

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	23/12/2017 13:48
Date Of Accident	22/12/2017 20:45
Exact Location Of Accident	TRAFFIC JUNCTION SERANGOON NORTH AVE 4 / 5
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGQ9740R
Insured/Policyholder	
Name Of Registered Owner	LAI WAN FONG
NRIC No	S1430656J
Email Address	LWF@LAIYEWSENG.COM.SG
Mobile Phone No	(LOCAL) +65-96620957
Alternative Phone No	OTHERS-96620957

Vehicle Particulars

Manufacturer	HONDA
Model	STREAM-1.8 (A)
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
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3006651700
Cover Note Number	

Driver

Name of Driver	MOHAMED NAINAR AHAMAD MOHIDEEN
NRIC No	S6878861G
Date Of Birth	21/05/1968
Occupation	OUTDOOR
Date Of Driving Pass	23/09/1996
Driving Experience	21 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96987294
Fax Number	
Contact Number	
Email Address	MOHIDEEN@LAIYEWSENG.COM.SG

Address	APT BLK 533 SERANGOON NORTH AVE 4 #05-235
Postcode	550533
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	RAINING
Road Surface	WET

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)	5
Passenger 1	NAME: : MUHAMAD AFZAL GENDER: : MALE
Passenger 2	NAME: : MUHAMAD AFFIQ GENDER: : MALE
Passenger 3	NAME: : V. BALA MURUGAN GENDER: : MALE
Passenger 4	NAME: : R.BALA MURUGAN 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

AS PER ATTACHED 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	SHC8937J
Vehicle Make/Model/Colour	HYUNDAI I40 COMFORT TAXI BLUE COLOUR
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	CHEW POH SOON

NRIC/Passport Number	S1495042G
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	REAR
No. Of Passenger (Including Driver)	1

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.

[Handwritten Signature]
23/12/17
10:28



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

As per Attachment 'A'.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving on Serangoon North Ave 4 ~~lane~~
2 lane Road and turning in to right side towards
Serangoon North Ave 5.

Accident happened at around 8.45pm and
heavy down pouring at that time. I am
driving at very slow speed

Taxi Stopped and I hit the back of Taxi
Due to heavy downpour was not able to stop at
time and visible poor.

67810300

Note : Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim
under your own comprehensive policy. Please check with your policy for more information.

DECLARATION

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

Policyholder's Signature
Date & Time:

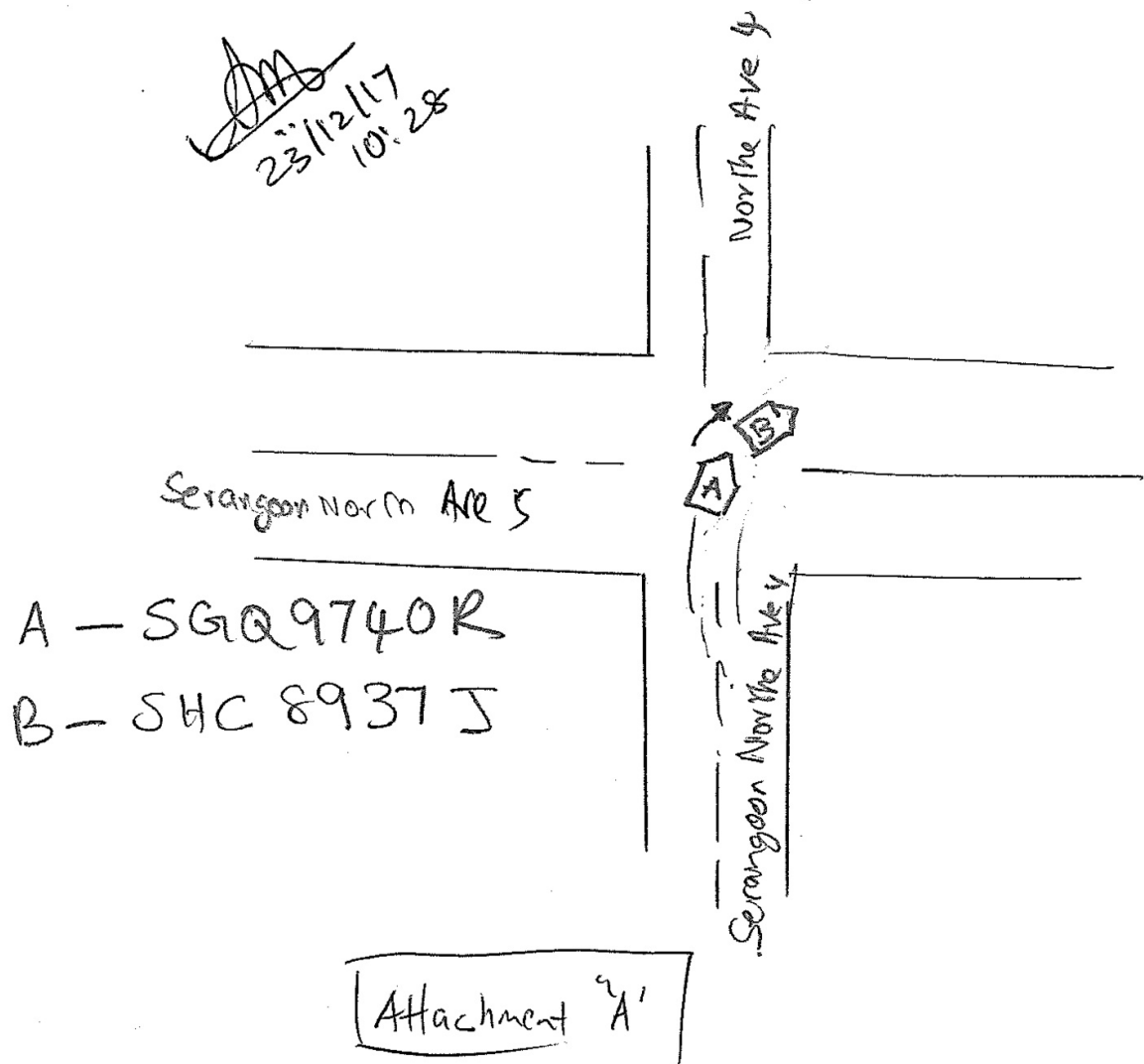
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

