

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	20/03/2023 15:41 (SGT)
Reported by	Owner
Date of Accident	19/03/2023 17:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	UPPER THOMSON ROAD INFRONT OF 215P FUR KIDS SHOP
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGN1901L
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	TAN SEUNG PO
NRIC No	SXXXX294I
Email Address	ECKHENG@YAHOO.COM
Mobile Phone No	(Phone) +65-82839296
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Lexus
Model	Es250
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	2500

INSURANCE COMPANY

Name of Insurance Company	United Overseas Insurance Ltd
Policy Number / Cover Note Number	DH0M120025451603

DRIVER

Name of Driver	TAN PEI CHAY DEBORAH
NRIC No	SXXXX479I
Date Of Birth	04/09/1990
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

06/06/2009

13 YEARS AND 9 MONTHS

Female

(Phone) +65-83883913

ECKHENG@YAHOO.COM

12 CALDECOT CLOSE

299121

No

Child

No

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident

Weather Conditions

Road Surface

Hit and run / Vandalism / Damaged whilst parked

Clear

Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?

Number of vehicles involved in the accident

Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other vehicle or property damaged?

Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

Translator's name

Translator's ID

Translator's phone number

Translator's email

Original language used in the statement

No

3

No

-

Yes

0

No

-

-

-

-

-

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Was notice of intended Prosecution given?

If yes, against whom?

No

No

-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO ATTACHED SKETCH PLAN AND STATEMENT.

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Yes

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

Name of Driver

Contact Number

SNG8743J

-

-

-

-

Private car

LEE HUI YING

(Phone) +65-92366327

Address
Address complement
Postcode
Insurance Company Name
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	
Vehicle Manufacturer	GBH4123L
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	-
Name of Driver	Commercial vehicle
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-



I parked my vehicle outside 215P Thomson Road - Fur Kids Shop along Upper Thomson Road. When I went back to my vehicle, I noticed that there are damages on the RHS front portion of my vehicle. I called my dad & mum and they came to the scene.

Driver of vehicle B, Ms Lee Hui Ying is still around and we exchanged particulars with her.
Driver of vehicle B apologized for hitting our vehicle and agreed that we claim her insurance

Authorization to Act on Behalf for Insurance Claims Documentation

Signature: Tan Seung Pe

NRIC No. 300083941

Relationship: daughter

(Full name) Deborah Tan Pei Chay

NRIC No. 300083941

Vehicle and execute to sign all / any necessary transaction

Documentation pertaining to registration vehicle number 24N 1901L

currently having flight / business schedule / away from Singapore on duty overseas travel

Please do not hesitate to contact me should you require any further clarification on the above.

Declaration

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

Signature: 3pm.
20/3/23

Policyholder's Signature / Date & Time

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

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

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SKETCH PLAN

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5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
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.
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.
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
(Name as in NRIC/ID card)

Sketch Plan

Sketch Plan

Shop houses.

A - SGN 1901L

B - SNG 8743J

AUTHORIZATION LETTER

Date: 20/3/2023

To: UOI

Cc: Borneo Motors (S) Pte Ltd

Attn: To Whom It May Concern

Dear Sir / Madam,

RE: Authorization to Act on Behalf for Insurance Claims Documentation

I, (full name) Tan Beung Po NRIC No. 30005294I hereby
authorized my (relationship) daughter (full name) Deborah Tan Pei Chay,
NRIC No. 39032479I to exercise and execute to sign all / any necessary transaction
documentation pertaining to my registration vehicle number 8GN 1901L as I am
currently having tight official business schedules / away from Singapore on duty oversea travel.
Please do not hesitate to contact me should you require any further clarification on the above.

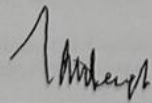
Thank You

Yours truly,

Signature :

Name :

Contact No :



Dr Tan Beung Po

82839296

Date

1)

Date/

2)

Repo
Lump