

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	01/04/2023 16:24 (SGT)
Reported by	Actual Driver
Date of Accident	31/03/2023 11:38 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	SIMS AVE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLD7923C
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	YOU MEIMEI
NRIC No	S7162481A
Email Address	zkz7923@gmail.com
Mobile Phone No	(Phone) +65-91709033
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR
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	1197

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2002061126

DRIVER

Name of Driver	ZHENG KEZHONG
NRIC No	S7267239I
Date Of Birth	05/05/1972
Occupation	Indoor

Date Of Driving Pass	03/10/2011
Driving experience	11 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90901839
Alt. Phone Number	-
Email Address	zkz7923@gmail.com
Address	1B LYNWOOD GROVE
Address complement	-
Postcode	358677
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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 - Change/cross lane
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
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 SKETCH ATTACHED

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	GBH4060J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	SHAWN SOON ZHENXUN
NRIC No	S9222824Z

Contact Number	(Phone) +65-90083739
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	ZHENG KEZHONG
Gender	Male
Phone No	(Phone) +65-90901839
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SLD7923C
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

VEH NO: S1D 7923C
 INSURER: ALLIANZ
 DATE OF ACC: 31/03/23 11:38PM

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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 (Name as in NRIC/ID card)

Sketch Plan

PLEASE
TURN
OVER

Describe Circumstance of the Accident

** NOTE : PLEASE TAKE NOTE THAT YOUR INSURER HAVE 14DAYS TIME FRAME for you to submit OWN DAMAGE Claim under your Own Comprehensive policy. Pls check your policy for more information.

() Claim Own Policy () Claim Third party () Reporting Only

(☒) Claim OD/TP at other workshop ()

Sketch Plan

Vehicle A: SLD7923C
Vehicle B: GBH4060J

On 31 March 2023 at about 11.38am, I was driving my vehicle A (SLD7923C) along Sims Avenue. Suddenly, vehicle B (GBH4060J) hit the right side rear of my vehicle. I get down the vehicle and check, it seems that vehicle B was trying to avoid the road side stationary vehicle hence swerve out and collided with my vehicle. I was not feeling well after the incident and will be seeking medical advice.

Declaration

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

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) *Wen CWL*

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Insurance Singapore Pte. Ltd.



POLICY SCHEDULE
ALLIANZ MOTOR PROTECT

ORIGINAL

Date	:	17 June 2022
Policy Number	:	SP2002061126
Type of Cover	:	ALLIANZ MOTOR PROTECT
Plan Type	:	Comprehensive
Intermediary	:	FINANCIAL ALLIANCE PTE LTD
Intermediary Code	:	0000103
Policyholder/Insured	:	YOU MEI MEI
Correspondence Address	:	ANCHORVALE DRIVE #09-166 322A SINGAPORE 541322
Replacing Cover Note No.	:	NA
Period of Insurance	:	From 29/06/2022 To 28/06/2023
Premium Payable	:	S\$ 1110.40
GST 7%	:	S\$ 77.73
Total Premium Payable	:	S\$ 1188.13

Make and Model	:	Nissan QASHQAI		
Agreed Value	:	MARKET VALUE	Off Peak Car	: No
Registration No.	:	SLD7923C	Good Driver Discount	: No
Year of Manufacture	:	2016	Body Type	: Wagon
Engine Capacity	:	1197.0	Engine No.	: HRA2286027A
Chassis No.	:	SJNFEAJ11U1676491	Windscreen	: UNLIMITED
Hire Purchase Owner	:	NA	No Claims Discount	: 20 %
Additional Cover	:	NA		
Named Drivers	:	YOU MEI MEI ZHENG KEZHONG		
Excess	:	Own Damage	S\$	300.00
	:	Windscreen Damage	S\$	100.00

Allianz Insurance Singapore Pte. Ltd. | UEN 201903913C
79 Robinson Road #09-01 Singapore 068897 | Tel: +65 6714 3369 | Website: www.allianz.sg

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