

417169686

[illegible]

MA/708024

MA/708024		Invoice Preparation Checklist	Yes/No	Initials
Insurance Particulars:		1) AR: Accident Reporting (\$30)		
Driver/Owner:		2) DA: Damage Assessment (\$190)	INC (\$40)	
Contact No:		3) TP: Towing Fee	\$40/\$45	
Damaged Portion:		4) FT: Follow-Through Survey	\$120	
		5) FT: Follow-Through Survey (Re-survey)	\$10	
		*Determining against INC Only (Start 10 Jan 2003)		
		6) TR: Re-inspection	\$75	
		7) NI: NI & DA + SMRT Survey	\$160	
		8) NTUC Additional Services:		
		ON:		
		*NI: Courtesy Car/ Tpl Allowance	\$5	
		*NI: Repair Coordination	\$10	
		*NI: Post Repair Inspection	\$75	
		*NI: DV/ Collect Excess Coordination	\$5	
		TP (NI) / TP (IN) INC against INC	\$20	
		9) NI: Late Mobile	10	
		Invoice dated	File Charged	
		Invoice dated	Not Charged	
				MA/708024



## 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	27/12/2017 09:38
Date Of Accident	25/12/2017 13:00
Exact Location Of Accident	JUNCTION B/F BEDOK NORTH AVE 3/BEDOK RESERVOIR RD
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SFV1541L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	UE-TAY SZE YIN
NRIC No	S7522140A
Email Address	DAVIDCHAIWK@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-96199806
Alternative Phone No	OTHERS-93663229
<b>Vehicle Particulars</b>	
Manufacturer	TOYOTA
Model	WISH
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR
<b>Insurance Company</b>	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 80428707 ATT
Cover Note Number	
<b>Driver</b>	
Name of Driver	CHAI WEI KIAN DAVID (XIE WEIQUAN DAVID)
NRIC No	S7331048B
Date Of Birth	30/08/1973
Occupation	INDOOR
Date Of Driving Pass	19/05/1994
Driving Experience	23 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93663229
Fax Number	
Contact Number	OTHERS-96199806
Email Address	DAVIDCHAIWK@YAHOO.COM.SG

Address	15 RIVIERA DRIVE #07-17
Postcode	467205
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	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)	3
Passenger 1	NAME: : UE-TAY SZE YIN GENDER: : FEMALE
Passenger 2	NAME: : CHAI KAI WEN GENDER: : MALE

#### 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	SLB6349C
Vehicle Make/Model/Colour	HONDA FIT
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SIOW KEE LIN
NRIC/Passport Number	S0683733F
Contact Number	96201681
Address	
Postcode	



