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.

 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 21/03/2023 17:42 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 21/03/2023 12:20 (SGT) Exact Location of Accident Nassim Rd, Singapore Additional Location Information NASSIM ROAD SINGAPORE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Toyota

Vehicle Registration Number SLX1837C

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner ANDY TAN CHI YONG NRIC No. S8019512E Email Address PAULANDY@GMAIL.COM Mobile Phone No (Phone) +65-97608568 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Sienta TOYOTA / SIENTA HYBRID 1.5X CVT 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 1496

INSURANCE COMPANY

Name of Insurance Company Direct Asia Insurance (Singapore) Pte Ltd Policy Number / Cover Note Number MT/00905827/02

DRIVER

Name of Driver ANDY TAN CHI YONG NRIC No S8019512E Date Of Birth 07/07/1980 Occupation Indoor

Date Of Driving Pass	06/10/2000
Driving experience	22 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97608568
Alt. Phone Number	-
Email Address	PAULANDY@GMAIL.COM
Address	BLK 164 LENTOR LOOP 08-04 SINGAPORE 789096
Address complement	_
Postcode	789096
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	No
vernete riogical allow ratios of carrot vernete control of carrot	-
Insurance Company of Other Vehicle Owned by Driver	_
GENERAL INFORMATION OF THE ACCIDENT	
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Collision - Major/Minor Rd
Weather Conditions	Clear
Road Surface	Dry
OTHER INFORMATION	
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W () 111 1 1 1 1 2 2 2 2 2	
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	
DETAILS OF FOLIOL ACTION	
Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-
CIRCUMSTANCES OF ACCIDENT	
DEEED TO ATTACHED	
REFER TO ATTACHED	DE DIE LID
STATEMENT RECORDED BY ANNIE - PROGRESSIVE CAR CA	REPIELID
TEL 67415336	
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
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DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number	GBE3850T
Vehicle Manufacturer	GDE-30301
Vehicle Model	•
	-
Vehicle Variant	-
Vehicle Colour Vehicle Category	- Commercial vehicle

Name of Driver NRIC No	LEE BOON HWEE S9838252F
Contact Number	(Phone) +65-96349852
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

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Actual Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 Traffic Police Department for investigation.
- 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.
- 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
Sketch Plan

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

Name as in-NRIC/ID card)

Name as in-NRIC/ID card)

A- SLX 1837-C 3- GBE 3850 T

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	On the mentioned date time a low	ation. (a
Aw	is travelling straight when suddenly	
Came	out from the minor road and we colli	dod -
Declaration We declare the foregoing	particulars are true in every respect.	\
Thus	The state of the s	y

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