

MSIG WINNER
VS
AIG

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 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.

OUT

ACCIDENT STATEMENT

Date Of Report 29/01/2018 09:55
Date Of Accident 28/01/2018 10:00
Exact Location Of Accident PIE
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SDT8300D
Insured/Policyholder
Name Of Registered Owner GOH BIAN KOON
NRIC No S0036406A
Email Address BIANKOON@GMAIL.COM
Mobile Phone No (LOCAL) +65-98939488
Alternative Phone No OFFICE-98939488

Vehicle Particulars

Manufacturer VOLKSWAGEN
Model GOLF A7 1.4 CL 92 (DSG) EQP

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 MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number A29049088 AVW
Cover Note Number

Driver

Name of Driver GOH BIAN KOON
NRIC No S0036406A
Date Of Birth 07/11/1941
Occupation INDOOR
Date Of Driving Pass 24/08/1960
Driving Experience 57 YEARS AND 5 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-98939488
Fax Number
Contact Number OFFICE-98939488
Email Address BIANKOON@GMAIL.COM

Address	83 BEDOK TERRACE
Postcode	469242
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	4
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)	2
Passenger 1	NAME: : NG GEK SWAN CATHERINE
	GENDER: : FEMALE

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?	YES
Remarks/ Reasons:	VIDEO FILE SIZE EXCEED
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJZ1212T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LEONG CHI MENG
NRIC/Passport Number	S1679268C
Contact Number	96841569
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SHD6501R

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

TAXI

Name of Driver

SAY KWEE LIANG

NRIC/Passport Number

S1492005F

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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.



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

5521212 5679300 5HD6501R

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to report.

DECLARATION

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

Policyholder's Signature _____

Date & Time: 29 / 01 / 18

Driver's Signature

(If driver is not the policyholder)

Date & Time: 29/01/18

Reporting Centre Personnel's Signature

Name: _____

NRIC/FIN No.:

I was driving at about 70km/h in a second lane from the right on PIE towards Treas at about 10:40 am on 28 Jan 2018 when I was nearing the Eume exit, the taxi in front of me, bearing the number plate SHD 6501 R suddenly came to a total stop. I also brought my car to a complete halt. Within seconds, the Audi behind me (car number SSZ 1212 T) hit my car so hard that it caused my car to move forward and hit the taxi from behind.

My car video recorded the above. You will ~~also~~ also see that the Audi was driving very fast towards me even after I had braked and did not slow down. Hence the impact was very great and enough to push my car forward and hit the taxi in front of me.

**MSIG**

MSIG Insurance (Singapore) Pte. Ltd.
 40 Dutton Way, # 21-01, SGX Centre 2, Singapore 068807
 Tel: +65 6827 7888, Fax: +65 6827 7800
 U.E. 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

VW DRIVEEASY
 Comprehensive

Certificate No. A 29049088 AVW

Excess : SGD1,000

Windscreen Excess : SGD100

1. Index Mark and Registration Number of Vehicle
 SDT8300D

2. Name of Policyholder
 Goh Bian Koon

3. Effective Date of the Commencement of Insurance for the purposes of the Act
 15/11/2017

4. Date of Expiry of Insurance
 14/11/2018

5. Persons or Classes of Persons entitled to drive*

Goh Bian Koon

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 VOLKSWAGEN CENTRE SINGAPORE.

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

SDT 8300D

CONTACT NUMBER :

EMAIL :

biankoon@gmail.com

Hp: 98939488

PASSENGERS

NG GOK SWAN
CATHERINE

EXCESS : \$1000

NCP PROTECTOR : 50 % , Protector : X

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0036406A



Name
GOH BIAN KOON

吴嫌坤

Race
CHINESE

Date of Birth
07-11-1941

Country of Birth
SINGAPORE

Sex
M



1081604



NRIC No S0036406A

Blood Group Date of issue
A+ 25-06-1993

Address
83 BEDOK TERRACE
SINGAPORE 1546

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms 24 Aug 1960



NP 428A