

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	01/03/2023 10:11 (SGT)
Reported by	Driver
Date of Accident	20/02/2023 11:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	BLOCK 204 B6 PARKING LOT BEDOK NORTH (LOT 79/80)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC2913Y
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	SATA COMMHEALTH
Company Reg No	1XXXXX119G
Email Address	winson.ting@sata.com.sg
Mobile Phone No	(Phone) +65-90115925
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv350
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Reporting only
Vehicle Category	Commercial vehicle
Transmission	Auto
CC	2488

INSURANCE COMPANY

Name of Insurance Company	United Overseas Insurance Ltd
Policy Number / Cover Note Number	DHOM113000482300

DRIVER

Name of Driver	ONG JIN GAK
NRIC No	SXXXX243G
Date Of Birth	05/04/1954
Occupation	Outdoor

Date Of Driving Pass	03/08/1979
Driving experience	43 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96272248
Alt. Phone Number	-
Email Address	winson.ting@sata.com.sg
Address	APT BLK 55 CHAI CHEE DRIVE
Address complement	# 09-160
Postcode	460055
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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	Side Swipe
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)	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	SLC9575R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	(Phone) +65-98153006

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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6. This report will be forwarded by the insurers to 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.
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8. Consent under the Personal Data Protection Act (PDPA)

I understand and 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 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/are 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.

sata
351 Chai Chee Street
Singapore 468982
Tel: 6744 8888

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

Block 264 B6 parking lot Bedok North (Lot 79/80)

Parking lot

A - PC 2913Y

B - SLC 9575R



Describe Circumstance of the Accident

I was driving around Block 204 B6 parking lot at Bedok North doing Bankney round. After banking as I was driving out of the parking lot turning left towards the exit, I misjudge the turn and bump to vehicle B which was on my left side parking lot.

I quickly stopped and got out to inspect the damage to both vehicles. My vehicle was slightly scratch on the left side near the rear wheel. Vehicle B right side bumper was dislodged and had some scratches.

Declaration

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

Policyholder's Signature (Date & Time)
 351 Chai Chee Street
 Singapore 468982
 468982

Driver's Signature (If driver is not the policyholder)

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

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NON-CLINICAL INCIDENT REPORT

Ref No. :

Date / Time of Reporting : 21 Feb 2023, 09.30am
Clinic / Location : Date / Time of Occurrence : Lot 79/80 at B6 parking lot, Bedok North / 20 Feb 2023, 11.20am
Customer's Name and / or Contact No.: 9815 3006
Customer NRIC / Fin No.:
Staff(s) Involved : Ong Jin Gak
Grading of severity (Supervisor on duty) : Low / Moderate / High Moderate
Description of Incident / Complaint (to be completed by staff involved) : Date: 20 Feb 2023, 11.20am Accident involving Sata vehicle PC2913Y with another vehicle SLC9575R at B6 parking lot, Bedok North Dear Sir, I, Ong Jin Gak NRIC S0180243G was driving Sata vehicle PC2913Y doing the company banking round. After banking, as I was driving out of the parking lot turning left toward the exit, I misjudge the turn and bump to the vehicle on my left side parking lot. I quickly stop and got out to inspect the damage to both vehicles, my vehicle was slightly scratch on the left side near the rear wheel. The other vehicle SLC9575R bumper right side was dislodged and had some scratches. I waited for the owner to return to exchange contact number for further settlement. There is no injury to both parties. That all I have to say Thank you.
Investigation conducted by (to be completed by immediate supervisor) : Winson Ting Transport Service officer Results of Investigation: Misjudgment by our bus captain involve.
Root Causes Identified: Due to a vehicle sudden approach from the right

NON-CLINICAL INCIDENT REPORT

Ref No. :

Preventive / Corrective Actions : Patience
Current Status (of patients, staff, circumstances etc) : No injury to both party
Follow-up Actions : Counselling on road safety
Public / media reactions ? : No Incident reported to Police ? : No
Recommendations / Report by QMD :

Signature of Staff Involved: _____

Ong Jin Gak

Signature of Supervisor: _____

Winson Ting

Acknowledgement by QMD: _____

 Winson Ting
 Transport Service Officer
 SATA CommHealth