

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 19/12/2022 14:48 (SGT)
Reported by Driver
Date of Accident 18/12/2022 16:12 (SGT)
Exact Location of Accident Near Plaza Tol Tanjung Kupang, 81550 Gelang Patah, Johor, Malaysia
Additional Location Information SECOND LINK EXPY BEFORE MALAYSIA IMMIGRATION
Country/State of Loss Malaysia

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJJ1742P

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner LAU LING ENG
NRIC No S6975060E
Email Address kengpak@gmail.com
Mobile Phone No (Phone) +65-92383388
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Toyota
Model Estima
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 2362

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited
Policy Number / Cover Note Number 5115897638-02

DRIVER

Name of Driver WEE KENG PAK
NRIC No S1590588C
Date Of Birth 10/05/1963

Occupation	Indoor
Date Of Driving Pass	21/05/2009
Driving experience	13 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92383388
Alt. Phone Number	-
Email Address	kengpak@gmail.com
Address	BLK 25 EUNOS CRESCENT
Address complement	#11-3067
Postcode	400025
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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 - Change/cross lane
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)	4
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	N.A
Gender	Female

PASSENGER 2

Name	N.A
Gender	Female

PASSENGER 3

Name	N.A
Gender	Male

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

PLEASE SEE ATTACHED SKETCH PLANS.

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 SLG4008Z
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Private car
Name of Driver -
Contact Number -
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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time
1200hrs 19/12/2022
Sketch Plan

Driver's Signature (If driver is not the policyholder) / Date & Time
19/12/2022 1200hrs

Witnessed by Reporting Centre Personnel



Describe Circumstances of the Accident

On 18-12-2022, at 4.12pm, I am driving towards Immigration Second Tuas Link (Malaysia towards Singapore). There was traffic jam. I am queuing. Vehicle B (SLG 4008Z) drive and cut into my lane from my left, hit onto my front left side of Vehicle A (SJJ 1742P).

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

Canx
18/12/2022

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

Wade Sale
19/12/2022

Witnessed by Reporting Centre Personnel





















