

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	26/12/2017 17:36
Date Of Accident	26/12/2017 09:10
Exact Location Of Accident	KALLANG WAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJN2546L
Insured/Policyholder	
Name Of Registered Owner	YAP WEI LONG
NRIC No	S8541941B
Email Address	MAXSHINE.D@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90038183
Alternative Phone No	OTHERS-90038183

Vehicle Particulars

Manufacturer	BMW
Model	3 SERIES
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	ERGO INSURANCE PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMPC17S000263
Cover Note Number	14/01/2017 TO 06/03/2018

Driver

Name of Driver	YAP WEI LONG
NRIC No	S8541941B
Date Of Birth	21/12/1985
Occupation	INDOOR
Date Of Driving Pass	22/01/2005
Driving Experience	12 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90038183
Fax Number	
Contact Number	OTHERS-90038183
Email Address	MAXSHINE.D@GMAIL.COM

Address	APT BLK 622B PUNGGOL CENTRAL #08-266 (S) 822622
Postcode	
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
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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 with attach.

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	SKZ878S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	GOH CHEE YEW
NRIC/Passport Number	S8524828F
Contact Number	90046176
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

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:

26/12/2017 5:47pm

Driver's Signature

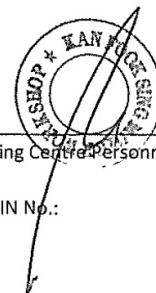
(If driver is not the policyholder)

Date & Time: 26/12/2017 5:47pm.

Reporting Centre Personnel's Signature

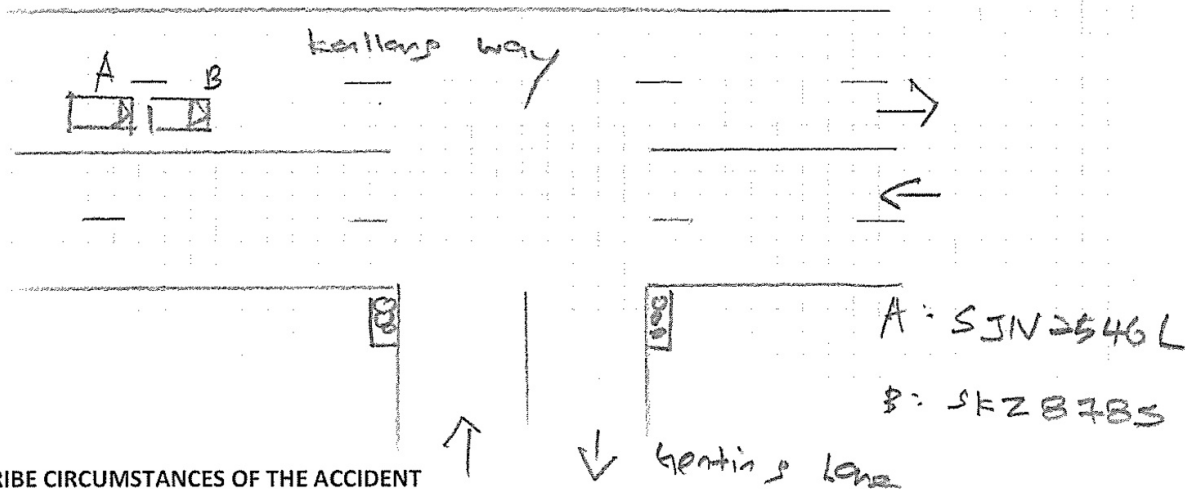
Name:

NRIC/FIN No.:



Accident Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

BOTH VEHICLE PREPARE TO TURN RIGHT INTO GENTING LANE, CAR B
MOVE & BRAKE, BUT I DIDN'T BRAKE IN TIME AND COLLIDED LIGHTLY
INTO REAR OF CAR B.

Insurance Co.	ERSZ Insurance
Vehicle No.	SKZ 8783
Date of Accident	26/12/2017
<input checked="" type="checkbox"/> Reporting Only <input type="checkbox"/> Own Damage Claim <input type="checkbox"/> Third Party Claim <input type="checkbox"/> Other Workshop	

DECLARATION

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

Policyholder's Signature

Date & Time:

26/12/2017 5:47pm

Driver's Signature

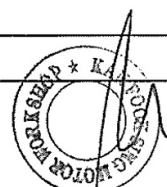
(If driver is not the policyholder)

Date & Time: 26/12/2017 5:47pm.

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:





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)

CERTIFICATE NO. DMPC17S000263	C17061898
Type of CI: Private Vehicle	
Cover: Third Party, Fire & Theft	A000583 MRL HOLDINGS PTE LTD
1) Registration No. of Vehicle:	SJN2546L
2) Name of Policyholder:	YAP WEI LONG
3) Commencement Date of Insurance:	14/01/2017
4) Expiry Date of Insurance:	06/03/2018
5) Persons or Classes of Persons entitled to drive	
1) YAP WEI LONG	
2) Any other person who is driving on the Policyholder's order or permission	
Non-Auth Workshops(Section 1): Additional : S\$300.00	
6) Name of Finance Company/Hire Purchase Owner: NA	
7) 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.	
8) Limitations as to Use	
(1) Use only for social domestic and pleasure purposes	
(2) Use for Policyholder's business	
This Policy does not cover	
(1) Use for hire or reward, racing, pace-making, reliability trial or speed-testing	
(2) Use for the carriage of goods other than samples in connection with any trade or business	
(3) 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 (for Items 7 & 8).	

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).

For and on behalf of
ERGO Insurance Pte. Ltd.
(Approved Insurer)

AUTHORIZED SIGNATURE

Siew Yoong/10/01/2017 15:43:00

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8541941B



Name

YAP WEI LONG

葉偉龍

Race

CHINESE

Date of birth

21-12-1985

Sex

M

Country/Place of birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S8541941B

Name

YAP WEI LONG

Birth Date: 21 Dec 1985

Issue Date: 11 Jul 2005





NRIC No. S8541941B



Date of issue

15-04-2017

Address

APT BLK 622B PUNGGOL CENTRAL
#08-266
SINGAPORE 822622

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

PASS DATE

Class 3 Motor cars \leq 3000 kg with \leq 7 passengers,
exclusive of the driver; and motor tractors
/vehicles \leq 2500 kg

22 Jan 2005



Licence No. S8541941B

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo



Accident Photo

