SS2X246O0005 / SME MOTOR PTE LTD ENTRY DATE & TIME: 24/06/2024 12:28 (SGT) SUBMITTED BY: Chia Pei Ying VERSION: 1 (24/06/2024 12:28 (SGT))

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.

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 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 24/06/2024 12:28 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 24/06/2024 07:40 (SGT) Exact Location of Accident Hougang Ave 2, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Private use

Private car

Auto

1300

No - Claiming third party

Vehicle Registration Number S.IK9171D

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner LOW PEI SUNG NRIC No S7803547A Email Address SHANN LOW@YAHOO.COM.SG Mobile Phone No (Phone) +65-91382755 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Honda Model Fit Variant Exact purpose for which vehicle was being used at time of

accident

Are you claiming under your own insurance policy for repair to your vehicle?

Vehicle Category Transmission CC

INSURANCE COMPANY

Name of Insurance Company **ECICS Limited** Policy Number / Cover Note Number MPC24P00042500

DRIVER

Name of Driver LOW PEI SUNG NRIC No S7803547A Date Of Birth 26/01/1978 Occupation Indoor

Driving Pass Date 26/06/2002 Driving experience 22 YEARS Gender Female Mobile Number (Phone) +65-91382755 Alt. Phone Number Email Address SHANN_LOW@YAHOO.COM.SG Address BLK 1 LORONG 5 TOA PAYOH #33-08 Address complement Postcode 319458 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Nο 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 Chain Collision Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement PASSENGER 1 Name KAYDEN NG ZHE YANG Gender DETAILS OF POLICE ACTION Was the accident reported to the police? Nο Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT ON THE STATED DATE AND TIME, MY VEHICLE SKJ9171D WAS TRAVELLING STRAIGHT ON LANE 2 AND WHEN THE FRONT VEHICLE SMW2116L SLOWED DOWN AND STOPPED. HENCE, I ALSO STOPPED MY VEHICLE SKJ9171D. SUDDENLY, I HEARD A LOUD BANG FROM BEHIND AND THE GREAT IMPACT FORCED MY VEHICLE SKJ9171D TO MOVE FORWARD AND HIT ONTO THE REAR PORTION OF THE FRONT VEHICLE SMW2116L. WHEN I ALIGHTED, I THEN REALISED VEHICLE B SLP7095D HIT ONTO THE REAR PORTION OF MY VEHICLE SKJ9171D. ATTACHMENT(S)

Was there any video captured by Car Camera? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Yes

Vehicle Registration Number SLP7095D



Are accident photos available for attachment?

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	VEHICLE B
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

MARKET AND AND A	
Vehicle Registration Number	SMW2116L
Vehicle Manufacturer	_
Vehicle Model	_
Vehicle Variant	_
V 1: 1 0 1	
	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	_
Address	_
Address complement	_
Destands.	
	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE C
No. Of Passenger (Including Driver)	
No. Of Fassenger (including Diffel)	-

SKETCH PLAN

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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.

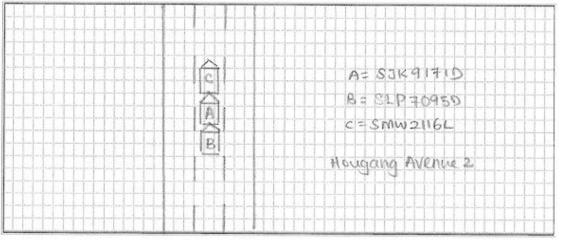
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

(Name as in NRIC/ID card)

Sketch Plan



1

escribe Circumsta	nce of the Accident
On	the stated date and time, my vehicle skij 91710
was tra	velling straight on lane 2 and when the front
Vehicle	"SMW2116L slowed down and stopped, hence I also
stopped r	ng vehicle SKJ9171D. Suddenly, I heard a loud bang
from bel	hind and the great impact Breed my vehicle skyaffe
to move	forward and hit onto the year portion of the
front ve	amw2116L hicle When I alighted, I then realised vehicle
Si-P70951	D hit onto the rear portion of my reliide SKJ91711

