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 witholding 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.

- 4. The issue and acceptance of this is form by instrained 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 First Submission 08/11/2024 17:31 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 07/11/2024 06:40 (SGT) Exact Location of Accident Near E3, Kampung Ladang, 81550 Gelang Patah, Johor, Malaysia Additional Location Information GELANG PATAH TOWARDS MALAYSIA IMMIGRATION Country/State of Loss Malavsia

DETAILS OF OWN VEHICLE

Toyota

Vehicle Registration Number SMF144M

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner SEE CHAN @ CHAN SENG FWEE NRIC No S7968609C Email Address MARCUSCSF@YAHOO.COM.SG Mobile Phone No (Phone) +65-90611080 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model COROLLA ALTIS CLASSIC 1.6 CVT 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 No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto

CC 1598 Vehicle Fuel Petrol First Regisration Date 04/05/2016 Chassis no

MR053REH104548817 Effective Date/Time of Ownership 12/05/2022 07:05 (SGT)

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Policy Number / Cover Note Number DMPCSNW00043342402

DRIVER

Name of Driver	SEE CHAN @ CHAN SENG FWEE
NRIC No	S7968609C
Date Of Birth	13/11/1979
Occupation	Indoor
Driving Pass Date	08/05/2000
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	24 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90611080
Alt. Phone Number	-
Email Address	MARCUSCSF@YAHOO.COM.SG
Address	BLK 1 JURONG LAKE LINK 12-08 SINGAPORE 648160
Address complement	-
Postcode Is the driver the policyholder?	- V
If No, Relationship of the Driver with the Insured	Yes
Does Driver Own Other Vehicles?	- Na
Vehicle Registration Number of Other Vehicle Owned by Driver	No
verlicle (registration) (unified of Other Verlicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Side Swipe
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?	- V
Number of Passengers (Including Driver)	Yes
Has the driver been approached by unknown person(s)	2
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	
PASSENGEN I	
Name	PEA BEN SIN
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	
REFER TO SKETCH PLAN AND SUMMARY	
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	SLX6756U
Vehicle Manufacturer	_
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	_
Insurance Company Name	-
Nature Of Damage	_
Details of property damaged in accident	_
No. Of Passenger (Including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> 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.
- 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 Traffic Police Department for investigation.
- This report will be forwarded by the insurers to 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.
- 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

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

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

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

Sketch Plan

Right Size EDRS

A: SME/44M

B: SLX 6756U

B: SLX 6756U

GELANG PATAH, JOWARDS

IMM'GRATION SINGAPURE



Describe	Circumstance	of the	Acciden

ON 7TH NOVEMBER 2024 AT ABOUT 6.40AM I WAS DRIVING MY VEHICLE A (SME144M) ALONG GELANG PATAH TOWARDS MALAYSIAN IMMIGRATION WHEN VEHICLE B (SLX6756U) CUT INTO MY LANE AND VEHICLE'S B (SLX6756U) LEFT HAND SIDE, BRUSHED AGAINTS MY VEHICLE A (SME144M) RIGHT HAND SIDE BUMPER. AFTER THAT VEHICLE B JUST DRIVE OFF. I COULD NOT STOPPED VEHICLE B AS THE TRAFFIC WAS VERY HEAVY. NOBODY WAS INJURED.

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

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

2























中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE 1/TO

Motor Private Car

CERTIFICATE OF INSURANCE

MX1F

SN

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 Road Transport Act, 1987 (Molaysia) Motor Vehicles (Third-Party Risks) Rules, 1999 (Malaysia)

AN0573A

Cov. Type:C

CERTIFICATE No.

DMPGSNW00043342402

Engine No.: 1ZRY274932 Cha. No.:MR053REH104548817

1. Index Mark and Registration

SMF144M

Number of Vehicle

AUTOSAFE

2. Name of Policy Holder

SEE CHAN @CHAN SENG FWEE

3. Effective date of the Commencement of Insurance for the purposes of the Regulations, (00:00:00)
Ordinance or Enactment

04/05/2024

Named Drivers Ex Sect. I

\$\$500.00

Additional Ex Other than Named Drivers:

\$\$3,000.00

4. Date of Expiry of Insurance

03/05/2025

Ex Sect. 1 - Age <= 25 Ex Sect. 1 - Age >= 26

\$\$500.00

* Age as at date of accident EX ON WINDSCREEN .

\$\$100.00

5. Persons or Classes of Persons entitled to drive*

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to use:*

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft)

One time Waiver of Excess for the first \$\$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

HIRE PURCHASE CO.: PRIVILEGE CAPITAL PTE. LTD.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia), are not to be included under these headings.

I/We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD.

Issued By: PRIVILEGE CAPITAL PTE LTD Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)

♠ 3 Anson Road #16-00 Springleaf Tower Singapore 079909

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