## 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 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:

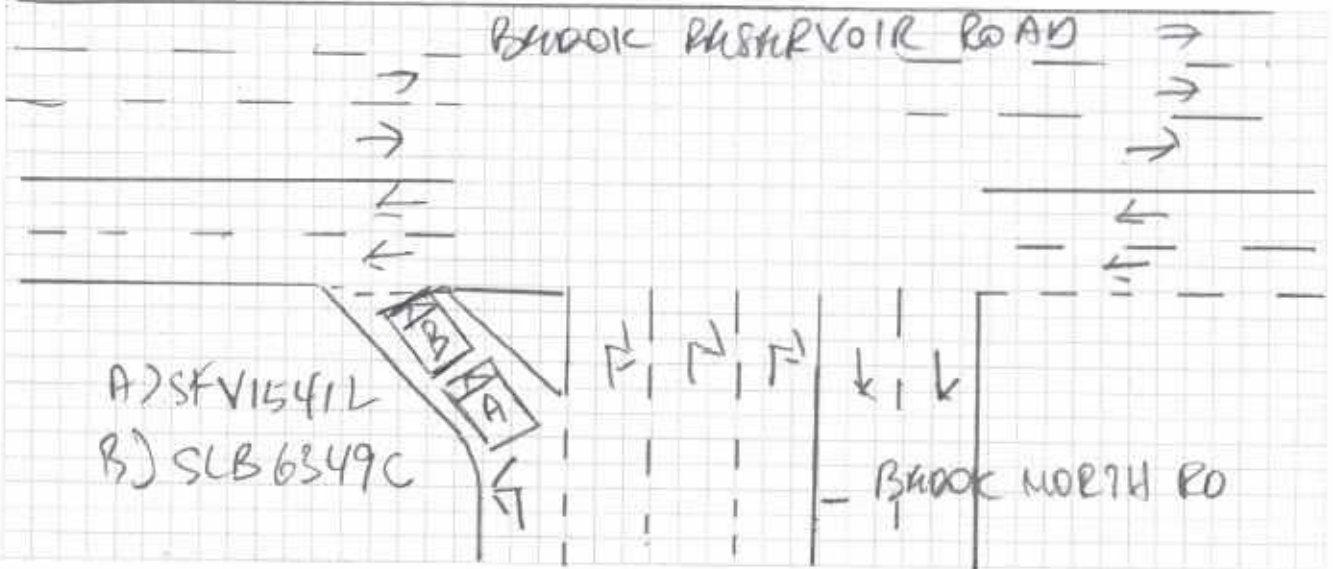
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "**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:

Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 27/12/2017  
9.40 a.m.

Reporting Centre Personnel's Signature  
Name: [Signature]  
NRIC/FIN No.: [Signature]

**SKETCH PLAN**



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

On 25th December 2017, I was driving along Bedok North Avenue 3 and about to turn into Bedok Reservoir Road. The car in front of my car suddenly jammed the brakes and I did not have time to react and my car dented his car. I asked him why he jammed his brakes and he says there is a bus coming. As I find that he is a very elderly driver, I did not pursue further. We promise not to report to insurance.

On 26th December, he called me and told me that he had reported to his insurance and wants to claim against me. I was very disappointed as he did not keep to his promise. This delayed my reporting to my insurance after 24 hours.

**DECLARATION**

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

<p>Policyholder's Signature</p> <p>Date &amp; Time:</p>	<p>Driver's Signature</p> <p>(If driver is not the policyholder)</p> <p>Date &amp; Time: 27/12/2017</p> <p>9.40 a.m.</p>	<p>Reporting Centre Personnel's Signature</p> <p>Name: Rosd. W. HAN</p> <p>NRIC/FIN No.:</p>
---	--	--



# ACCIDENT STATEMENT

ACCIDENT DATE: 25/12/2017 (DD/MM/YYYY), TIME: 13:00 (HH:MM)

LOCATION: Junction between Bedok North Avenue 3 and Bedok Reservoir Road.

## 1. DETAILS OF VEHICLE

a) VEHICLE NUMBER: SFV1541 L  
 b) INSURANCE COMPANY: MS IG  
 c) POLICY NUMBER: A 80428707 ATT  
 d) POLICY TYPE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT  
 e) MAKE & MODEL: Toyota Wish  
 f) TYPE: (SALOON) / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS  
 g) VEHICLE CATEGORY: PRIVATE / COMMERCIAL / MOTORCYCLE  
 h) PURPOSE OF USING AT ACCIDENT TIME: Family usage  
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) (NO)  
 IF NO, PLEASE STATE (THIRD PARTY CLAIM) (REPORTING ONLY)

## 2. INSURED / POLICY HOLDER

a) NAME: Ue Tay Sze Fin (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S7522140A CONTACT: 96199806  
 c) ADDRESS: Blk 15, Riviera Drive, #07-17, Singapore 467205

\* CONTINUE TO 3. d IF DRIVER ALSO POLICY HOLDER

## DRIVER

a) NAME: Chai Wei Kian David (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S733104PB CONTACT: 93663229  
 c) ADDRESS: Blk 15, Riviera Drive, #07-17, Singapore 467205

