

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	17/02/2023 14:33 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	16/02/2023 18:20 (SGT)
Exact Location of Accident	51 Bras Basah Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	EP1212E
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	KOO KOK CHOON, EDMUND
NRIC No	S8603721A
Email Address	kooedmund@gmail.com
Mobile Phone No	(Phone) +65-97333983
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Audi
Model	Q5
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	2000

INSURANCE COMPANY

Name of Insurance Company	Sompo Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	D22MTPV01005742

DRIVER

Name of Driver	KOO POH SENG
NRIC No	S1192434D
Date Of Birth	11/05/1956
Occupation	Indoor

Date Of Driving Pass	27/07/1976
Driving experience	46 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97767116
Alt. Phone Number	-
Email Address	kooedmund@gmail.com
Address	26 PATERSON RD #01-02
Address complement	-
Postcode	238518
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Parent
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)	2
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	LUA SEOK BIAN
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

PLEASE REFER TO ATTACHED.

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	SNF394R
Vehicle Manufacturer	Honda
Vehicle Model	Vezel
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	MR.HAKIM
NRIC No	S9317842D
Contact Number	(Phone) +65-8233720
Address	-
Address complement	-
Postcode	-
Insurance Company Name	Income Insurance Limited
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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5. Any false reporting may be referred to the Traffic Police Department for investigation.
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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.



Policyholder's Signature / Date & Time

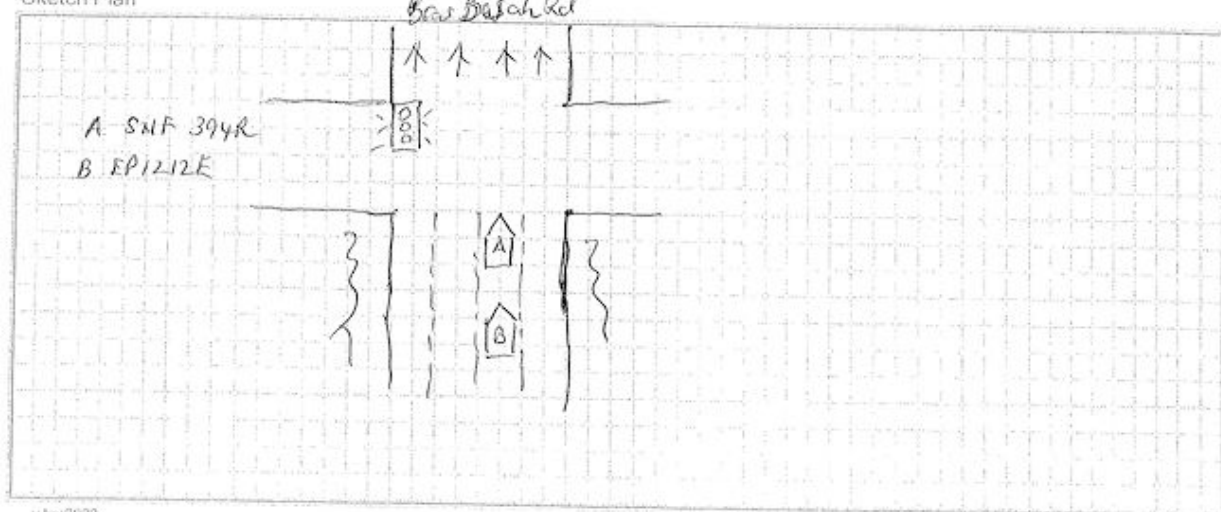


Actual Driver's Signature (if driver is not the policyholder) / Date & Time



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

Sketch Plan



vJun2022

Describe Circumstance of the Accident

On 16 Feb 2023 @ 18:20pm, I was driving EP1212E along Bras Basah Road toward City direction. On that day the traffic condition was very heavy & all vehicles were moving slowly. The traffic light at that time was green & I was driving slowly behind vehicle SNF 394F. Suddenly the traffic change without my knowledge & I inadvertently collided into the back of vehicle SNF 394F. I stopped & checked & realise my front bumper radiator grill broken & the vehicle in front of me SNF 394F slightly damaged. No one was injured in this accident.

That's all.

[Signature]

Declaration

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

[Signature]

Policyholder's Signature / Date & Time

[Signature]

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

17/2/23 1.45pm.

[Signature]

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



Sompo Insurance Singapore Pte. Ltd.
 50 Raffles Place, #03-03
 Singapore Land Tower, Singapore 048623
 Tel: 6461 6555 | Fax: 6221 3302 | www.sompo.com.sg
 Co. Reg. No.: 198905490E | GST Reg. No.: M200903196

Certificate of Insurance

ROAD TRAFFIC ACT (CHAPTER 276) (REPUBLIC OF SINGAPORE)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 ROAD TRANSPORT ACT 1987 (MALAYSIA)
 ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (MALAYSIA)

Certificate/Policy No.	: D22MTPV01005742
Insured	: KOO KOK CHOON EDMUND
Motor Vehicle (Registration No.)	: EP1212E
Coverage	: Comprehensive - ExcelDrive PRESTIGE
Policy Commencement Date	: 25 APRIL 2022 00:00
Policy Expiry Date	: 24 APRIL 2023 23:59
Maximum Liability (Section I)	: Market value at time of loss
Excess*	: \$600 - Section I
Voluntary Excess*	: Buy Up : \$200 - Section I
Windscreen Excess*	: S\$100.00 for each and every applicable claim.

* Subject to GST wherever applicable





























