#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Mobile Number

Fax Number
Contact Number
EMail Address

- 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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 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.

atoresaid.				
	ACCIDENT STATEMENT			
Date Of Report	12/02/2018 13:37			
Date Of Accident	29/01/2018 13:20			
Exact Location Of Accident	AYE TOWARDS ALEXANDRA			
Country/State of Loss	SINGAPORE			
	DETAILS OF OWN VEHICLE			
Vehicle Registration Number	SGU4380H			
Insured/Policyholder				
Name Of Registered Owner	LIEW JING CHENG			
NRIC No	S8230472Z			
Email Address	VJCLIEW@GMAIL.COM			
Mobile Phone No	(LOCAL) +65-97690851			
Alternative Phone No	OTHERS-97690851			
Vehicle Particulars				
Manufacturer	ТОУОТА			
Model	WISH-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?	NO			
If No, Please state action to be taken	REPORTING ONLY			
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	DMPCSN3023721701			
Cover Note Number				
Driver				
Name of Driver	CHEW SIEW (ZHOU XIU)			
NRIC No	S8242596I			
Date Of Birth	05/12/1982			
Occupation	INDOOR			
Date Of Driving Pass	19/03/2012			
Driving Experience	5 YEARS AND 10 MONTHS			
Gender	FEMALE			
NA 1 11 NI 1	(1.0041.) (05.04455000			

(LOCAL) +65-91455082

ENNAOJC@HOTMAIL.COM

BLK 86 DAWSON ROAD #05-15 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

NO

NO

1

NO

NO

**General Information of the Accident** 

Type Of Accident **COLLISION - HEAD TO REAR** 

Weather Conditions **CLEAR** DRY Road Surface

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.

Number of Passengers (Including Driver)

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

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 NO

Was there any audio recorded?

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number SHC5818P

Vehicle Make/Model/Colour

**Details Of Properties** 

TAXI Vehicle Category

Name of Driver

NRIC/Passport Number

**Contact Number** 

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 14

#### Sketch Plan Pg. 1

#### SKETCH PLAN

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- 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:

- 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)
  - (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
- 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.

Policyhol

Date & Tr

Driver's Signature

(If driver is not the policyholder) 12.02.2012 Date & Time:

(.35pm

Reporting Centre Personnel's Signature

Name:

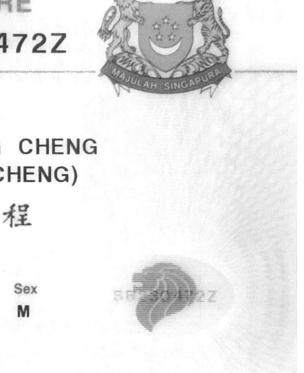
Jenny Lim NRIC/FIN No.: S6927273H

GARNIC States Plant 12

### Sketch Plan Pg. 2

SKETCH PLAN
zebra Stesse
insting /
Alexandra Alexandra
Hexandra 1
Maspital Andrews Andre
fitter lane Alexandra.
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT
Accident happened on 29.01. 2018 where I am exiting from AyE towards Alexandra. My can Squ4380H accidently hit very
lightly on to SHC, 58180 th his bumper at the zebral crossing. I got
Crack damage, and has opten with the driver of SHC5818P (Mr Ng)
Crack damage, and has quoten with the driver of SHC5818P (Mr Ng)  If he is fine. Mr Ng said that since there isn't and crack damage
and that he is fine and ask me to leave.
DECLARATION  I/We declary the foregoing particulars are true in every respect.
Kaul -W
Policyholder's Signature Date & Time:    Driver's Signature   Driver's Signature   Reporting Centre Personnel's Signature
Date & Time: 1.35 p m  Oate & Time: 1.35 p m  Date & Time: 1.35 p m.  NRIC/FIN No.:  S6927273H  Date & Time: 1.35 p m.  NRIC/FIN No.:

# REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$8230472Z





Name

LIEW JING CHENG (LIU JINGCHENG)

