SN09212J000F / National Assessment Centre Services [408933] ENTRY DATE & TIME: 19/02/2021 17:09 (SGT) SUBMITTED BY: Hui Zhen VERSION: 1 (19/02/2021 17:09 (SGT))

# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Please report <u>correctly</u> the details of the accident to speed up the claims process.

This Form must be completed by the Policyholder and/or the Authorised Driver
 Information provided must be as truthful and accurate as possible. Any willful misrepresentation or witholding of material facts may allow insurance companies to repudiate

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 Date of Accident

Exact Location of Accident Additional Location Information

Country/State of Loss

19/02/2021 17:09 (SGT) 19/02/2021 06:50 (SGT)

Thomson Rd, Singapore

Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number

SFC6294Y

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

No

KOH SEET HIN

VEHICLE PARTICULARS

Manufacturer

Model Variant

CC

Vehicle Category

Transmission

Private car

Auto

Nissan

Sylphy

1598

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage Fleet Policy

Policy Number

Cover Note Number

NTUC Income Insurance Co-operative Ltd

Comprehensive

No

5118037028-01

DRIVER

Name of Driver

NRIC No Address

Address complement

Postcode

Does Driver Own Other Vehicles?

KOH SEET HIN S1227302E

BLK 284 BRIGHT HILL DRIVE #09-823

539284

No

GENERAL INFORMATION OF THE ACCIDENT



Type of Accident Weather Conditions

Collision - Head to Rear

Clear

OTHER INFORMATION

Was any foreign vehicle involved in the accident? Was anybody injured in the Accident?

Was any other material or property damaged? Number of Passengers (Including Driver) No No

Yes

CIRCUMSTANCES OF ACCIDENT

REFER TO STATEMENT

ATTACHMENT(S)

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

Yes No

Was there any audio recorded?

No

## **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant Vehicle Colour

Vehicle Category

Name of Driver

Insurance Company Name

SBL3691E

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Private car

TENG TZE WANG

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