

## 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 First Submission .....	27/06/2024 16:48 (SGT)
Reported by .....	Actual Driver
Date of Accident .....	27/06/2024 13:45 (SGT)
Exact Location of Accident .....	18 Tai Seng St, Singapore 539775
Additional Location Information .....	18 Tai Seng Building ,Carpark exit (before barrier)
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SLF6757L
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	YAN BEE NAH
NRIC No .....	S1456256G
Email Address .....	alannjy@gmail.com
Mobile Phone No .....	(Phone) +65-97271932
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Honda
Model .....	Jazz
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 - Claiming third party
Vehicle Category .....	Private car
Transmission .....	Auto
CC .....	1500

#### INSURANCE COMPANY

Name of Insurance Company .....	India International Insurance Pte Ltd
Policy Number / Cover Note Number .....	D19MPC0004658_04

#### DRIVER

Name of Driver .....	NG JIN YANG, ALAN
NRIC No .....	S8904076J
Date Of Birth .....	01/02/1989
Occupation .....	Indoor

Driving Pass Date .....	07/04/2008
Driving experience .....	16 YEARS AND 2 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-83390077
Alt. Phone Number .....	-
Email Address .....	alannjy@gmail.com
Address .....	BLK 383B YISHUN AVE 6 #08-826
Address complement .....	-
Postcode .....	762383
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Child
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) .....	2
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 .....	-

#### PASSENGER 1

Name .....	MAGGIE TAN
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

Please refer to the sketch plan.

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SKU2600P
Vehicle Manufacturer .....	Kia
Vehicle Model .....	-
Vehicle Variant .....	-

Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	YEE CHANG YEONG
NRIC No .....	S7918301F
Contact Number .....	(Phone) +65-98245533
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

**SKETCH PLAN**

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5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
6. 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.
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.

**8. Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

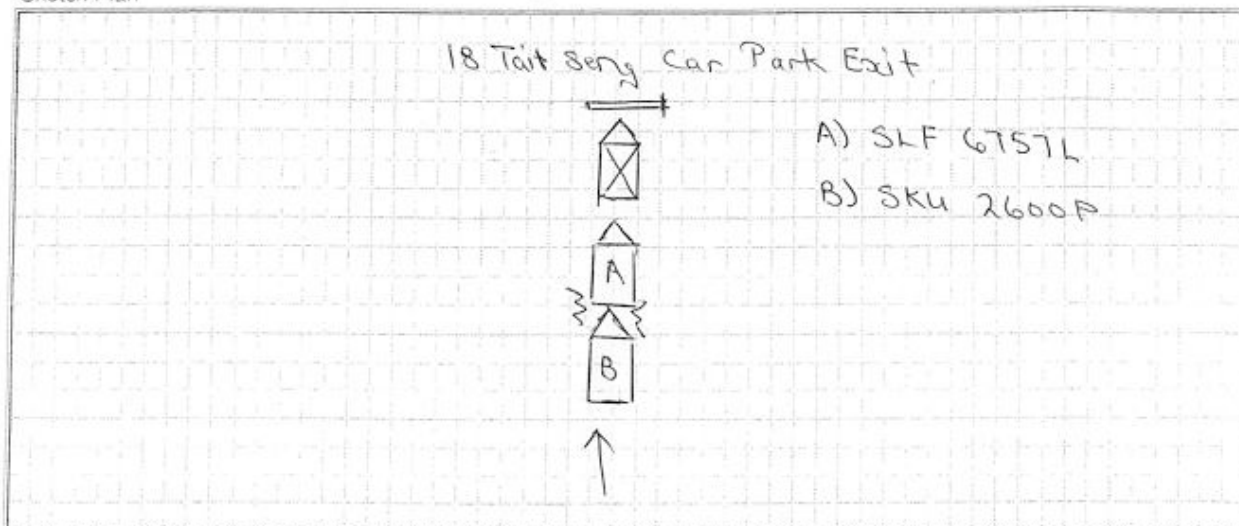
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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

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

Sketch Plan



Describe Circumstance of the Accident

I was waiting at the exit gantry for the vehicle in front of mine to exit when Veh (B) behind mine rear-ended onto my car.

3P claim @

EM SOLUTION PTE LTD

160 Sin Ming Drive  
#03-18/19 Sin Ming Autocity  
Singapore 575722  
Tel: 6456 0226 Fax: 6458 4500  
Email: emautosolution@singnet.com.sg

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/AD card)

SOH JIT HOON



















INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792K | GST Reg. No. M2-0078806-X

6 Raffles Quay #22-00 Singapore 048580

Office (65) 63476100 Email insure@iii.com.sg

Website www.iii.com.sg

## CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

<b>CERTIFICATE NO.: D19MPC0004658_04</b>	<b>COVER: COMPREHENSIVE</b>
<p><b>1. Index Mark and Registration Number of Vehicle</b> : SLF6757L</p> <p><b>Chassis No</b> : JHMGK5850HX200595</p> <p><b>2. Name of Policyholder</b> : YAN BEE NAH</p> <p><b>3. Effective date of Insurance</b> : 05 Sep 2023</p> <p><b>4. Expiry date of Insurance</b> : 04 Sep 2024</p> <p><b>5. Persons or Classes of Persons entitled to drive*</b></p> <p>(a) The Policyholder. The Policyholder may also drive a Motor Car not belonging to or hired (under a hire purchase agreement or otherwise) to him/her or his/her employer or his/her partner.</p> <p>(b) Any other person who is driving on the Policyholder's order or with his/her 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.</p> <p><b>6. Limitations as to use*</b></p> <p>Use only for social, domestic and pleasure purposes and for the Policyholder's business.</p> <p><b>The Policy does not cover</b></p> <p>a) Use for hire or reward.</p> <p>b) Use for racing, pace-making, reliability trial, speed-testing.</p> <p>c) Use for the carriage of goods other than samples in connection with any trade or business.</p> <p>d) Use for any purpose in connection with the Motor Trade.</p> <p><small>*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.</small></p>	
<p>Insured &amp; Named Drivers Excess Sect I : SGD600.00</p> <p>Unnamed Drivers Excess Sect I : SGD1,100.00</p> <p>Windscreen Excess : SGD100.00</p> <p>Hire Purchase Company : N.A</p> <p>FOR DRIVERS BELOW 21 YEARS OR ABOVE 69 YEARS OF AGE &amp;/OR LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, ADDITIONAL EXCESS OF \$2500/- ON SECTION I WILL BE APPLICABLE.</p>	
<p>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).</p> <p>Agent/Broker : B000018/COMFORTDELGRO INSURANCE BROKERS PTE LTD</p> <p>Date of Issue : 28/08/2023 14:57:25</p> <p>M.X. 1 - PRIVATE CAR (INDIVIDUAL)</p> <div style="text-align: right; margin-top: 20px;">   <b>Nalini Venugopal</b>              MD &amp; CEO           </div>	