刘 境 程

CHINESE

Date of birth

01-10-1982

Country of birth

SINGAPORE

**Scanned by CamScanner** 

4892268



NRIC No. \$8230472Z

Date of issue 05-10-2012

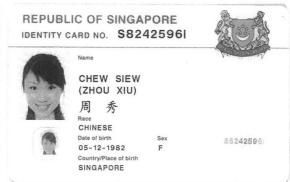
APT BLK 86 DAWSON ROAD #05-15 SINGAPORE 141086 Date:

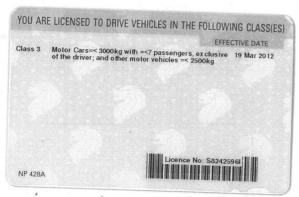
ate: 21/08/201

**Scanned by CamScanner** 

#### Driver's NRIC + Driving License Pg. 1









#### Certificate of Insurance Pg. 1



# 中国太平保险(新加坡)有限公司 CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

MX1WFR SN AN0006A Cov.Type: C AUTOSAFE

# **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)

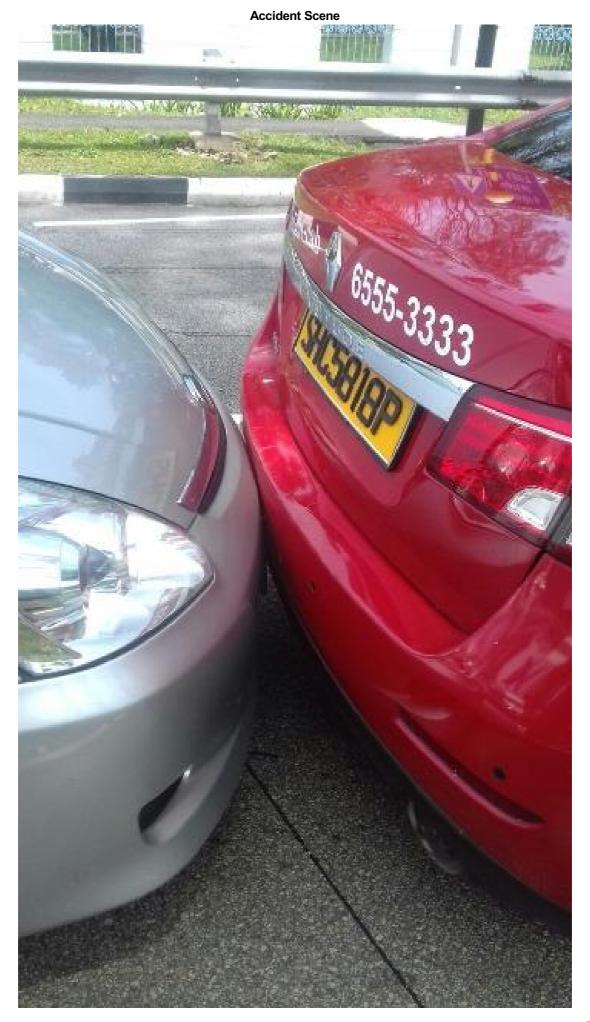
CERTIFICATE No.		DMPCSN3023721701		Ingine No :1ZZ2861688 Chassis No:ZNE100358059		
Index Mark and Registration     Number of Vehicle		SGU4380H				
Name of Policy Holder     Seffective date of the Commencer the purposes of the Regulations, Commencer than the purpose of the Regulations and Regulations.		LIEW JING CHENG ( LIU JINGCHENG) 15 MAY 2017	NAMED DRIVERS EX SECT. I			
4. Date of Expiry of Insurance		14 MAY 2018				
5. Persons or Classes of Persons er	ntitled to drive *		EX ON WINDSCREEN			
(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 WILL BE DOUBLED). A FLAT \$\$5,000 EXCESS SHALL APPLY FOR THEFT LOSSES OCCURRING OUTSIDE SINGAPORE.  ONE TIME WAIVER OF EXCESS FOR THE FIRST \$\$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 provisions of the Mote Road Transport Act, 1 Please see reverse  Countersigned By:	or Vehicles (Third-Party	olicy to which this Certific Risks and Compensation	) Act (Chapter 189) a	in accordance with the and Part IV of the  ING INSURANCE (SINGAPORE) PTE. LTD.  Authorised Signatory		











# **Accident Scene**

