

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	24/04/2023 15:22 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	21/04/2023 19:04 (SGT)
Exact Location of Accident	BKE, Singapore
Additional Location Information	BKE MERGING LANE TILL ACCIDENT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP3560D
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	HOO POH SAN KELVIN
NRIC No	S7029961E
Email Address	HPS001SG@YAHOO.COM
Mobile Phone No	(Phone) +65-91762854
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A6
Variant	1.8 TFSI S-TRONIC
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 - Reporting only
Vehicle Category	Private car
Transmission	Auto
CC	1798

INSURANCE COMPANY

Name of Insurance Company	EQ Insurance Company Ltd
Policy Number / Cover Note Number	DMPPHQ22-004082

DRIVER

Name of Driver	HOO POH SAN KELVIN
NRIC No	S7029961E
Date Of Birth	05/09/1970
Occupation	Indoor

Date Of Driving Pass	11/06/1996
Driving experience	26 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91762854
Alt. Phone Number	-
Email Address	HPS001SG@YAHOO.COM
Address	49 HINDHEDE WALK
Address complement	#10-08
Postcode	587976
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	Side Swipe
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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	3
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	SOH SIEW HOON
Gender	Female

PASSENGER 2

Name	HOO HOI TZER
Gender	Male

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

AT ABOUT 1903 @ MERGING LANE TOWARDS BKE, MY VEHICLE WAS SIDE SWIPE BY SNA5915G DRIVEN BY IC7229743A. HE OVERTOOK ME AND KEPT PAST WITH MY CAR DESPITE ALLOWING HIM TO OVERTAKE ME. HIS LANE WAS CLEAR AFTER OVERTAKING AND HE STILL KEPT PAST WITH MY VEHICLE. AS I TRIED TO OVERTAKE HIS VEHICLE, HE SPEED UP, LEADING IN THE SIDE SWIPE THE 2ND TIME. HENCE, THE ACCIDENT OCCURRED. PLEASE REVIEW THE FOOTAGE FOR THE MERGING LANE TO THE EVENT SIDE SWIPE FOR A COMPREHENSIVE PICTURE OF THE ACCIDENT.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SNA5915G
Vehicle Manufacturer	Skoda
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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' law yers/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' law yers/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 law yers/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

Tomy Fong

Sketch Plan

Refer to the video footage

Describe Circumstances of the Accident

About 1903 @ merge lane towards RKE.
my vehicle was side swipe by SNA 54156 drove
by IC 72297 43A.

He ^{overtake} overtook me and keep ^{pace} pace with my
car despite ^{dispite} asking him to overtake. His
lane was clear after overtaking & he still
keeping pace with my vehicle.

As I ^{tried to} ^{overtake} overtake his vehicle, he speeded
up ^{leading} leading to the side swipe the
2nd ^{times} time. Hence, the accident occurred.

Pls review the bridge to the merge lane
to the eventual side swipe for a
comprehensive picture of the accident

Declaration

We declare the foregoing particulars are true in every respect.

 24042023
Policyholder's Signature / Date &
Time

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



Witnessed by Reporting Centre
Personnel Tony Foong

























