

#### IMPORTANT NOTICE

IMPORIANT NOTICE

1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

2. This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>

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 on the 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 16/01/2023 11:33 (SGT) Reported by Both Date of Accident 14/01/2023 12:55 (SGT) Exact Location of Accident Singapore Additional Location Information KPE TOWARD ECP INSIDE THE TUNNEL Country/State of Loss Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number **SMF1540R** INSURED/POLICYHOLDER

Is company? Name Of Registered Owner LIM GENG TING, DARYL (LIN GENGTING) NRIC No SXXXX324B Email Address darford87@hotmail.com Mobile Phone No ..... (Phone) +65-81683518 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Kia Model Cerato Variant Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Private car Transmission ..... Auto CC

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number SP2003101890-01

DRIVER

Name of Driver LIM GENG TING, DARYL (LIN GENGTING) NRIC No. SXXXX324B Date Of Birth 15/10/1987 Occupation Outdoor



Date Of Driving Pass Driving experience	26/06/2007 15 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81683518
Alt, Phone Number	
Email Address Address	darford87@hotmail.com
	BLK 63 TAMPINES CENTRAL 7 # 06-26
Address complement	
Postcode	528596
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	
Weather Conditions	Chain Collision
Road Surface	Clear
Trodd Guriace	Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	4
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s)	2
Soliciting/offering accident claims assistance?	No
Translator's name	IVO
Translator's ID	
Translator's phone number	
Translator's email	
Original language used in the statement	
PASSENGER 1	
Name	
Gender	LEE WEI TING Female
DETAILS OF POLICE ACTION	
SETTILES OF POLICE ACTION	
Was the accident reported to the police?	
Was notice of intended Prosecution given?	No
f yes, against whom?	No
CIRCUMSTANCES OF ACCIDENT	
REFER TO SKETCH PLAN	
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
Vas there any video captured by Car Camera?	No
DETAILS OF OTHER	VELLIOLE PROPERTY :
	VEHICLE PROPERTY 1
Pehicle Registration Number	COV12021
enicle Manufacturer	SGX1283J
enicle Model	
ehicle Variant	

Vehicle Colour	
Vehicle Category	Private car
Name of Driver	
NRIC No	SEOW KOK LIM
Contact Number	SXXXX500I
Address	(Phone) +65-96986442
Address complement	
Postcode	
Insurance Company Name	
Nature Of Damage	7
Details of property damaged in accident	
No. Of Passenger (Including Driver)	
3	-

# DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number Vehicle Manufacturer	SKK4824A
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	-
Name of Driver	Private car
Contact Number	-
Address	-
	-
Address complement	_
Postcode	
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	
No. Of Passenger (Including Driver)	-
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## DETAILS OF OTHER VEHICLE PROPERTY 3

Valida Daniela Daniela de la companya della companya de la companya de la companya della company	
Vehicle Registration Number	SGP1828E
Vehicle Manufacturer	001 1020L
Vehicle Model	-
Vehicle Variant	•
Vehicle Colour	-
Vehicle Category	-
Name of Driver	Private car
Contact Number	-
Address	-
Address complement	4
Postcode	
Insurance Company Name	-
Nature Of Damage	-
	-
Details of property damaged in accident  No. Of Passenger (Including Driver)	
The second of (moldaling Dilvel)	

## INJURED PERSONS DETAILS

#### INJURED 1

Name of injured person	1114 05140 544
Gender	LIM GENG TING
Phone No	
Address	
Address Complement	-
Post Code	-
Approximate Age Years Old	
Injuries Sustained	•
Injured person in which vehicle?	
Were seat belts worn?	SMF1540R
Was this injured conveyed to hospital by ambulance?	
and injured conveyed to nospital by ambulance?	

#### INJURED 2

Name of injured person Gender	LEE WEI TING
Phone No	•
Address	1
Address Complement	-
Post Code	
Approximate Age Years Old	
Injuries Sustained	
Injured person in which vehicle?	SMF1540R
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	

#### SKETCH PLAN

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- Pease report corrections of the accident to speed up the claims process.
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- 6. Any lates (appring may be retarred to the rolling tor invalination).

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  7. By the bulgarrant of this report to the insurers, you hereby consent to the Archiving of this report at the centre and to copies of the realist before and to copies of the
- s. Consent under the Personal Data Protection Act (PDPA) tunderstand, solarow ledge, agree and consent that:

Tundersland, actnowledge, agree and consent that :

(a) Ay Insurer , my workshop and the General hourance Association of Singapore ("GIA") maylers permitted to collect, use, disclose and/or process my personal distingurance information as a continue (collect process) and or you have a permitted to collect deep the "Ports and information by and disclose and transfer such Personal Information by me or processing the internal to set the Transfer of the Insurer (as who have insured vehicles) involved in this accident (it insurers) have been also and transfer such Personal Information to all insurers (any personal representations) in the transfer of the Authority of Singapore and any relevant to collect and the settlement of the chains and any expension and/or dealing with my cleans including the settlement of the plains and any expension to the purpose of the plains and any expension to the plains and any expension that the policy of the plains and the plains and the policy of the plains and the plains and

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(b) carrying out antity desting is in my instructions or responding to any anguines by ma;
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