GIARMIC SketchPlanForm_V3

☒ Claim Own Policy () Claim Third Party () Reporting Only
() Claim OD/TP at other workshop ()

2



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

Class 2B Motorcycles ≤ 200 cc
 Class 3 Motor Cars ≤ 3000kg with ≤ 7 passengers, exclusive of the driver, and other motor vehicles ≤ 2500kg

EFFECTIVE DATE

23 Sep 1996
 23 Sep 1996



Licence No: S6878861G

NP 428A

A 749
 E 721

REPUBLIC OF SINGAPORE
 DRIVING LICENCE
 Licence Number: S6878861G
 Name: MOHAMED NAINAR AHAMAD MOHIDEEN
 Birth Date: 21 May 1968
 Issue Date: 18 Oct 2013
 002235967F

3050393
 NRIC No S6878861G
 Board Group O+ Date of Issue 07-01-1999
 Address
 APT BLK 533 SERANGOON NORTH AVENUE 4
 #05-235
 SINGAPORE 550533

REPUBLIC OF SINGAPORE
 IDENTITY CARD NO. S6878861G
 Name: MOHAMED NAINAR AHAMAD MOHIDEEN
 (செங்கை நைனார் அஹமத் முஹிதீன்)
 Race: INDIAN
 Date of Birth: 21-05-1968
 Sex: M
 Country of Birth: INDIA



中国太平
CHINA TAIPING
MOTOR PRIVATE CAR

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)

MX1F
N SN
AN0584A
COMPREHENSIVE
AUTOSAFE

CERTIFICATE No.	DMPCSN3006651700	Engine No : R18A1723951 Chassis No: RN61020996
1. Index Mark and Registration Number of Vehicle	SGQ9740R	
2. Name of Policy Holder	MR LAI WAN FONG	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	18 JANUARY 2017	NAMED DRIVERS EX SECT. I S\$750.00 IN ADDITION TO NAMED DRIVERS EX:
4. Date of Expiry of Insurance	26 JANUARY 2018	EX SECT. I - AGE <= 25 S\$3,000.00 EX SECT. I - AGE >= 26 S\$500.00 * AGE AS AT DATE OF ACCIDENT
5. Persons or Classes of Persons entitled to drive *		EX ON WINDSCREEN S\$100.00

(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.

6. Limitations as to use: *

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 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.

EXCESS WHICHEVER IS APPLICABLE FOR LOSSES OCCURRING OUTSIDE SINGAPORE (CONSTRUCTIVE TOTAL LOSS / THEFT) WILL BE DOUBLED.

ONE TIME WAIVER OF EXCESS FOR THE FIRST S\$500 WILL APPLY TO THE INSURED AND NAMED DRIVERS IN THE EVENT OF OWN DAMAGE CLAIM AT OUR AUTHORISED WORKSHOPS FOR EACH POLICY YEAR.