Declaration

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

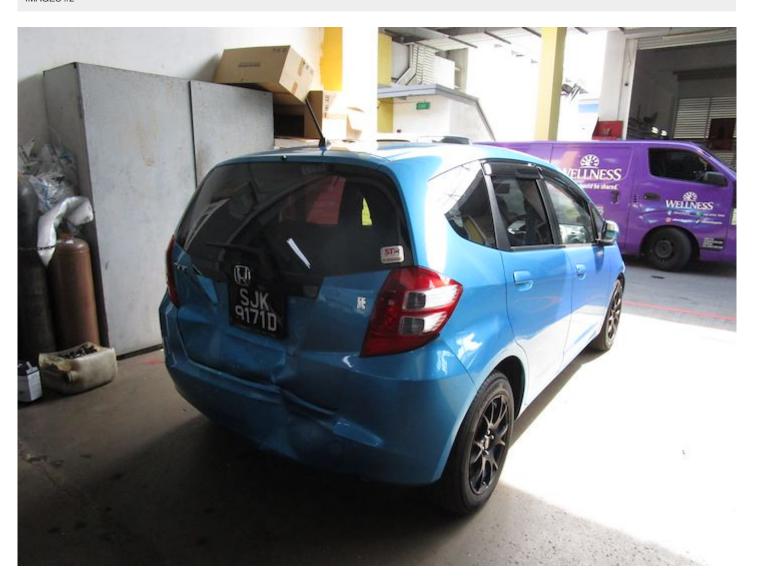
Policyholder's Signature / Date & Time

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

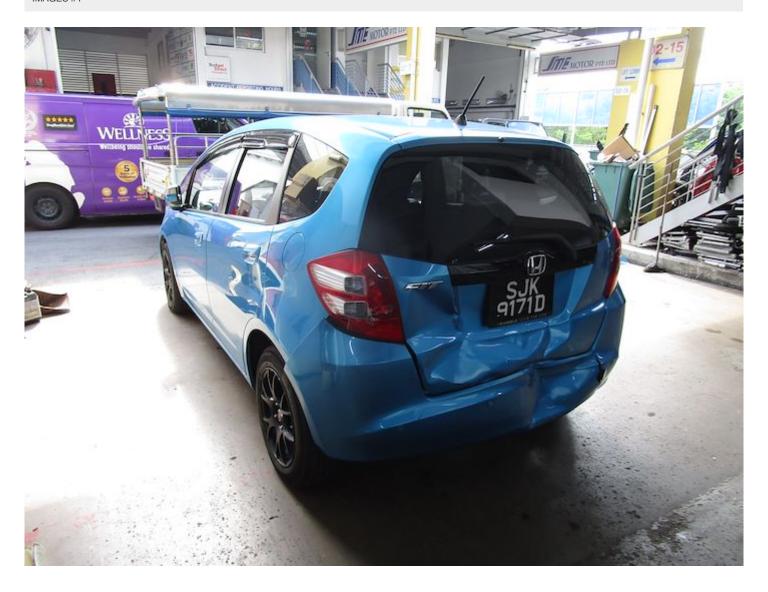
Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

2















Certificate of Insurance

Motor Vehicles (Third-Party Risks Compensation) Act (Chapter 189) Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 Motor Vehicles (Third-Party Risks) Roles, 1959 (Malaysia) Road Transport Act, 1987 (Malaysia) Road Transport (Amendment) Act, 2019 (Malaysia)

MZ300 THIRD PARTY, FIRE & THEFT

Certificate No.: MPC24P00042500

Chassis No.:

GE61117210

Agency Name: ASSURE (SINGAPORE) PTE. LTD.

Engine No.:

L13A4129815

Agency Code:

B0000888

1. Index Mark and Registration Number of Vehicle:

SJK9171D

2. Name of Policy Holder:

LOW PEI SUNG (LIU PEISHAN)

3. Period of Insurance (both dates inclusive):

5/1/2024 to 9/5/2025

4. Persons or Classes of Persons entitled to drive

a) The Insured and all the Named Drivers declared under this Policy

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Car 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 Car.

5. Limitations as to use

Use for social, domestic and pleasure purposes and for the insured's business. The policy does not cover use for hire or reward, tuition, driving test, race, pace-making, reliability trial, speedtesting, 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.

Signed for and on behalf of ECICS Limited

Authorised Signatory

Important Notice

- i) Policyholders are hereby warned that it shall be unlawful for any person to use or cause or permit any other person to use a Motor Vehicle without a valid insurance under the Act
- ii) On the sale of a Motor Vehicle, Policyholders most surrender all insurance papers issued including the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189).
- iii) The Certificate of Insurance and the Policy will cease to be valid once the Motor Car has been sold or transferred,
- iv) The Payment Before Cover Warranty or Premium Payment Warranty found in the Policy must be complied with otherwise there would be no liability under the Policy and Certificate of Insurance.

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