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 Authorised 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 ability.
- 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 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 Report	18/11/2017 12:16		
Date Of Accident	17/11/2017 10:00		
Exact Location Of Accident	CAUSEWAY TWDS MALAYSIA CHECKPOINT		
Country/State of Loss	SINGAPORE		
	DETAILS OF OWN VEHICLE		
Vehicle Registration Number	EW8686M		
Insured/Policyholder			
Name Of Registered Owner	NG BAY KOON		
NRIC No	S1312603H		
Email Address	NOEMAIL		
Mobile Phone No	(LOCAL) +65-90218649		
Alternative Phone No	OFFICE-NOPHONE		

Vehicle Particulars

Manufacturer **TOYOTA** Model **ESTIMA**

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

If No, Please state action to be taken THIRD PARTY Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company TOKIO MARINE INSURANCE SINGAPORE LTD

Type Of Coverage **COMPREHENSIVE**

Fleet Policy NO

Policy Number 17-MW002843-R02

Cover Note Number

Driver

Name of Driver NG BAY KOON NRIC No S1312603H Date Of Birth 23/02/1958 **INDOOR** Occupation **Date Of Driving Pass** 17/05/1977

40 YEARS AND 6 MONTHS **Driving Experience**

Gender MALE

Mobile Number (LOCAL) +65-90218649

Fax Number

Contact Number OFFICE-NOPHONE

EMail Address NOEMAIL Address 107A LORONG J TELOK KURAU

Postcode 425936

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

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 this accident? NO
Was any body injured in the Accident? NO
Was any other material or property damaged? YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? NO
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLK1399T

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver MR HUZAIFA

NRIC/Passport Number

Contact Number 94742560

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 1

Details of Witness

Name

Phone Number

Email Address

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

EN 8882M

- 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 Authorised 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. The 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 lodgment 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:

- 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")
- 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
- 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.
- my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

(ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

Sketch Plan Pg. 2

SKETCH PLAN			
Date of Accident: 1 7 NOV 201	7 Time: 10,000m	Location: Chuseway	towards Malgysia Checkpoint
My Vehicle A: EW 8686 M	Vehicle B : SUK 1399 T	Vehicle C/Others :	Nil
		-444	+-1
			++
		A - EW SC	96 M (Alone)
	HA		
		3 - SEK 139	9 T (1 Female Pax)
	1 3		
			11-11-1
			++
DESCRIBE CIRCUMSTANCES OF TH	IE ACCIDENT		Annual Control of the
On the above date.	time and loggition	t was alained and	1/01/01/0
		,	
CA-EW BGBG M) and	Tame mavering on	ong vandiands cause	way tawanos
Malaysia Cheakpoint.	inattic was conges		,,
due to front vehicles			3 Strong impact
coming from my vehi	icie nean . I gr	otten of from n	ly vehicle and
realised there was	a private can		3 Collided onto
my vehicle near.	,	ne involved . I w	
	•		
and there was a		on inside vahiole	B at the
material time of	the accident.		
That IS all.			
() Claim OD/TD . Al II . A	(/a) . a= A		
() Claim OD/TP at Ah Lim M	otor (v) Claim OD(FP)	at other workshop () R	eporting Only
Remarks: Please forward a cop	ov of my efile accident n	enort to:	
My workshop: Lim Tan M	oton Pte Utd		
email address : richard @ Itr	m - 80		
a mysen .	, 0		
email address:			
Note: Please take note that you claim under your own policy. K	ir insurer have 14 days to	imeframe for you to sub	mit own damage
		wir msurer for more into	A CO. *
DECLARATION I/We declare the foregoing particulars a	E	W 8787 W	SELLA SA
i/we declare the foregoing particulars a	re true in every respect.	N 0000N1	12 2061
18 H . 2 /m		6	ANTHA *
PoliCyholdey's Signature Date & Time:	Driver's Signature (If driver is not the policyholde	Reporting Cel r) Name:	ntre Personnel's Signature
	Date & Time: (2) (1) 1	NRIC/FIN No.	Mau
1 8 NOV 2017	20[].4)		

- - 1 8 NOV 2017

Policy Holder-Driver's Particulars Pg. 1

Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No.: M2-0000023-4) 20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com

A member of the Tokio Marine Group



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)

Policy No.: 17-MW002843-R02 (Private Motor Car)

1. Index Mark and Registration Number of Vehicle

Chassis No.: ACR507115793

2. Name of Policyholder

MR NG BAY KOON

3. Effective date of the Commencement of Insurance for the purposes of the Act

19/04/2017

EW8686M

4. Date of Expiry of Insurance

18/04/2018

- 5. Persons or Class of Persons entitled to drive*
 - (a) The Policyholder.
 - (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 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.
- 6. Limitations as to use*

Use only for social domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or reward, racing, pace- making, reliability trial, speed-testing or 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.

* 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.

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).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Account: 1942DDA

Insurance Plan: Limit for total loss or theft: Comprehensive Approved Workshop Plan

Policy Excess:

Prevailing Market Value Own Damage Claims

SGD 1,000

Windscreen Excess SGD 100

Financial Interest:

UNITED OVERSEAS BANK LIMITED

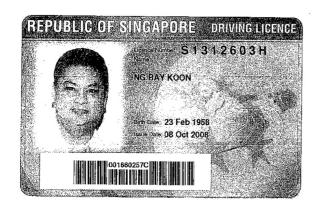
Tokio Marine Insurance Singapore Ltd.

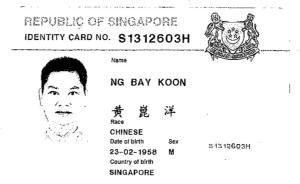
Authorised Signature

User Name: Intermediaries from TM ()

Printed 29/03/2017

Policy Holder-Driver's Particulars Pg. 2





YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

NP 428A

Class 2B Motorcycles =< 200 cc 04 May 1977
Class 2 A Motorcycles between 201 cc and 400 cc 04 May 1977
Class 2 Class 3 Motorcycles > 400 cc 04 May 1977
Class 2 Motor Cars=< 3000kg with =<7 passengers, exclusive 10 fithe driver; and other motor vehicles =< 2500kg
'Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg
'Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg

PASS DATE

© № **S13**12603H

24-06-2011

107A LORONG J TELOK KURAU SINGAPORE 425936

Page 6 of 16



















