

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	13/07/2023 10:25 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	12/07/2023 15:00 (SGT)
Exact Location of Accident	Anchorvale St, Singapore
Additional Location Information	IN FRONT OF SENGKANG GENERAL HOSPITAL
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMS4146H
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	GERALD LEE HOCK MUN
NRIC No	SXXXX789H
Email Address	geraldleehockmun@yahoo.com.sg
Mobile Phone No	(Phone) +65-94570519
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mazda
Model	Cx-3
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 - Reporting only
Vehicle Category	Private car
Transmission	Auto
CC	1998

INSURANCE COMPANY

Name of Insurance Company	Sompo Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	D23MTPV01002643

DRIVER

Name of Driver	GERALD LEE HOCK MUN
NRIC No	SXXXX789H
Date Of Birth	23/05/1976
Occupation	Indoor

Date Of Driving Pass	23/06/1995
Driving experience	28 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-94570519
Alt. Phone Number	-
Email Address	geraldleehockmun@yahoo.com.sg
Address	29 ANCHORVALE CRESCENT #13-37
Address complement	-
Postcode	544658
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 - 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)	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 SKETCH PLAN

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	SMD1371Y
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	MARLIA
Contact Number	(Phone) +65-90112640

Address -
Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

Describe Circumstance of the Accident

On 2/7/2023 at about 15:00 hrs, I was travelling along Ancherula Crescent street on the outermost right lane as I would want to turn right into Ancherula Crescent. There is a traffic light junction. The vehicle in front of me (SRD 13714) moved forward and I moved forward as well. I did not stop the vehicle in front of me stopped but I did not stop in time even when I tapped on my brake and had a minor collision. There is no visible damage on both vehicles as well. I checked with the driver and she informed no one was injured.

Declaration

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


 13/6/23

Policyholder's Signature / Date & Time

eo/2ika

Actual Driver's Signature (if driver is not the policyholder)

/ Date & Time

 13/6/2023

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





























