

## 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 .....	02/08/2024 18:23 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	02/08/2024 07:08 (SGT)
Exact Location of Accident .....	KPE, Singapore
Additional Location Information .....	Along KPE (towards ECP) before Exit 9A
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SMY533T
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	TOH HUNG MENG (ZHUO HANMING)
NRIC No .....	S7905823H
Email Address .....	tohungmeng@gmail.com
Mobile Phone No .....	(Phone) +65-96300351
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Lexus
Model .....	UX200
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? .....	Yes
Vehicle Category .....	Private car
Transmission .....	Auto
CC .....	1987
Vehicle Fuel .....	Petrol
First Registration Date .....	10/02/2021
Chassis no .....	JTHY35BH802035124
Effective Date/Time of Ownership .....	-

#### INSURANCE COMPANY

Name of Insurance Company .....	ECICS Limited
Policy Number / Cover Note Number .....	MPC24A00131100

#### DRIVER

Name of Driver .....	TOH HUNG MENG (ZHUO HANMING)
NRIC No .....	S7905823H
Date Of Birth .....	04/03/1979
Occupation .....	Indoor
Driving Pass Date .....	28/06/2002
Driving License Pass Class .....	3
Driving License Validity .....	Valid
Driving experience .....	22 YEARS AND 2 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-96300351
Alt. Phone Number .....	-
Email Address .....	tohungmeng@gmail.com
Address .....	24 SUMANG WALK, #03-05
Address complement .....	-
Postcode .....	828678
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 - Change/cross lane
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 THE ATTACHED STATEMENT

#### 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 .....	SLM8191T
Vehicle Manufacturer .....	Honda

Vehicle Model .....	Cr-v
Vehicle Variant .....	-
Vehicle Colour .....	Black
Vehicle Category .....	Private car
Name of Driver .....	-
Contact Number .....	(Phone) +65-85034571
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**

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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 2 Aug 2024, at about 0700 am, I was driving my car SMY 533 T along KPE towards ECP on the 2nd left lane. Before Exit 9A, I turned on my left indicator light about my intention to make a lane change to the 1st left lane (straight going lane). I proceeded to make the lane change after checking clear. When my car entered the left lane, I felt an impact on the front left of the car and saw a black car moving fast past me on the left.

The said black car then proceeded to go straight, past Exit 9A. I ~~so~~ sounded my horn and flashed my high beam at him several time to attract his attention. Only then he stopped at the road shoulder.