* 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.

Terry's Office
73 Jalan Seaview S438386
Tel / WhatsApp : 9127 8514
iisterry@gmail.com

Countersigned By:

Authorised Officer

Authorised Signatory

3RD PARTY TAXI



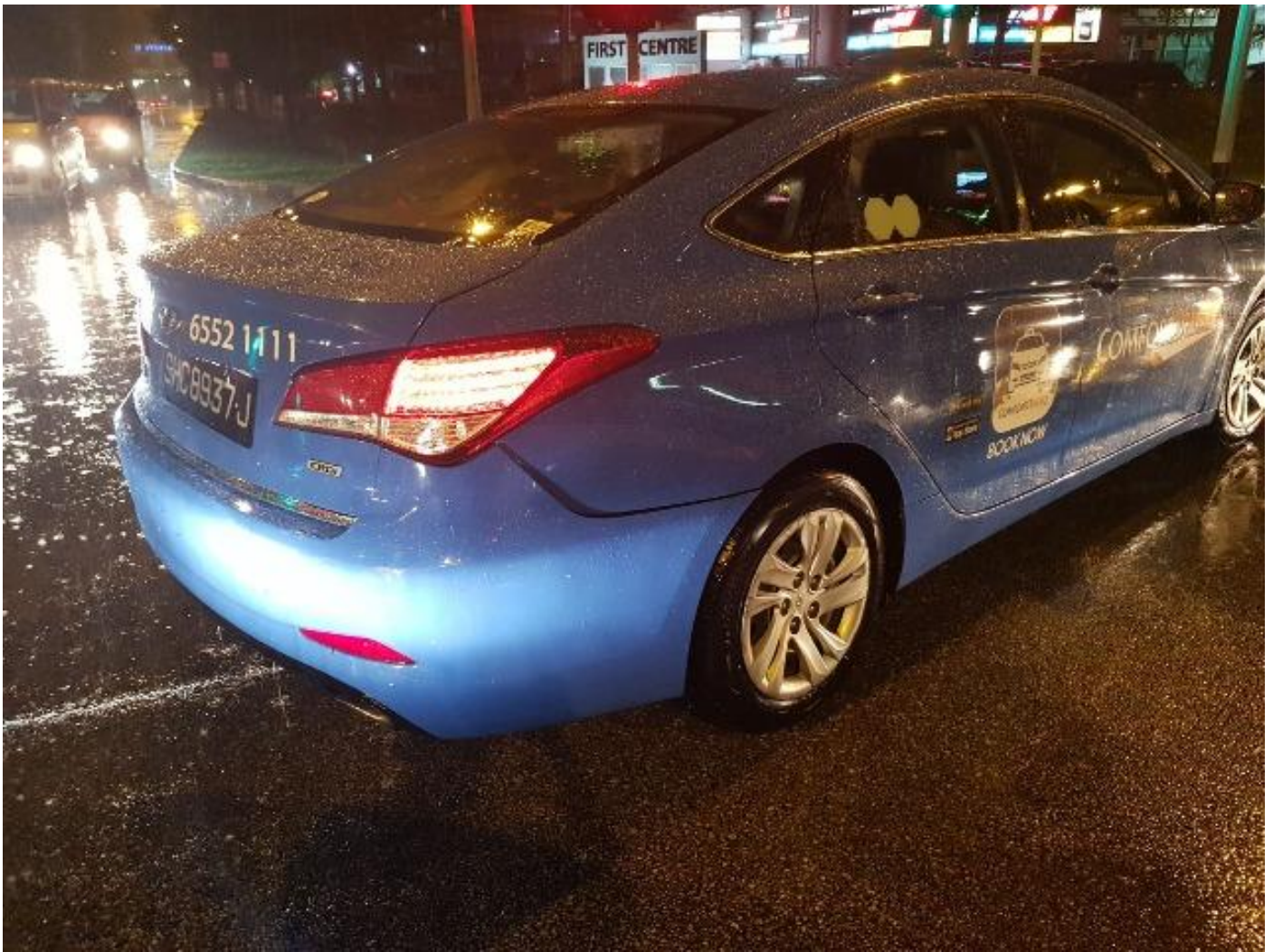
3RD PARTY TAXI



3RD PARTY TAXI



SCENE PHOTO



SCENE PHOTO



INSURED CAR



INSURED CAR



INSURED CAR CHASSIS NUMBER



INSURED CAR



INSURED CAR



INSURED CAR



INSURED CAR



INSURED CAR



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