

## 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 .....	01/07/2024 17:57 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	29/06/2024 16:38 (SGT)
Exact Location of Accident .....	Near 269 Geylang Rd, Singapore 389323
Additional Location Information .....	ALONG GEYLANG ROAD TWDS LOR 13 GEYLANG
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SNH4060S
-----------------------------------	----------

#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	JEFFREY MATIUS
NRIC No .....	S7919134E
Email Address .....	JULIANTHEBALDMAN@GMAIL.COM
Mobile Phone No .....	(Phone) +65-88927903
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Byd
Model .....	E6 (ME-02)
Variant .....	-
Exact purpose for which vehicle was being used at time of accident .....	Private hire
Are you claiming under your own insurance policy for repair to your vehicle? .....	No - Reporting only
Vehicle Category .....	Private hire
Transmission .....	Auto
CC .....	0

#### INSURANCE COMPANY

Name of Insurance Company .....	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number .....	DMHCSNW00022592300

#### DRIVER

Name of Driver .....	JEFFREY MATIUS
NRIC No .....	S7919134E
Date Of Birth .....	27/06/1979
Occupation .....	Indoor

Driving Pass Date .....	07/12/2009
Driving experience .....	14 YEARS AND 6 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-88927903
Alt. Phone Number .....	-
Email Address .....	JULIANTHEBALDMAN@GMAIL.COM
Address .....	816 KEAT HONG LINK
Address complement .....	14-71
Postcode .....	682816
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

#### REFER TO SUMMARY & SKETCH PLAN

#### 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 .....	PBW3435P
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Motorcycle
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**

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 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)**

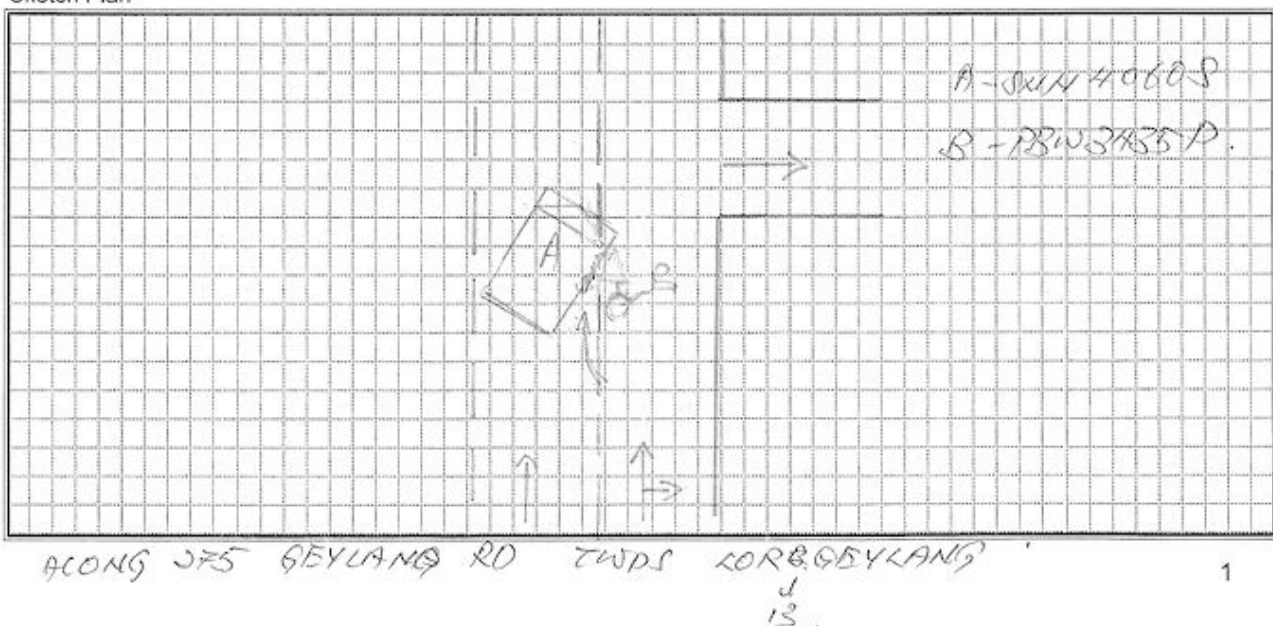
I understand, acknowledge, agree and consent that:

- (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

ON 29-06-2024 @16:38HRS, I WAS DRIVING MY VEHICLE A (SNH4060S) ALONG GEYLANG ROAD AND INTENDED TO TURN TO LOR 13 GEYLANG TO PICK UP A PASSENGER. I SLOW DOWN MY VEHICLE A (SNH4060S), SIGNAL RIGHT TO ENSURE TRAFFIC WAS CLEAR AND SAFE FOR ME BEFORE TURNING RIGHT TO MY DESIGNATION. UPON CONFIRMATION THAT IT IS SAFE TO TURN, HOWEVER, DUE THAT THERE ARE PEDESTRIANS CROSSING ACROSS THE ROAD, I STOPPED MY VEHICLE A (SNH4060S), TO GIVE WAY TO THE PEDESTRIANS CROSSING BEFORE I TURN RIGHT. AFTER THE PEDESTRIANS HAS CROSSED THE ROAD, I PROCEED TO TURN RIGHT AFTER ENSURE THAT TRAFFIC WAS CLEAR AND SAFE FOR ME. WHILE I WAS MAKING A RIGHT TURN, MOTORCYCLE B (PBW3435P) CAME FROM BEHIND AND HIT ONTO THE RIGHT SIDE PORTION OF MY VEHICLE.

