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 21/02/2023 12:27 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 20/02/2023 13:20 (SGT) Exact Location of Accident Bedok Reservoir Rd, Singapore Additional Location Information OPEN SPACE CAR PARK BLK 108 AND BLK 115 Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Suzuki

1242

Vehicle Registration Number SJJ7968R

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner **HUM MEE TING** NRIC No SXXXX350E Email Address hummeeting@yahoo.com Mobile Phone No (Phone) +65-96944837 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Swift 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

INSURANCE COMPANY

Name of Insurance Company Lonpac Insurance Bhd Policy Number / Cover Note Number Z22VP05031900

DRIVER

CC

Name of Driver **HUM MEE TING** NRIC No SXXXX350E Date Of Birth 26/02/1954 Occupation Indoor

Date Of Driving Pass 16/05/1988 Driving experience 34 YEARS AND 9 MONTHS Gender Female Mobile Number (Phone) +65-96944837 Alt. Phone Number Email Address hummeeting@yahoo.com Address BLK 108 BEDOK RESERVOIR ROAD #12-300 Address complement Postcode 470108 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured 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 Collision - Major/Minor Rd 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 PLEASE REFER TO SKETCH PLAN 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 SLM3943Z Vehicle Manufacturer Honda Vehicle Model

Private car

SXXXX127D

TAN SIEW HWA

Accident report SN08232L0004

Vehicle Variant
Vehicle Colour
Vehicle Category

Name of Driver

NRIC No

Contact Number	(Phone) +65-96281157
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 Formmust be completed by the Policyholder and/or the Authorised Driver.
- 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.
- 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 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.
- 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 at 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 "insurere", 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' 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 law yers/law-firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signa Time		Driver's Signature (& Time			Des	nessed by Reporting Cer sonnel	
Sketch Plan	OPFILL SA	THE CHROPP	KAT B	HK 108/A	JK 115	BABOIC RUGUL	VOIR POR
	1	BIX 188				A) SJJ 7	968R
			1			B) STW 3	943Z
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Accident Date: 20/02/2023 Accident Time: 1320 HR

Location: Open Space Carpark at Blk 108/Blk115 Bedok Reservoir Road

Vehicle

A) SJJ 7968 R

B) SLM 3943 Z

On 20/02/2023, 1:20pm, I was travelling along the open space carpark at Bik 108/Bik115 Bedok Reservoir Road, when I passed by Bik 115, vehicle No. SLM 3943 Z came out from the minor road of BiK 108 without stopping at the stop line hit onto my vehicle rear right side. We came down and exchanged particular. Nobody was injured.

Hum Mee Ting

Accident report SN08232L0004























