

## 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 .....	27/12/2024 14:35 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	27/12/2024 09:00 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	HOUGANG AVE 10
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SKQ5495C
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	NG BAN KEONG
NRIC No .....	S7960011C
Email Address .....	DANIEL_LEEHIN@YAHOO.COM.SG
Mobile Phone No .....	(Phone) +65-82223364
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Porsche
Model .....	MACAN 2.0 A/T ABS D/AIRBAG AWD
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 - Reporting only
Vehicle Category .....	Private car
Transmission .....	Auto
CC .....	1984
Vehicle Fuel .....	Petrol
First Registration Date .....	09/12/2014
Chassis no .....	WP1ZZZ95ZFLB12439
Effective Date/Time of Ownership .....	24/09/2022 01:09 (SGT)

#### INSURANCE COMPANY

Name of Insurance Company .....	Great American Insurance Company
Policy Number / Cover Note Number .....	MOMVP000005539-01-000

#### DRIVER

Name of Driver .....	NG BAN KEONG
NRIC No .....	S7960011C
Date Of Birth .....	26/07/1979
Occupation .....	Outdoor
Driving Pass Date .....	14/12/1999
Driving License Pass Class .....	3
Driving License Validity .....	Valid
Driving experience .....	25 YEARS
Gender .....	Male
Mobile Number .....	(Phone) +65-82223364
Alt. Phone Number .....	-
Email Address .....	DANIEL_LEEHIN@YAHOO.COM.SG
Address .....	BLK 411 HOUGANG AVENUE 10 11-1012 SINGAPORE 530411
Address complement .....	-
Postcode .....	-
Is the driver the policyholder? .....	Yes
If No, Relationship of the Driver with the Insured .....	-
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 - Major/Minor Rd
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) .....	1
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 .....	-

#### 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

WHILE I CAME OUT FROM PARKING LOT. VEHICLE B (SHD 6428 U) COME FROM LEFT VERY FAST SPEED. I ACCIDENTALLY COLLIDED REAR RIGHT OF HIS CAR.

#### 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 .....	SHD6428U
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Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Taxi
Name of Driver .....	-
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	CAR B
No. Of Passenger (Including Driver) .....	-

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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.

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

Hand-drawn diagram of a building layout on graph paper. The building is a rectangle divided into a grid of 10 columns and 10 rows. The leftmost column is labeled 'A' and the rightmost column is labeled 'B'. The top row is labeled '1' and the bottom row is labeled '10'. The middle section is labeled 'HONGKONG AVE 10'. To the right of the building, there are two labels: 'A: SKQ 5495C' and 'B: SHD 6428U'.

## Describe Circumstance of the Accident

While i came out from parking lot. vehicle B (SHD 64284) come from left very fast speed. I accidentally collided rear right of his car.

## Declaration

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

Drill 25/24 2.20pm

Policyholder's Signature / Date & Time

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



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































## CERTIFICATE OF INSURANCE

\* Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) \* Motor Vehicles (Third Party Risks and Compensation) Rules, 1995  
\* Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third Party Risks) Rules, 1995 (Malaysia) Road Transport (Windscreen) Act, 2019 (Malaysia)

### Policy Details

Certificate Number	: MOMVP000005539-01-000	Cover	Private Car (Comprehensive)
Registration Number	: SKQ5495C	Chassis Number	: WP1ZZZ95ZFLB12439
NCD Entitlement	: 50% No Claim Discount	Engine Number	: 083313
Policyholder Name	: Ng Ban Keong		
Hire Purchase	: Toyota Financial Services Singapore Pte. Ltd.		
Period of Insurance	: From 09/12/2024 (00:00) To 08/12/2025 (23:59) (Both Dates Inclusive)		

### Persons or Classes of Persons entitled to Drive

- The Policyholder
- Any person who is driving on the Policyholder's order or with their permission

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor or so has been Vehicle 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

### Limitations as to Use

Use only for social, domestic and pleasure purposes and for Policyholder's business  
This Policy does not cover:

- Use for Hire and Reward
- Use for racing, pace making, reliability trial or speed testing
- Use for carriage of goods (other than samples) in connection with any trade of business
- Use for any purpose in connection with Motor Trade

\* 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

Excess (Section 1)	: i) SGD 3,500.00 - Any workshop ii) SGD 7000.00 - Dealer workshop	Workshop	: Any Workshop
Excess (Section 2)	: N/A	Off Peak Car	: No
Windscreen Excess	: SGD 500.00	NCD Protection	: Yes

### Driver Details

Main Driver	: Ng Ban Keong
Named Driver 1	: N/A
Named Driver 2	: N/A
Named Driver 3	: N/A
Name of Intermediary	: LCH Insurance Brokers Pte. Ltd.
Date of Issue	: 14/11/2024

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

Signed for and on behalf of

**Great American Insurance Company**



Authorised Signatory  
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