

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	10/04/2023 18:52 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	03/04/2023 20:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	BLK 13A GHIM MOH RD MSCP
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMW6356J
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	KOON PENG HWEE
NRIC No	SXXXX016J
Email Address	kphbkup@gmail.com
Mobile Phone No	(Phone) +65-90678102
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	SYLPHY 1.6 CVT
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1598

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2002871503

DRIVER

Name of Driver	KOON PENG HWEE
NRIC No	SXXXX016J
Date Of Birth	31/10/1959

Date Of Driving Pass	12/10/1979
Driving experience	43 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90678102
Alt. Phone Number	-
Email Address	kphbkup@gmail.com
Address	BLK 203 BT BATOK ST 21 #16-40
Address complement	-
Postcode	650203
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	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collided into Property
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	1
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	No
Number of Passengers (Including Driver)	2
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	-

PASSENGER 1

Name	SPOUSE
Gender	Female

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

SKETCH PLAN

VEH NO: SMW 6356J
 INSURER: ALLIANZ
 DATE OF ACC: 03/04/23 8:30 PM

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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:

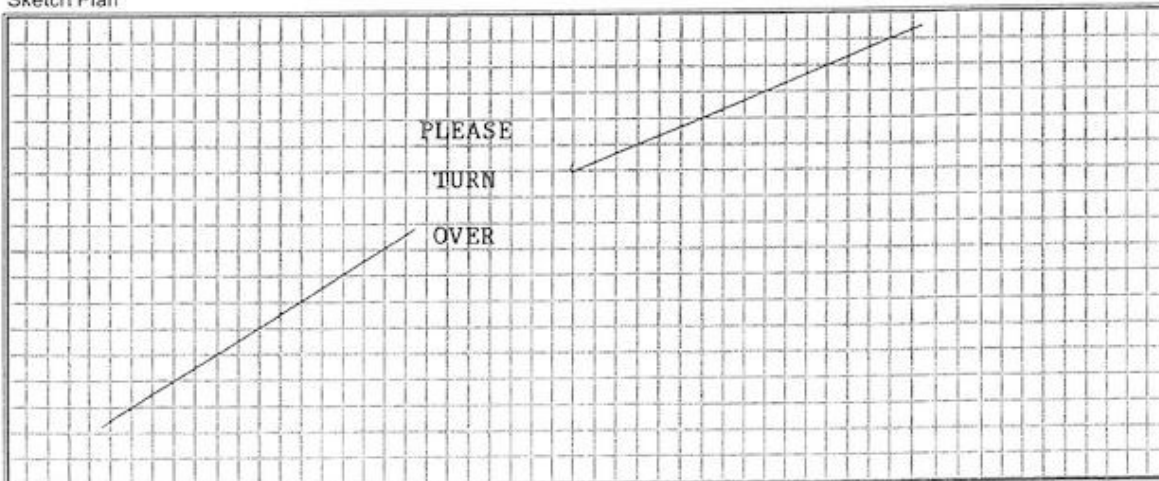
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.

Wong 10/3/23
 Policyholder's Signature / Date & Time

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

lll 10/4/23
 Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card) Speede (W)

Sketch Plan



Describe Circumstance of the Accident

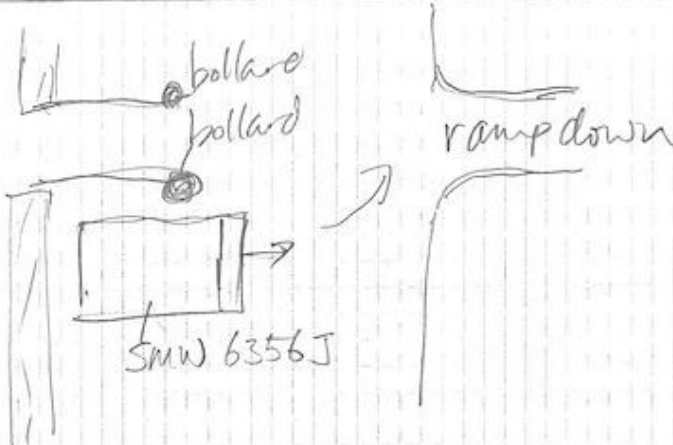
** NOTE : PLEASE TAKE NOTE THAT YOUR INSURER HAVE 14DAYS TIME FRAME for you to submit. OWN DAMAGE

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



I drive out from parking lot my vehicle accidentally hit onto left side bollard and cause my vehicle left side damage.

Declaration

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

[Signature] 10/4/23
Policyholder's Signature / Date & Time

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

[Signature] 10/4/23 CWC
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card) *[Signature]*









Allianz Insurance Singapore Pte. Ltd.

POLICY SCHEDULE
ALLIANZ MOTOR PROTECT

ORIGINAL

Date	: 10 October 2022		
Policy Number	: SP2002871503		
Type of Cover	: ALLIANZ MOTOR PROTECT		
Plan Type	: Comprehensive		
Policyholder	: KOON PENG HWEE		
Correspondence Address	: SINGAPORE 000000		
Replacing Cover Note No.	: NA		
Period of Insurance	: From 30/11/2022 To 29/11/2023 (Both Dates Inclusive)		
Premium Payable	: S\$ 687.31		
GST 7%	: S\$ 48.12		
Total Premium Payable	: S\$ 735.43		
Make and Model	: Nissan SYLPHY		
Agreed Value	: MARKET VALUE	Off Peak Car	: No
Registration No.	: SMW635A	Good Driver Discount	: Yes
Year of Manufacture	: 2020	Body Type	: Sedan
Engine Capacity	: 1598.0	Engine No.	: HR16954275C
Chassis No.	: MNTBBAB17Z0037574	Windscreen	: UNLIMITED
Hire Purchase Owner	: STANDARD CHARTERED BANK	No Claims Discount	: 50 %
Additional Cover	: NCD Protector		
Named Drivers	: KOON PENG HWEE NG YUET MEI KOON SZE YUN KOON SZE HAN		
Excess	: Own Damage	S\$	600.00
	: Windscreen Damage	S\$	100.00

Allianz Insurance Singapore Pte. Ltd. | UEN 2019039133C
79 Robinson Road #09-01 Singapore 068897 | Tel: +65 6714 3369 | Website: www.allianz.sg

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Policy Number : SP2002871503

ORIGINAL

Subject to the following clauses, endorsements and warranties as in the Policy Wording:

Clauses/Endorsements/Warranties	Limit / Excess <small>(set per policy Wording and that stated in Excess schedule unless otherwise stated)</small>
No Claim Discount Protector	
Breakage Of Glass In Windscreen Or Window	as stated above
Excess-own Damage Claim	as stated above
Lifetime Guarantee For Accident Repairs	

Further subject to the following additional terms and conditions, clauses, endorsements and warranties:

Limitations as to use : Used only for social, domestic and pleasure purposes
The Policy does not cover:

- (a) use for hire or reward
- (b) use for racing, pace-making, reliability trials or speed testing
- (c) use for the carriage of goods (other than samples) in connection with any trade or business
- (d) use for any purposes in connection with the Motor Trade

Please refer to the [Allianz Motor Protect Workshop List.pdf](#) on our website [www.allianz.sg](#) for the latest Motor Workshop Listing.

Subject otherwise to the terms, exceptions and conditions of the Allianz Motor Protect Insurance Policy.

10 OCTOBER 2022
Issue Date

Hicham Roissi
Chief Executive Officer
Allianz Insurance Singapore Pte. Ltd.

Note: This Policy Schedule shall be read in conjunction with the Policy Wording as one contract. Please refer to the Policy Wording for the exact terms and conditions as well as the full list of exclusions.