

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 28/02/2023 15:29 (SGT)
Reported by Driver
Date of Accident 28/02/2023 10:00 (SGT)
Exact Location of Accident Singapore
Additional Location Information PIE TOWARDS TUAS
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBD4548R

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner SIANG HOCK CAR RENTAL PTE LTD
Company Reg No 2XXXXX271R
Email Address car.rental@sianghock.com.sg
Mobile Phone No (Phone) +65-98792002
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Nissan
Model Nv200
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 - Reporting only
Vehicle Category Commercial vehicle
Transmission Manual
CC 1461

INSURANCE COMPANY

Name of Insurance Company MS First Capital Insurance Ltd
Policy Number / Cover Note Number D-22099203MFCV/129

DRIVER

Name of Driver LOW WAI KOK, ARTHUR
NRIC No SXXXX269H
Date Of Birth 23/02/1972
Occupation Outdoor

Date Of Driving Pass	24/11/2008
Driving experience	14 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97219997
Alt. Phone Number	-
Email Address	car.rental@sianghock.com.sg
Address	BLK 116 SERANGOON NORTH AVENUE 1
Address complement	# 03-503
Postcode	550116
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	RENTAL LEASING
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	Raining
Road Surface	Wet

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)	1
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?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE ATTACHED STATEMENT

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	SKK238T
Vehicle Manufacturer	Kia
Vehicle Model	Stonic
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	ISABELLE CHUM LEE ANN
NRIC No	TXXXX055J

Contact Number	(Phone) +65-81084808
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' 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.

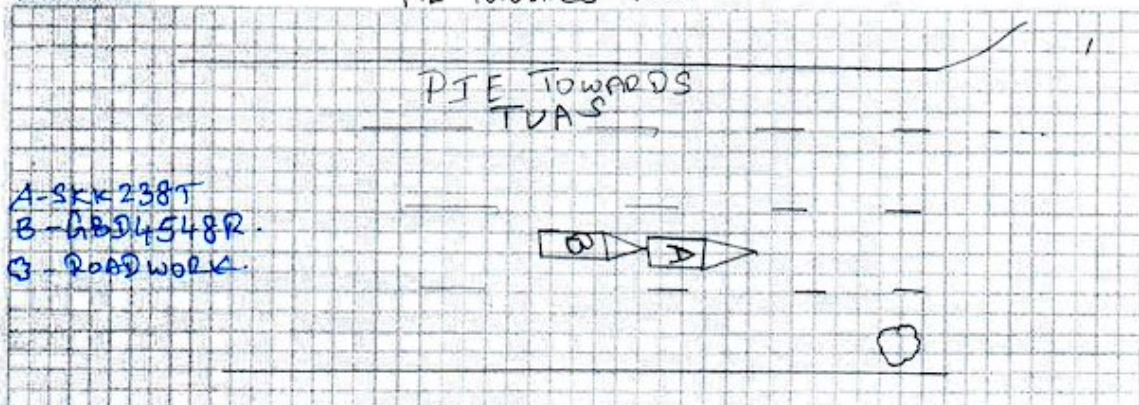


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



[illegible]

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

17/12/20

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

April 28/2/23

Witnessed by Reporting Centre
Personnel

On Tuesday morning (28/02/23) at around 10am, I was driving for work along PIE to Jalan Boon Lay. The accident happened just a few kilometer from Jurong Town Hall Exit. There's some road work on the right lane and ~~the~~ it was raining. The driver of car plate number SKK 238T (Miss Isabelle Chum Lee Ann) suddenly jammed on the brake. I immediately jammed on the brakes to try to avoid an accident but to no avail. As we exchange particulars, she said that a vehicle cut into her lane that's why she jammed brakes. She also told me that she's feeling fine when I ask her if she's injured.

LOW WAI KOK
SXXXX269H
HP: 9721 9997

28/02/23
1330 hrs.



























