

## 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 .....	28/06/2023 13:40 (SGT)
Reported by .....	Actual Driver
Date of Accident .....	21/06/2023 17:20 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	SERANGOON GARDENS COUNTRY CLUB
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SLV7860E
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	LIM WEI LIANG JASON
NRIC No .....	SXXXX077Z
Email Address .....	jasonlimwl90@gmail.com
Mobile Phone No .....	(Phone) +65-97590894
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Hyundai
Model .....	Elantra
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 .....	1591

#### INSURANCE COMPANY

Name of Insurance Company .....	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number .....	DMPCSNW00158202200

#### DRIVER

Name of Driver .....	KOH CHWEE MENG GERALDINE
NRIC No .....	SXXXX637H
Date Of Birth .....	09/04/1960
Occupation .....	Indoor

Date Of Driving Pass .....	16/05/1978
Driving experience .....	45 YEARS AND 1 MONTH
Gender .....	Female
Mobile Number .....	(Phone) +65-91080451
Alt. Phone Number .....	-
Email Address .....	jasonlimwl90@gmail.com
Address .....	5A MARLENE AVENUE
Address complement .....	-
Postcode .....	556668
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	MOTHER-IN LAW
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 - Head to Rear
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) .....	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 .....	KID
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

PLEASE REFER TO THE ATTACHED STATEMENT

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes
Reasons for not uploading a video of the accident .....	WITH DRIVER

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SMM4468K
Vehicle Manufacturer .....	-
Vehicle Model .....	-

Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	MASTURAH BINTE SALEHAN
NRIC No .....	SXXXX423A
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

SKETCH PLANIMPORTANT NOTICE

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6. The 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.
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: Jm 28/6/2023  
 Driver's Signature (If driver is not the policyholder) / Date & Time: GKR 28/6/2023  
 Witnessed by Reporting Centre Personnel: gnur 28/6/2023

Sketch Plan Sekingoon Gardens Country club

A - SLV 7860E  
 B - SMM 4468K  
 please Refer to the attached



**Describe the Circumstance of the Accident**

Please Refer to the attached  
Statement

**Declaration**

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

*Jhu* 28/6/2023

Policyholder's Signature / Date & Time

*GBH* 28/6/2023

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

*gmueller* 28/6/2023

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

### Accident Statement

On 21/06/2023 at about 1720 Hrs, my vehicle (SLV7860E) was stationary at gantry of Serangoon Gardens Country Club. While waiting the gantry to release, suddenly and without warning, a vehicle (SMM4468K) hit onto the rear right of my vehicle. I want to state that my car was stationary and I have camera recorded.

I am making a claim against third party.



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Name: Koh Chwee Meng Geraldine  
I/C: S2177637H



Serangoon Gardens Country Club, 22 Kensington Pa

- Map
- Directions
- Map
- Building Directory
- What's Nearby
- Get Tips
- Getting Here



A - SLV 7860E

B - SMM 4468K

























