SP0X23280001 / Performance Motors Limited ENTRY DATE & TIME: 08/02/2023 10:21 (SGT) SUBMITTED BY: Peh Ah Hoon VERSION: 1 (08/02/2023 10:21 (SGT))

# **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 08/02/2023 10:21 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 19/01/2023 08:00 (SGT) Exact Location of Accident Singapore Additional Location Information TPE EXIT TO LOYANG AVE Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

**BMW** 

Vehicle Registration Number SMP5710M

#### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner ANG KIRK GINE NRIC No S8172951D Fmail Address kirk\_gine\_ang@hotmail.com Mobile Phone No (Phone) +65-96616456 Alternative Phone No

#### VEHICLE PARTICULARS

Manufacturer

Model 216i 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 No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto CC 1499

#### **INSURANCE COMPANY**

Name of Insurance Company Liberty Insurance Pte Ltd Policy Number / Cover Note Number SI21V11040

#### DRIVER

Name of Driver ANG KIRK GINE NRIC No S8172951D Date Of Birth 26/01/1981 Occupation Indoor

Date Of Driving Pass 26/01/1981 Driving experience 42 YEARS Gender Male Mobile Number (Phone) +65-96616456 Alt. Phone Number Email Address kirk\_gine\_ang@hotmail.com Address 79 PASIR RIS GROVE #03-42 Address complement Postcode 518209 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 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 REFER TO ATTACH 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	SMG904B
Vehicle Manufacturer	Hyundai
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Red
Vehicle Category	Private car
Name of Driver	-
Contact Number	(Phone) +65-86088681

Address	-
Address complement	-
Postcode	-
Insurance Company Name	MS First Capital Insurance Ltd
Nature Of Damage	FRONT
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

KETCH PLAN		
		A = Sm 5710m
	[B](A)	A = Sm 5710m B = Sm G 9048
ESCRIBE CIRCUMSTAN	CES OF THE ACCIDENT	
	I was exiting from TPE to Loyang Ave, a red Hyundai	car, SMG 904B front bump into my rear bumper.
	party driver intended to pay for the repair as the dama	
repair the car after Chine	se New Year. After reviewed the repair quotation from	BMW, third party decided to claim his insurance
for the repair, on 06 Feb	2023	
(Please refer to attached	photos for damage or accident details.)	1
	ANY CONTRACTOR OF THE PROPERTY	

DECLARATION

Policyholder's Signature

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

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Date & Time:

07 Feb 2023 0900hrs

NA

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Jack, Ng Guoming
Johnsone Motors Limited
J03 Alexandra Road
The Darby Performance Centre
Singapore 159941

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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")
- (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.
- (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:
  - 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 state for Guoming
  - (ii) for complying with requirements under any regulations, laws or court orders.

Performance Motors Limited 303 Alexandra Road Sime Darby Performance Centre Singapore 159941

07 Feb 2023 / 0900hrs.

Policyholder's Signature Date & Time: Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name: NRIC/FIN No.:



