

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	08/05/2023 13:55 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	07/05/2023 11:50 (SGT)
Exact Location of Accident	Bukit Timah Rd, Singapore
Additional Location Information	TOWARDS DUNEARN ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLS7039B
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	JOHN CHARLES TAYLOR
NRIC No	SXXXX778F
Email Address	johntaylor88@yahoo.co.uk
Mobile Phone No	(Phone) +65-83009498
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A8
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	2995

INSURANCE COMPANY

Name of Insurance Company	Sompo Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	D23MTPV01003895

DRIVER

Name of Driver	JOHN CHARLES TAYLOR
NRIC No	SXXXX778F
Date Of Birth	29/02/1960
Occupation	Indoor

Date Of Driving Pass	06/03/2006
Driving experience	17 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83009498
Alt. Phone Number	-
Email Address	johnntaylor88@yahoo.co.uk
Address	16 EWE BOON ROAD #01-07
Address complement	-
Postcode	259324
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	Collision - U-Turn
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)	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

PLEASE REFER TO ATTACHMENT AND STATEMENT

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	SLZ7744L
Vehicle Manufacturer	Mercedes
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LIONEL HAN
NRIC No	SXXXX574Z

Contact Number	(Phone) +65-97432688
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

SKETCH PLAN

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5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
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8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

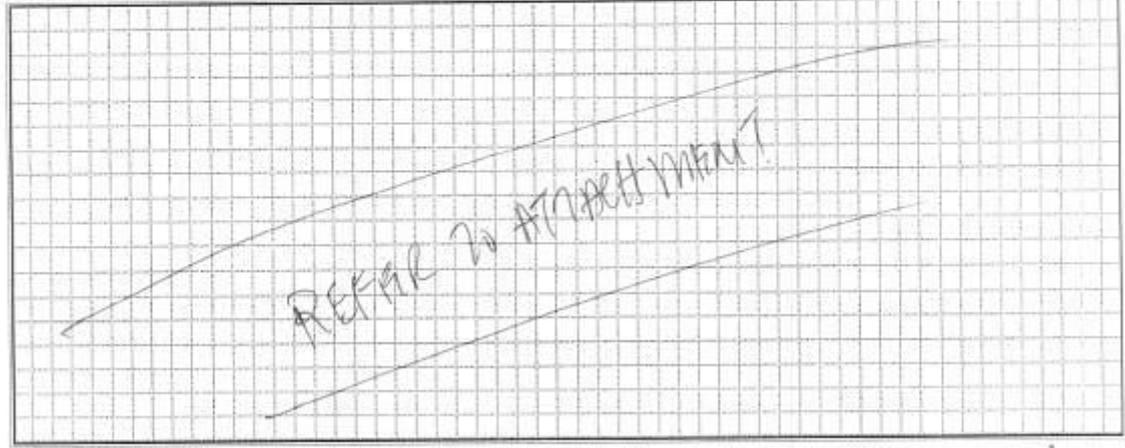
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

[Handwritten Signature]
 Policyholder's Signature / Date & Time
 8 MAY 2023 13:15 hrs.

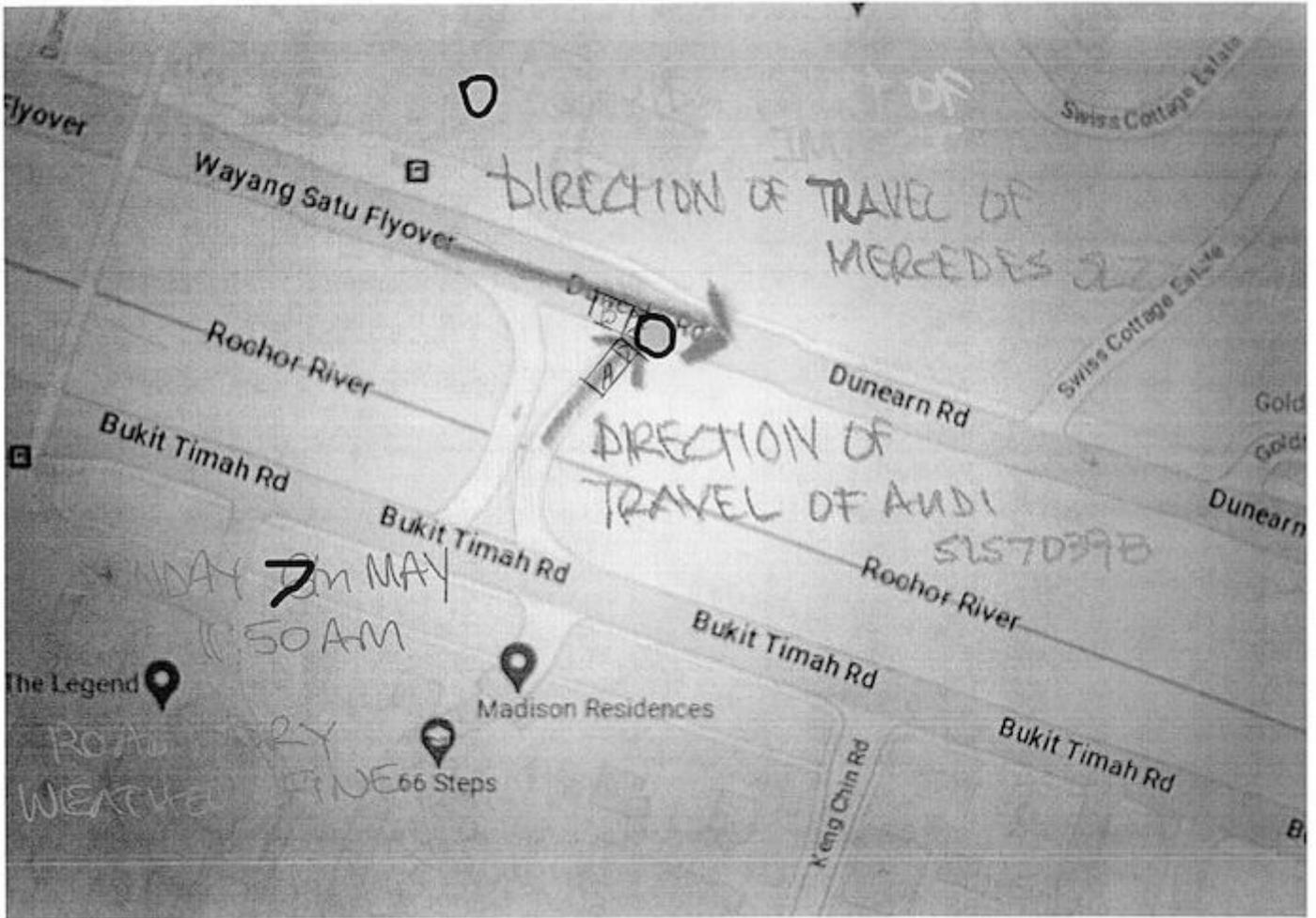
Actual Driver's Signature (if driver is not the policyholder) / Date & Time

[Handwritten Signature] 08/05/2023
 Witnessed by Reporting Centre Personnel
 (Name as in NRIC/ID card)

Sketch Plan



vJun2022



Describe Circumstance of the Accident
REFER TO ATTACHMENT

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

[Handwritten Signature]

Policyholder's Signature / Date & Time

8 MAY 2023 13:15hrs

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

[Handwritten Signature] *08/05/2023*

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

5/23/12 5:17 PM

By: Certificate of Insurances - SLS 7039B - Jeff Charles TAYLOR - Pasa - Suisse

Describe Circumstances of the Accident:

I was negotiating a U-turn from Bukit Timah Rd onto Dunearn Rd to travel southeast towards the junction with Chancery La/Balmoral Rd.

I glanced to the left to look for any oncoming traffic on Dunearn Rd and saw none so proceeded to turn onto Dunearn Rd. Next thing I heard a loud bang and realized there had been a collision.

A grey metallic painted Mercedes C18 saloon (car license plate no. SIZ7744L) was now stationary some 50m down Dunearn Rd in front of my Audi A8L (license plate no. SLS 7039B).

I proceeded to pull-up behind the Mercedes put on my hazard warning lights and placed the warning triangle some 50m behind the vehicles.

Upon reaching the Mercedes I realized that the two cars had collided. The driver a Mr Lionel Han was driving and had his daughter (a child of maybe 7 years of age) in the front passenger seat.

We exchanged details and took photographs of our respective vehicles and the scene;

Mr Lionel Han
H/P 9743 2688
NRIC S8202574Z

There is damage to the Mercedes front wing, both offside door panels and the rear wing and O/S/R wheel.
My Audi has apparent damage to the N/S/F Wing, Bonnet, Headlamp, front valance and wheel.

I have several photos and images of accident scene and location to share electronically when needed.

60

5/23/12 5:17 PM



















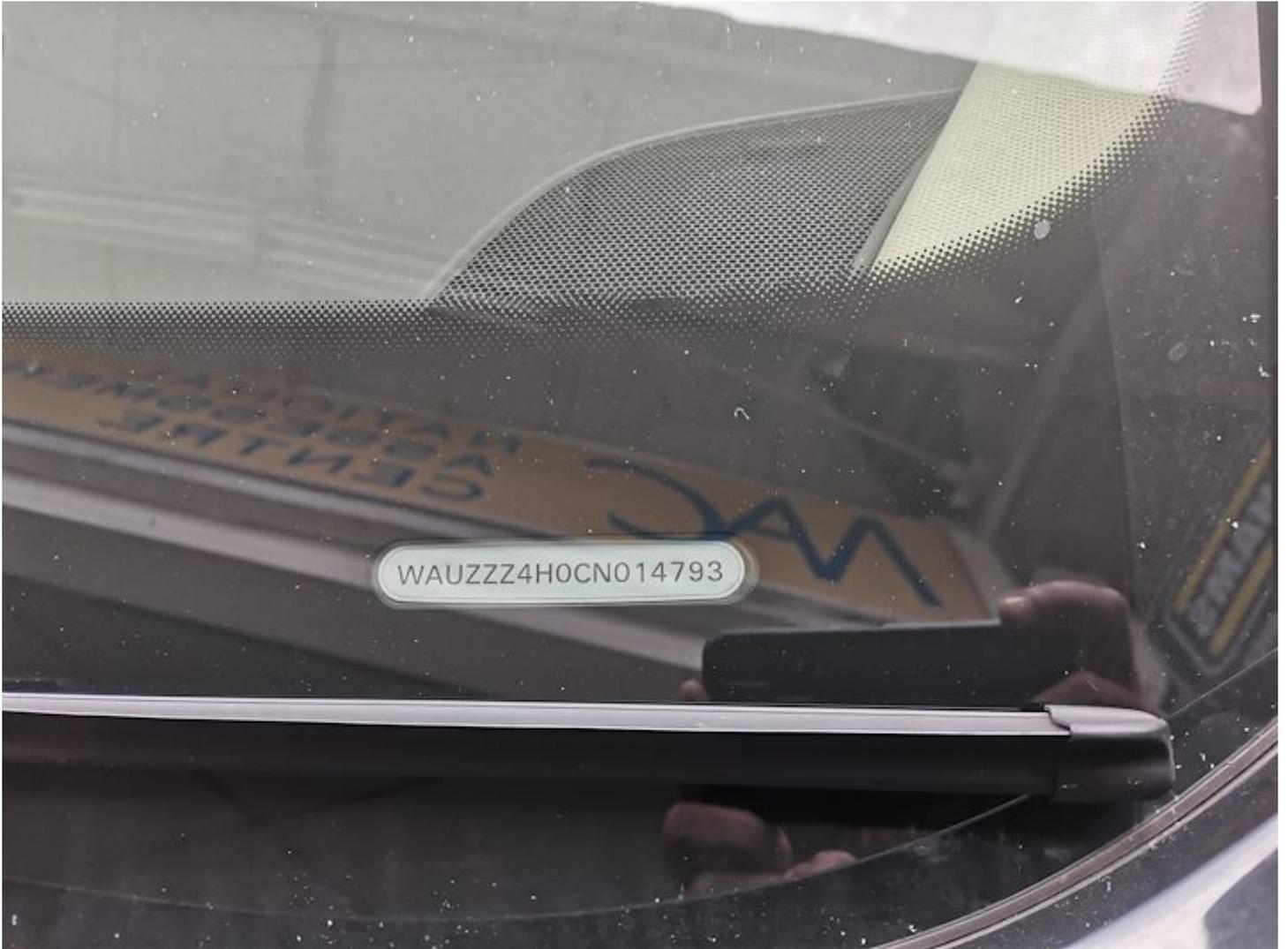






















IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SN092358000B Vehicle Registration No: SLS7089B
 Name (as shown in NRIC): Jaya Charan Taylor NRIC/FIN/Passport No: SXXXX718F
 (*Vehicle Driver/Policyholder) (*) Please delete as appropriate
 Address: _____ Singapore ()
 Contact (Tel): _____ Mobile No.: 83009495
 Email Address: _____
 Date of Accident: 07/05/2023 Time of Accident: 11:50
 Place of Accident: BUKIT TIMAH ROAD TOWARDS DANAJAYA ROAD
 Insurance Company: Sompo

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

TP Vehicle number to S2714YL

 Policyholder / Actual Driver's Signature
 Date:

[Signature]
 Reporting Centre Personnel's Signature
 Name (as in NRIC/ID card):
 Date:

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