

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	27/02/2023 13:47 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	27/02/2023 07:55 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	KPE(MCE) BEFORE PIE(TUAS) EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKM3104R
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	BRENDA TAN KIM HUI
NRIC No	S7934901A
Email Address	BRENDA966921@GMAIL.COM
Mobile Phone No	(Phone) +65-91729050
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	Cla200
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 - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1600

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5124083615-01

DRIVER

Name of Driver	BRENDA TAN KIM HUI
NRIC No	S7934901A
Date Of Birth	04/11/1979
Occupation	Indoor

Date Of Driving Pass
Driving experience
Gender

Mobile Number
Alt. Phone Number
Email Address

Address
Address complement
Postcode

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

Vehicle Registration Number of Other Vehicle Owned by Driver

Insurance Company of Other Vehicle Owned by Driver

10/03/2011

11 YEARS AND 11 MONTHS

Female

(Phone) +65-91729050

BRENDA966921@GMAIL.COM
66 ELIAS ROAD #16-10

519941

Yes

No

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
Weather Conditions
Road Surface

Side Swipe
Clear
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

REFER TO SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment?

Yes

Was there any video captured by Car Camera?

Yes

Reasons for not uploading a video of the accident

SENT TO MOTORVIDEO@INCOME.COM.SG

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

FBL2285U

Vehicle Manufacturer

-

Vehicle Model

-

Vehicle Variant

-

Vehicle Colour

-

Vehicle Category

Motorcycle

Name of Driver

MOHAMAD SALIHIN BIN IBNOR



Accident report SN07232R000K

NRIC No	S7828422F
Contact Number	(Phone) +65-85229914
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

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

27/2/23 1130

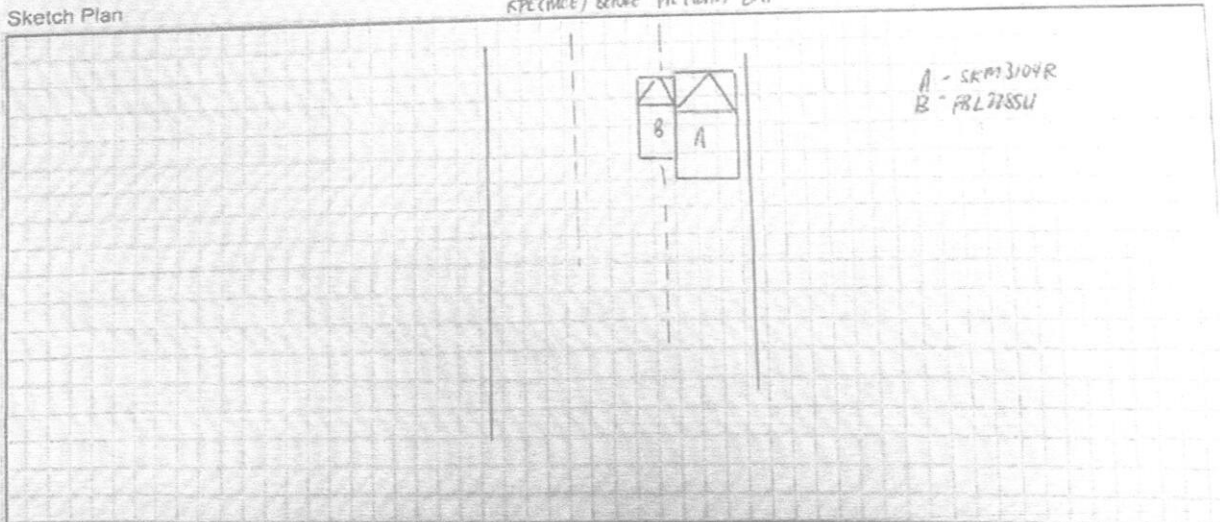
Driver's Signature (if driver is not the policyholder) / Date & Time

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

Muhammad Hazim Sam BAMS

Sketch Plan

RPC(MCE) BEFORE PIE (WMS) EXIT

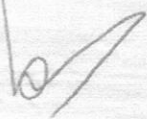


Describe Circumstance of the Accident

On 27/2/23 at 0755h, as I was travelling along KPE (Mile) lane, I was suddenly FBL 2285U collided into my left side mirror. FBL 2285U did not stop so I warned him to slow down to which he then stopped at road shoulder where we exchanged particulars.

Declaration

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



27/2/23 0730

Policyholder's Signature / Date & Time

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

MUHAMMAD HAZID SMH BARS &
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)