## I WISH TO STATE THE FOLLOWINGS:-

1. On my right side, there were vehicles parked at the 1st Lane, hence i could not filter to the 1st Lane.
2. Rider is seen behind your vehicle the whole time with his feet down. Usually riders do this cos they intend to stop and balance the bike. But traffic was heavy and the lane was clear in front and side of him, and speed confirmed higher, so no chance of toppling but feet still down.
3. After I signal, and slow down, the rider moves to the right lane. The rider's movement is immediate, not gradual.
4. The last observation I almost missed. If you replay the footage, you'll see the rider speed up slightly to catch up, then slow down well before the impact. Observe the jerk in the bike about 2 to 3 secs before the impact. Considering the speed of his vehicle, it would be an easy thing to full brake but he didn't
5. On your part, I would say exceptional driving. Cos if you had cut into the right lane where the vehicles are parked, potential for an accident to happen. If someone opens the door, tio liao. Or random banglah walk out, confirm tio gao gao. So your distance is good.



## 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)







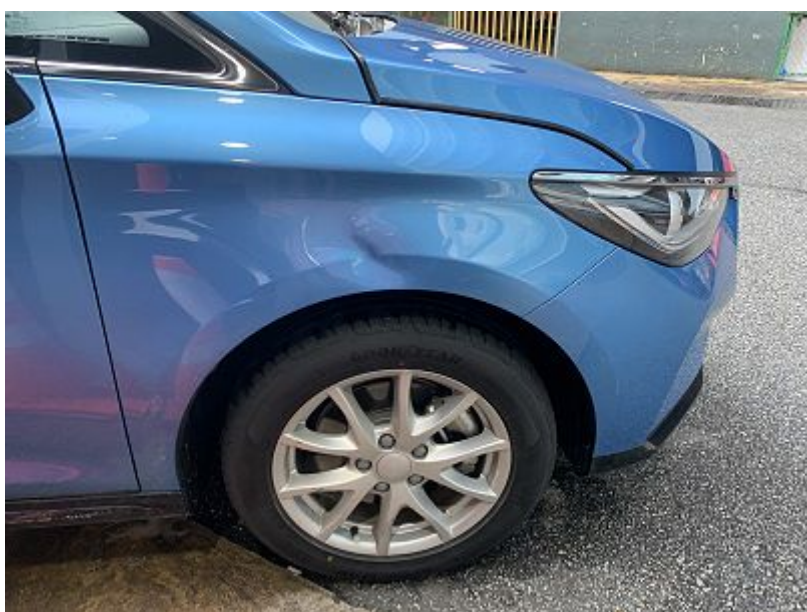


















中国太平保险(新加坡)有限公司  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Hire Car

MZ406L/B

## 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)

N SN

AN0714A

Cov. Type:C

CERTIFICATE No.	DMHCSNW00022592300	Engine No.: BYD1814TZSF322011914 Chassis No.: LC0CE4DC1N0270054
1. Index Mark and Registration Number of Vehicle	SNH4060S	AUTOSAFE *****
2. Name of Policy Holder	JEFFREY MATIUS	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	26/10/2023 (00:00:00)	Excess Sect. I (Outside Singapore) \$S1,500.00 Excess Sect. II \$S1,250.00
4. Date of Expiry of Insurance	25/10/2024	Excess Sect. II (Outside Singapore) \$S2,500.00 EX ON WINDSCREEN \$S100.00
5. Persons or Classes of Persons entitled to drive*	As per Named Driver(s) stated below. 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.  JEFFREY MATIUS	
6. Limitations as to use:	(1) Use for the carriage of passengers or goods in connection with the Policyholder's business. (2) Use for social domestic pleasure purposes and business purposes of any person to whom the vehicle is hired.  The Policy does not cover (1) Use for racing, pace-making, reliability trial or speed-testing. (2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.	
HIRE PURCHASE CO. : ONE CREDIT 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: UNIVERSAL ALLIANZE PRIVATE LIMITED

Authorised Officer

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)  
3 Anson Road #16-00 Springleaf Tower Singapore 079909

Authorised Signatory

6389 6111

6222 1033

www.sg.cntaiping.com