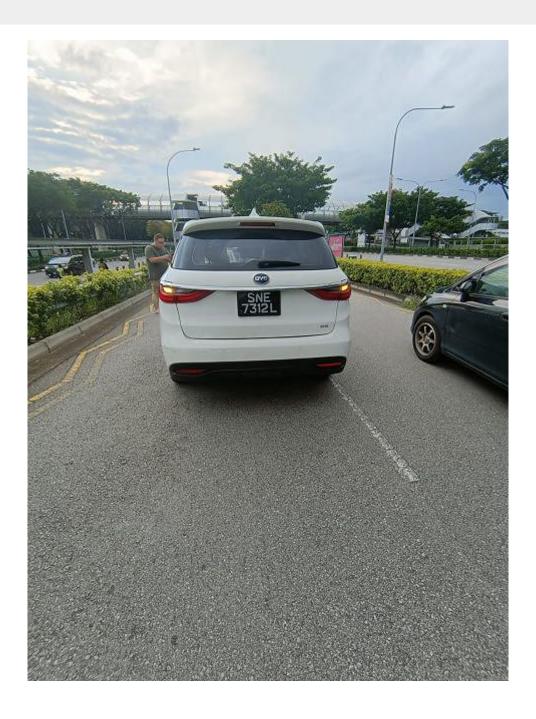


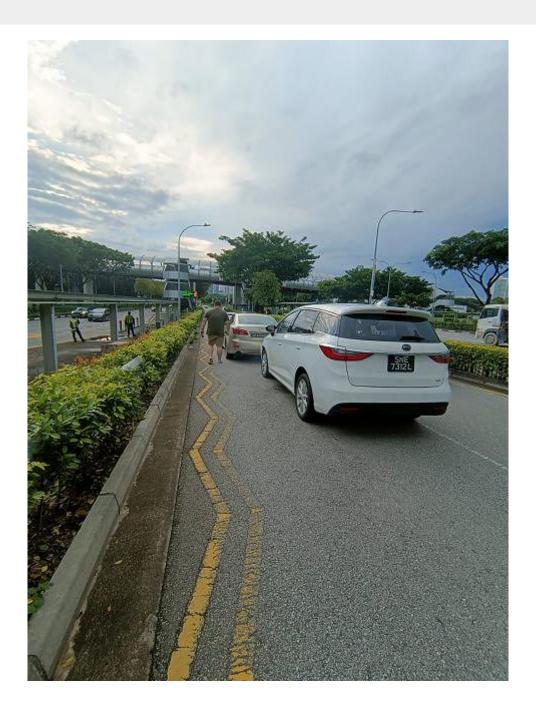














Sompo Insurance Singapore Pte. Ltd.

50 Rafiles Place, #03-03 Singapore Land Town, Singapore 048623 Tel: 6461 6555 | Fax: 6221 3302 | www.sompo.com.sg Co. Reg. No.: 198905499E | GST Reg. No.: M200903186

### PRIVATE CAR POLICY SCHEDULE

Intermediary Code: 11D01104

Policy No.: D22MTPV01007563

S\$ 649.32

S\$ 45.45

\$\$ 694.77

This Schedule is issued in accordance and should be read in conjunction with the terms, conditions and exceptions of the

PRIVATE CAR Policy wordings, ref. MTP.30

: SNG KOK WAH SELWYN GREGORY Insured

Address

: 125 CHUAN DRIVE SINGAPORE 554581

: MANAGEMENT STAFF Business/Profession

INSURED DETAILS

Date of Birth & Age : 27 JUN 1982 & 59 years old

Marital Status: MARRIED

PREMIUM DETAILS

Premium (incl. GST)

GST

Premium after applicable discount(s)

Driving Experience in : 42 years

Singapore

Gender: Male

Identification No.: S1534409A Identification Type : NRIC(Singaporean) 26 MAY 2022 00:00 TO 25 MAY 2023 23:59

Period of Insurance Persons or Classes of Persons entitled to drive : Refer to Certificate of Insurance

Limitations as to use : Refer to Certificate of Insurance

VEHICLE DETAILS

Vehicle Registration No. : SKW5881P

Chassis No. Engine No.

: JTHBK262X02013025

: 4GR0184200

Vehicle Make & Model

: LEXUS IS 250

Engine Capacity NCD Entitlement : 2500 : 50%

Year of Registration

: 2006

NCD Protection

: No : Market value at time of loss

Estimated value of Vehicle Hire Purchase Owner

: HONG LEONG FINANCE

LIMITED

: Third Party, Fire & Theft Coverage

Excess

: N.A : N.A

Voluntary Excess Additional Excess

; N.A.

Windscreen Excess

: Not Applicable

Endorsements

: Endorsement B - Third party Fire and Theft

Applicable

Endorsement H - Total Loss Endorsement L - Hire Purchase

Additional Cover

: NIL

Named Drivers

: 1 . Name : SNG KOK WAH SELWYN GREGORY

Date of Birth & Age

: 27 JUN 1962 & 59 years old

Driving Experience in Singapore : 42 years

2. Name

: CHUA BEE LIAN HELENA

Date of Birth & Age

: 18 AUG 1974 & 47 years old

Driving Experience in Singapore : 23 years

Date of Issue

05 MAY 2022

Intermediary Name Producer Code & Name : DIRECT-CLIENT (CASH TERM) D0001104 & DIRECT-CLIENT (CASH

User Code

Old Policy No.

TERM)

: AZELSEAH/SUHUIKO

D21MTPV01005496

Signed on this 05th day of May 2022 for and on behalf of SOMPO INSURANCE SINGAPORE PTE, LTD.

Die: 20

Authorised Signatory

Cl Code : 22A

EMERGENCY HOTLINE

Tel: (65) 6461 6555

You may contact us for towing assistance. Please note that tow charges are not claimable.