

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	01/12/2017 11:25
Date Of Accident	30/11/2017 08:00
Exact Location Of Accident	ALONG PIE NEAR EUNOS EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJP7889D
Insured/Policyholder	
Name Of Registered Owner	CHE JIA JUN
NRIC No	S7821726Z
Email Address	INJUREYE@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-98752535
Alternative Phone No	OFFICE-98752535

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	LANCER 1.6 CVT SPORTS GLX AIRBAG 2WD 4DR
Exact Purpose for which vehicle was being used at time of accident	
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	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT/00350867
Cover Note Number	16/12/2016-15/12/2017

Driver

Name of Driver	WOO KUM YOKE
NRIC No	S8103382Z
Date Of Birth	30/01/1981
Occupation	INDOOR
Date Of Driving Pass	25/09/2009
Driving Experience	8 YEARS AND 2 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90706263
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address

Postcode

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 CHAIN COLLISION

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

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 SCL7752T

Vehicle Make/Model/Colour VW

Details Of Properties

Name of Driver TOO

NRIC/Passport Number

Contact Number 90217404

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 GBG6742S

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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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:

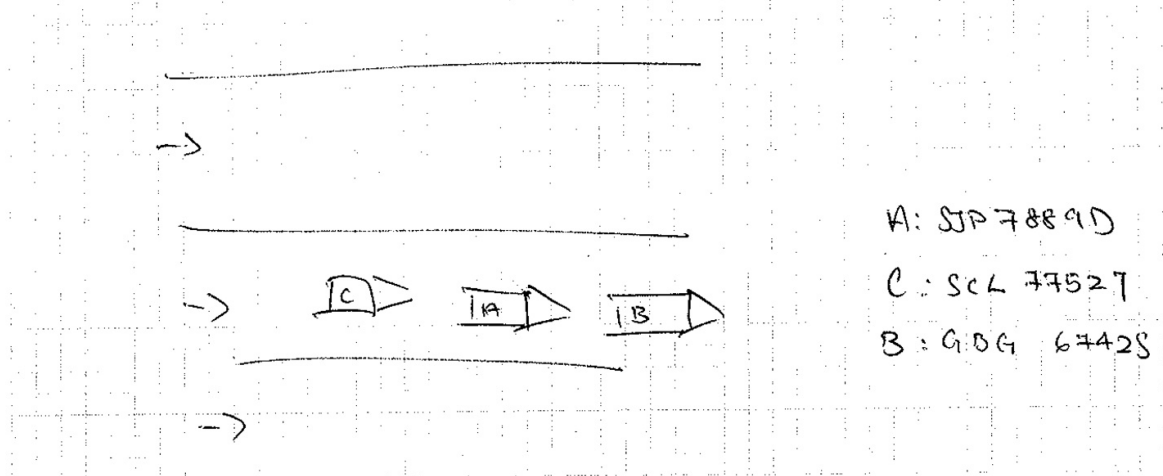


Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

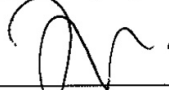
I was driving along PIE & vehicle B slowed down. I followed the same in slowing down. However vehicle C banged into me, causing my vehicle (A) to jerk forward, touching vehicle B.

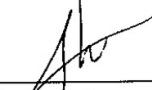
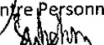
<p>You had been advised by workshop that in the event that you wish to claim against your own policy (OD claim), there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.</p>	Reporting Only
	Claim OD
	<input checked="" type="checkbox"/> Claim TP
	Claim OD / TP at other workshop

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.:

DRIVER DL

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8103382Z



Name
WOO KUM YOKE
(WU JINYU)
邱金玉

Race
CHINESE

Date of birth
30-01-1981

Sex
F

Country of birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S8103382Z


Name
WOO KUM YOKE
(WU JINYU)

Birth Date 30 Jan 1981

Issue Date 25 Sep 2009



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7821726Z



Name
CHE JIA JUN
(XU JIAJUN)
徐佳骏

Race
CHINESE

Date of birth
29-07-1978

Sex
M

Country of birth
SINGAPORE

3603739



NRIC No. S8103382Z



Date of issue
05-08-2004

APT BLK 301 TAMPINES STREET 32 #04-20
SINGAPORE 520301

NRIC No: S8103382Z Date: 19/03/2010 No: 6467599

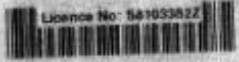
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE

Class 3 Motor Cars < 2000kg with < 7 passengers, exclusive of the driver; and other motor vehicles < 2500kg

25 Sep 2009

Licence No: S8103382Z



NP 428A

A9904829



NRIC No. S7821726Z



Date of issue
28-03-2001

APT BLK 301 TAMPINES STREET 32 #04-20
SINGAPORE 520301

NRIC No: S7821726Z Date: 19/03/2010 No: 6467599

INSURANCE CERT



Contact us at
 Hotline: (65) 6532 2888
 E-mail: CustomerService@DirectAsia.com

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act")
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore)
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No.	:	MT/00350867
Type of Coverage / Driver Plan	:	Car Comprehensive (Value Plan)
1) Vehicle Registration No.	:	SJP7889D
Chassis No.	:	JMYSTCS3A9U005348
2) Name of Policy Holder	:	che, jia jun
3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act	:	16/12/2016 00:00
4) Date/Time of Expiry of Insurance	:	15/12/2017 23:59
5) Persons or Classes of Persons Entitled to Drive		
(a) The Insured		
(b) Any person who is named on the policy who is driving on the Insured's order or with his permission.		
The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.		
6) Limitations as to use*		
Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business.		
*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.		
Sum Insured	:	Market Value
Own Damage Excess	:	S\$ 600.00 (before any applicable GST)
Windscreen Excess	:	S\$ 100.00 (before any applicable GST)
Choice of workshop	:	DirectAsia approved workshops
Finance company / Hire Purchase	:	
Main driver	:	che, jia jun
Ref		Named Driver Date of Birth
Named driver (1)	:	woo, kum yoke 30/01/1981
Important Note: This policy is on a named driver basis. Any unnamed drivers will not be covered.		

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 the Road Transport Act, 1987 (Malaysia).

Issued on: 07/12/2016

Direct Asia Insurance (Singapore) Pte. Ltd.

Edip Okur
Chief Underwriting Officer

Direct Asia Insurance (Singapore) Pte Ltd
 88 South Bridge Road Singapore 058716
 www.DirectAsia.com

Company Registration: 200822511G

Accident Photo



Accident Photo



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