

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 withholding 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	27/11/2017 12:34
Date Of Accident	26/11/2017 22:15
Exact Location Of Accident	ALONG TAMPINES AVE 10
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJS8076K
Insured/Policyholder	
Name Of Registered Owner	RICA LEASING PTE LTD
Co Reg No	200510430K
Email Address	SUSAN@RICA.COM.SG
Mobile Phone No	(LOCAL) +65-98188223
Alternative Phone No	OFFICE-62662307

Vehicle Particulars

Manufacturer	TOYOTA
Model	ALLION
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
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	QBE INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	8-V0014370-MVA
Cover Note Number	

Driver

Name of Driver	KANARIS BIN RADEN JUSUE
NRIC No	S1667954B
Date Of Birth	18/11/1964
Occupation	INDOOR
Date Of Driving Pass	31/08/1992
Driving Experience	25 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96257754
Fax Number	
Contact Number	
EEmail Address	KANARISRJ@GMAIL.COM

Address	BLK 155 YISHUN STREET 11 #11-104
Postcode	760155
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE 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	SHB5237X
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJG7607Z
Vehicle Make/Model/Colour	

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

SKETCH PLAN

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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.
- (d) 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.
- (e) 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: 27 NOV 2017



Driver's Signature

(If driver is not the policyholder)

Date & Time: 27/11/2017

e 1230 lw

27 NOV 2017

Reporting Centre Personnel's Signature

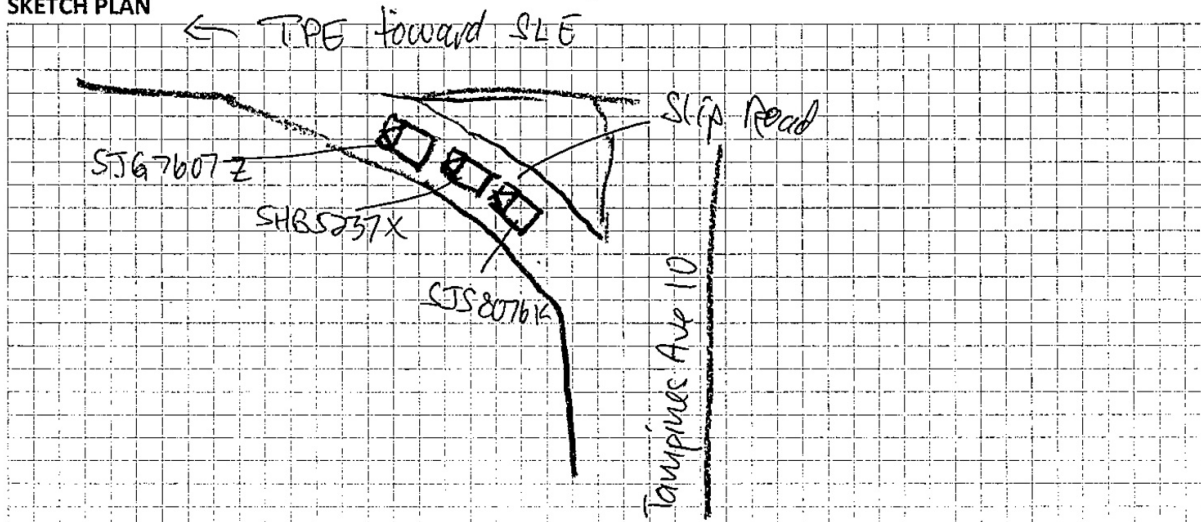
Name:

Poh Kwee Choo

NRIC/FIN No.:

S6840583A

SKETCH PLAN

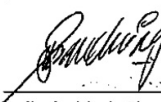




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

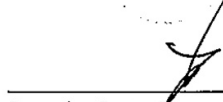
On 26/11/2017 at about 2215 hrs, I was driving m/car reg no. SJS 8076 K along Tampines Ave 10 and entering slip road joining TPE (towards SLE). It was slow and heavy traffic flow. While at the slip road one m/taxi SHB 5237 X in front of me stopped suddenly and I quickly applied my car brake but could not stopped in time. As a result, my car hit the rear taxi, SHB 5237 X and the taxi moved forward to hit another car, SJG 7607 Z. Damaged to SJS 8076 K is badly damaged at the front portion. The taxi SHB 5237 X had dented on rear and front bumper while the other car SJG 7607 Z had dented at rear bumper. No injuries for all drivers.

DECLARATION

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

Policyholder's Signature  
Date & Time: 27 NOV 2017

Driver's Signature 
(If driver is not the policyholder)
Date & Time: 27/11/2017
e 1230 hrs

Reporting Centre Personnel's Signature 
Name: Poh Kwee Choo
NRIC/FIN No.: S6840583A

QBE Insurance (Singapore) Pte Ltd

A member of the worldwide QBE Insurance Group - Unique Entity No. 198401363C

1 Raffles Quay, #29-10 South Tower, Singapore 048583
Tel: 65-6224 6633 Fax: 65-6533 3270
GST Registration No.: M200644018
www.qbe.com.sg



Certificate of Insurance

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

Certificate No. **8-V0014370-MVA** Account Name **LONG SEE YONG** MCI Type **MZ400**

1 Index Mark and Registration Number of Vehicle or Chassis No: **SJS8076K**

2 Name of Policyholder **RICA LEASING PTE LTD**

3 Effective date of Commencement of Insurance for the purpose of the Regulations **14/12/2016**

4 Date of Expiry **06/09/2018**

5 Person or Classes of Person entitled to drive*

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 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 the 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 for the carriage of passengers or goods in connection with the Policyholder's business.

Use for social domestic and 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


(3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

7 Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risk and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia) are not to be included under these headings

Hire Purchase : UNITED OVERSEAS BANK LIMITED

QBE Insurance (Singapore) Pte Ltd

Date of Issue: 14/12/2016


Authorized Signature


DRIVER NRIC & DRIVING LICENCE Pg. 1

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1667954B**
 Name: **KANARIS BIN RADEN JUSUE**

Birth Date: **18 Nov 1964**
 Issue Date: **27 Apr 2006**

001414771G



REPUBLIC OF SINGAPORE
 IDENTITY CARD NO. **S1667954B**

Name: **KANARIS BIN RADEN JUSUE**

Race: **INDONESIAN**
 Date of birth: **18-11-1964** Sex: **M**
 Country of birth: **SINGAPORE**


S1667954B

ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

Class	Description	PASS DATE
Class 2B	Motorcycles ≤ 200 cc	26 Jul 1989
Class 2A	Motorcycles between 201 cc and 400 cc	26 Jul 1989
Class 3	Motor Cars ≤ 3000kg with ≤ 7 passengers, exclusive of the driver; and other motor vehicles ≤ 2500kg	31 Aug 1992
Class 4	*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	01 Oct 2004

NP 428A

Licence No: S1667954B



387138

NRIC No: **S1667954B**

Date of issue: **27-04-2006**

Address: **APT BLK 155 YISHUN STREET 11
 #11-104
 SINGAPORE 760155**

Accident Photo



Accident Photo



Accident Photo



CHASSIS NUMBER