\* d) DATE OF BIRTH: 30/08/1973 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR) / OUTDOOR  
 f) DATE OF DRIVING LICENCE: 19 May 1994

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES/NO) (NO)  
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Husband

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS) Clear  
 b) ROAD SURFACE: (DRY / WET / OTHERS) Dry

6. WAS ANYBODY INJURED (YES/NO) (NO)

7. a) REPORTED TO POLICE (YES/NO) (NO)

IF YES, PLEASE STATE WHICH POLICE STATION:

## 8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: SLB 6349C MODEL: Honda Fit  
 b) DRIVER'S NAME: Siew Kee Lin  
 c) NRIC/FIN/PASSPORT: S0683733F CONTACT: 96201681

## 9. THIRD PARTY VEHICLE

d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
 e) DRIVER'S NAME: \_\_\_\_\_  
 f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

1) Ue Tay Sze Fin F  
 2) Chai Kai Wen M

# No of passengers  
 (including driver)  
(3)

# No of passengers  
 (including driver)  
(2)

# No of passengers  
 (including driver)  
( )

Email: davidchaiwke@yahoo.com.sg

Fax: \_\_\_\_\_

Video \_\_\_\_\_

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7331048B



Name

CHAI WEI KIAN DAVID  
(XIE WEIQUAN DAVID)

谢伟权

Race

CHINESE

Date of birth

30-08-1973

Sex

M

Country of birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Identity No. S7331048B

CHAI WEI KIAN DAVID  
(XIE WEIQUAN DAVID)

Birth Date: 30 Aug 1973

Issue Date: 20 Oct 2017



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7522140A



Name

UE-TAY SZE YIN

Race

JAPANESE

Date of birth

09-08-1975

Sex

F

Country of birth

SINGAPORE



4904757

NRIC No. S7331048B



Date of issue

14-11-2012

Address

15 RIVIERA DRIVE  
#07-17  
SINGAPORE 467205

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 3: Motor cars with unladen weight  $\leq$  3000kg with  $\leq$  7 passengers, exclusive of driver; and other motor vehicles with unladen weight  $\leq$  2500kg 19 May 1994



NP 428A



3769308

NRIC No. S7522140A



Date of issue

20-08-2005

15 RIVIERA DRIVE #07-17  
SINGAPORE 467205

NRIC No. S7522140A

Date: 10/02/2008

No: 5855544

**MSIG****MSIG Insurance (Singapore) Pte. Ltd.**

4 Shenton Way, # 21-01, SGX Centre 2, Singapore 058807

Tel +65 6827 7888, Fax +65 6827 7800

Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

## Certificate of Insurance

ROAD TRANSPORT ACT 1987 (MALAYSIA)  
 THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)  
 THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)  
 (REPUBLIC OF SINGAPORE)  
 THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)  
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.X.1  
 Individual Ownership

Toyota DriveElite  
 Comprehensive

Certificate No. A 80428707 ATT

Excess : SGD500

Windscreen Excess : SGD100

1. Index Mark and Registration Number of Vehicle

SPV1541L

2. Name of Policyholder

Ue-Tay Sze Yin

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

24/04/2017

4. Date of Expiry of Insurance

23/04/2018

5. Persons or Classes of Persons entitled to drive\*

Ue-Tay Sze Yin

Chai Wei Kian David

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

\* Provided that the person driving is permitted in accordance with the licensing or other laws or 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.

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 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.

**PLEASE NOTE ALL CLAIMS RELATED REPAIR MUST BE CARRIED OUT AT BORNEO MOTORS (S) PTE LTD OR AT ANY MSIG AUTHORISED WORKSHOP LISTED IN THE ATTACHED.**

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination or if the Certificate 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 (Cap. 189).

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) or any Amendment, Act or Acts passed in substitution thereof.

**MSIG Insurance (Singapore) Pte. Ltd.**

Approved Insurers

for Chief Executive Officer