

## APPLICATION FOR PURCHASE OF ACCIDENT REPORTS

### A. IMPORTANT NOTES:

1. Persons **MUST** first have lodged their own motor accident report with their own insurance company before they can apply for the report of the third party.
2. Applications requested will be processed **ONLY** upon receipt of payment. Once processed, an acknowledgement receipt will be issued.
3. GIARMC reserves the right to make any changes to the terms and conditions of the application.
4. GIARMC only provide Accident Statement. Details such as Contact number, Address and NRIC of Third Party Insured will **not be disclosed**.

### B. PAYMENT & CHARGES:

1. For walk-in applications, payment is to be made by **CASH** or **CHEQUE** only.
2. For application by post, please attach cheque payment together with this application form and mail it to the above address.
3. All fees are inclusive of GST 7%.
4. **Search / Processing Fee : \$15.00 (non-refundable)**
5. **Document Fee : \$14.00 per accident report**
6. Cheque payment is payable to **GIARMC**

### HOW TO APPLY:

1. **ALL FIELDS MUST BE COMPLETED otherwise application will be rejected.**
2. Please attach the Warrant to Act **OR** complete Section F.
3. **Authorization letter** is required if you are applying/purchasing on **behalf of injured owner / driver or insurance company.**
4. For pedestrian/ passenger/ property, please attach a copy of the **police report** with your application.
5. Please note that if the driver/owner's report is **NOT** found in our database, your application will be rejected.
6. Search and/or Purchase of own insured/ client's report is **NOT** allowed and will be **rejected**.

### C. LEGAL OBLIGATION UNDER THE PERSONAL DATA PROTECTION ACT (PDPA):

- 1.1 Receiving Party shall comply with the Personal Data Protection Act 2012 ("**PDPA**") and all subsidiary legislation related thereto ("**Data Protection Legislation**") with regard to any and all personal data (as defined in the PDPA), including but not limited to the personal data that is contained within the accident report(s) ("**Accident Report(s)**"), that it receives from GIA or that Receiving Party collects through GIA's information technology systems (such as the GIA Records Management Centre system). Such personal data that the Receiving Party receives from GIA or that it collects from GIA information technology systems shall be referred to as "**GIA Disclosed Personal Data**")
- 1.2 Receiving Party hereby warrants, undertakes and represents that it shall:
  - (a) only use the Accident Report(s) and the GIA Disclosed Personal Data, solely for the purposes of settlement, investigation, dealing with or resolution of any insurance claims arising out of or in connection with the accident(s) set out in the Accident Report(s);
  - (b) not disclose the Accident Report(s) and the GIA Disclosed Personal Data to any third party without the prior written consent of GIA;
  - (c) take appropriate technical and organisational measures to protect the Accident Report(s) and the GIA Disclosed Personal Data against accidental or unlawful destruction or accidental loss, alteration, unauthorised disclosure or access and against all other unlawful forms of processing. Such measures shall ensure a level of security appropriate to the risks represented by the processing and the nature of the data to be protected, having regard to the state of the art and the cost of implementation;
  - (d) give GIA notice in writing as soon as reasonably practicable should it be aware of, or reasonably suspect, that any of the events referred to in Clauses 1.2(b) and (c) has occurred and shall promptly take all steps necessary to remedy the event and prevent its re-occurrence;
  - (e) not retain the Accident Report(s) and the GIA Disclosed Personal Data for any longer than is necessary for the purposes of settlement, investigation, dealing with or resolution of any insurance claims arising out of or in connection with the accident set out in the Accident Report(s);
  - (f) limit disclosure of the Accident Report(s) and the GIA Disclosed Personal Data to its employees on a need to know basis and only for the purposes of processing for which such personal data was collected by the Receiving Party; and
  - (g) where that/those Accident Report(s) and/or the GIA Disclosed Personal Data is/are to be transferred to another country, to not do so unless the consent of the individual whose personal data is to be transferred to another country has been obtained except where an exception to such consent under the PDPA applies. Further, where that/those Accident Report(s) and/or the GIA Disclosed Personal Data is/are to be transferred to another country, to take any such additional measures as are necessary to secure that personal data is transferred in accordance with the requirements of the Data Protection Legislation.
- 1.3 Notwithstanding anything to the contrary, Receiving Party undertakes to indemnify and at all times hereafter to keep GIA indemnified against any and all losses, damages, actions, proceedings, costs, claims, demands, liabilities (including full legal costs on a solicitor and own client basis) which may be suffered or incurred by GIA or asserted against GIA by any person, party or entity whatsoever, in respect of any matter or event whatsoever arising out of, in the course of, by reason of or in respect of any breach of any of the provisions in this Clause.
- 1.4 Receiving Party acknowledges and agrees that, due to the unique nature of personal data, a remedy at law for breach by Receiving Party of this Clause 1 may not be adequate and that such breach would cause irreparable harm to GIA; therefore GIA shall be entitled to seek equitable relief such as an injunction or specific performance, in addition to whatever remedies it might have at law or under this Agreement.

**D. PARTICULARS OF APPLICANT**

Name/Company: \_\_\_\_\_ Your Ref : \_\_\_\_\_  
 Address : \_\_\_\_\_ NRIC No : \_\_\_\_\_  
 \_\_\_\_\_ Singapore ( \_\_\_\_\_ ) Co Reg. No : \_\_\_\_\_  
 Tel / Mobile No: \_\_\_\_\_ Fax No : \_\_\_\_\_

**E. DETAILS OF TRAFFIC ACCIDENT**

Date/Time of Accident: \_\_\_\_\_  
 Vehicle No. for requested Accident Report (Third Party): \_\_\_\_\_  
 Place of Accident: \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 Applicant's signature & Date

\_\_\_\_\_  
 Company's Stamp

**F. UNDERTAKING BY INDIVIDUAL INVOLVED/PROXY OR ATTACH WARRANT TO ACT**

I \_\_\_\_\_ NRIC No/Co Reg. No.: \_\_\_\_\_  
 (Driver/Owner Name)

my vehicle registration No. \_\_\_\_\_ was involved in this accident.

- wish to apply for the Non – Injury Accident Report and undertake to pay for the necessary fees.
- I hereby authorize \_\_\_\_\_ of NRIC No/Co Reg. No. : \_\_\_\_\_ to apply for the Non – Injury Accident Report on my behalf. I undertake to pay the necessary fees.

\_\_\_\_\_  
 Driver/Owner's Signature & Date

**G. UNDERTAKING BY LAW FIRMS/INSURANCE COMPANIES AND LOSS ADJUSTERS ONLY**

We act on behalf of \_\_\_\_\_ NRIC No/Co Reg. No. \_\_\_\_\_

whose vehicle Reg. No. \_\_\_\_\_ was involved in this accident. We undertake to pay for all the necessary fees.

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**FOR GIARMC OFFICIAL USE:**

Receipt No: \_\_\_\_\_  Cash  Giro  Cheque \_\_\_\_\_