We alighted; the driver and passenger were not injured. I was not injured -

**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)



























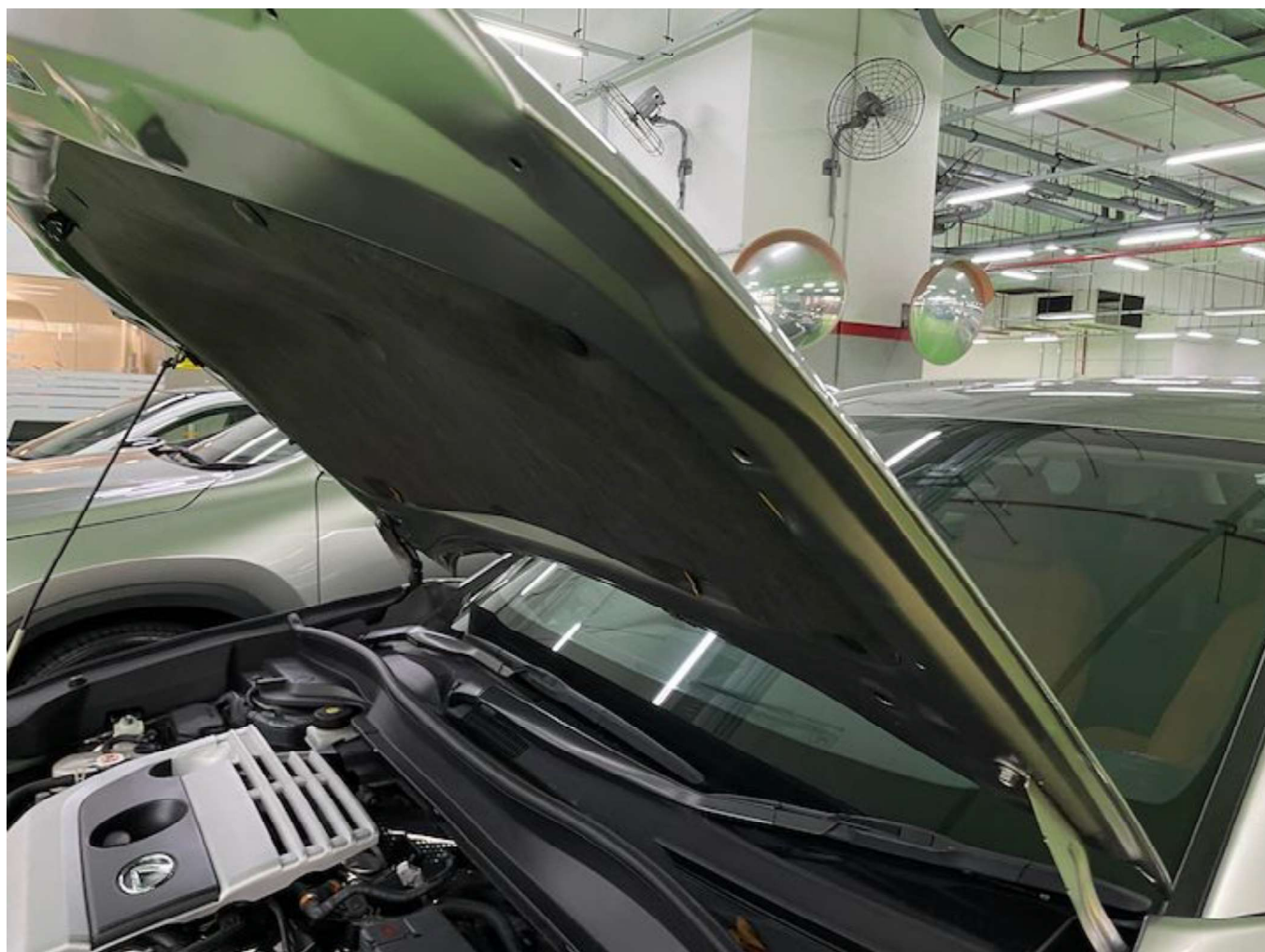






















**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No: SBOK24820007 Vehicle Registration No: SMY533T  
 Name (as shown in NRIC): TOH HUNG MENG NRIC/FIN/Passport No: 5XXXX8234  
 (\*Vehicle Driver/Policyholder) (\*) Please delete as appropriate  
 Address: BLK 24, SUMANG WALK, #02-05 Singapore (828678)  
 Contact (Tel): - Mobile No.: 9630 0351  
 Email Address: toh.hungmeng@gmail.com  
 Date of Accident: 02/08/2024 Time of Accident: 0708 hrs  
 Place of Accident: KPE (TOWARDS ECP) Before Exit 9A  
 Insurance Company: ECIKS

**(B) ADDITIONAL INFORMATION /AMENDMENTS:**

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

- CORRECT TRANSMISSION SHOULD BE "AUTO"

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_


\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Policyholder / Actual Driver's Signature  
Date:

  
 Reporting Centre Personnel's Signature  
 Name (as in NRIC/ID card): VINCENT CHUA  
 Date: 02/08/2024 15XX 1536







## CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks Compensation) Act (Chapter 139)  
 Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960  
 Road Transport Act, 1987 (Malaysia)  
 Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

**AUTHORISED  
WORKSHOPS**

MZ300-B  
 COMPREHENSIVE  
 ORIGINAL

<b>CERTIFICATE NO:</b> MPC24A00134100 <b>Agency Name:</b> INCHCAPE AUTOMOTIVE SERVICES PTE. LTD. (CPO) <b>Agency Code:</b> A0000801	<b>Chassis No:</b> JTHY35BH802035124 <b>Engine No:</b> M20AN257274								
<b>1. Index Mark and Registration Number of Vehicle:</b> SMY533T									
<b>2. Name of Policyholder:</b> TOH HUNG MENG (ZHUO HANMING)									
<b>3. Period of Insurance (both dates inclusive):</b> 03 April 2024 to 09 August 2025									
<b>4. Persons or Classes of Persons entitled to drive:</b> a) The Policyholder and all Named Drivers declared under the Policy. 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 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.									
<b>5. Limitations as to use:</b> 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, race, 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.									
<b>6. EXCESS APPLICABLE</b> <table style="width: 100%;"> <tr> <td style="width: 80%;">WINDSCREEN</td> <td style="width: 20%; text-align: right;">SGD 100.00</td> </tr> <tr> <td>SECTION I - STANDARD EXCESS (ANY AUTHORISED DRIVER)</td> <td style="text-align: right;">SGD 750.00</td> </tr> <tr> <td colspan="2"><b>ADDITIONAL EXCESS:</b></td> </tr> <tr> <td>SECTION I - YOUNG, ELDERLY OR INEXPERIENCED DRIVERS EXCESS (AGE &lt;26, &gt;70 OR HOLDS A VALID DRIVING LICENSE FOR &lt;2 YEARS)</td> <td style="text-align: right;">SGD 3,000.00</td> </tr> </table>		WINDSCREEN	SGD 100.00	SECTION I - STANDARD EXCESS (ANY AUTHORISED DRIVER)	SGD 750.00	<b>ADDITIONAL EXCESS:</b>		SECTION I - YOUNG, ELDERLY OR INEXPERIENCED DRIVERS EXCESS (AGE <26, >70 OR HOLDS A VALID DRIVING LICENSE FOR <2 YEARS)	SGD 3,000.00
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<b>7. Hire Purchase Company:</b> OVERSEA-CHINESE BANKING CORPORATION LIMITED									
Signed for and on behalf of EC/CS 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 must 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 that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 139).
- iii) The Certificate of Insurance and the Policy will cease to be valid once the motor vehicle 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.