

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	01/09/2022 14:56 (SGT)
Reported by	Driver
Date of Accident	31/08/2022 17:47 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ALLEY WAY BEHIND NO 371 JALAN BESAR BESIDE BEATTY ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJT9846T
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	ELAINE TAN SI RU
NRIC No	S9623331J
Email Address	KNLGHT780@HOTMAIL.COM
Mobile Phone No	(Phone) +65-81288504
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Airwave
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	1500

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5127319621

DRIVER

Name of Driver	CHENG KAH MENG
NRIC No	S0117985C
Date Of Birth	16/06/1953

Occupation	Indoor
Date Of Driving Pass	02/01/1980
Driving experience	42 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97439533
Alt. Phone Number	-
Email Address	KNLGHT780@HOTMAIL.COM
Address	BLK 438 HOUGANG AVENUE 8 #02-1539
Address complement	-
Postcode	530438
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Friend
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 - Opening Door of Vehicle
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

MY VEHICLE WAS PARKED STATIONARY. I WAS SITTING AT THE RIGHT REAR PASSENGER SEAT WAITING. MY CAR DOOR WAS ALREADY OPEN. I SAW VEHICLE B TRYING TO OVERTAKE I PULL MY DOOR CLOSER TO GIVE VEHICLE B MORE SPACE TO OVERTAKE. WHILE VEHICLE B OVERTAKE VEHICLE B HIT ONTO MY RIGHT REAR PASSENGER DOOR.

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	ADV TO EMAIL TO MOTORVIDEO@INCOME.COM.SG

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMQ854J
Vehicle Manufacturer	Porsche
Vehicle Model	Macan
Vehicle Variant	-

Vehicle Colour	White
Vehicle Category	Private car
Name of Driver	CHUA HOCK LIM
NRIC No	S1171372F
Contact Number	(Phone) +65-98349835
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2
PASSENGER 1	
Name	-
Gender	Male

SKETCH PLAN

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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 G A 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 purposes 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]

01/09/2022 1445HRS

[Handwritten Signature]

TEN TOH KIAT HENRY

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

A-SJT9846T
B-SMQ854J

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Describe Circumstance of the Accident

REFER TO GEARS

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

01/09/2022
1445HRS

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

TIEN TOH KIAT HENRY

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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: SN072291000P Vehicle Registration No: SJT9846T
 Name (as shown in NRIC): CHENG KAH MENG NRIC/FIN/Passport No: S0117985C
 (* Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate
 Address: BLK 438 HOUGANG AVENUE B, #02-1539 Singapore (530438)
 Contact (Tel): -63852202 Mobile No.: 97439533
 Email Address: KNIGHT780@HOTMAIL.COM
 Date of Accident: 31-Aug-2022 Time of Accident: 17:47
 Place of Accident: ALLEY WAY BEHIND NO. 371 JALAN BESAR BESIDE BEATTY ROAD
 Insurance Company: NTUC INCOME

(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:

I would like to make the following amendments to the location of the accident in regards to a typo on the original GiA Report.

Exact Location of Accident: 371 Jalan Besar, Singapore 208994

Additional Location Information: ALLEY WAY BEHIND NO. 371 JALAN BESAR BESIDE BEATTY ROAD

Policyholder / Driver's Signature
 Date: 1/9/2022

Reporting Centre Personnel's Signature

Name: Henry
 NRIC/FIN No.: S992277
 Date: 01/09/2022