

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	03/01/2018 14:09
Date Of Accident	02/01/2018 18:15
Exact Location Of Accident	ECP TOWARDS CITY (ROCHOR ROAD EXIT)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJD5298K
Insured/Policyholder	
Name Of Registered Owner	LUA GEOK KEE
NRIC No	S1178166G
Email Address	LUADASY2011@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-96381649
Alternative Phone No	OTHERS-96381649

Vehicle Particulars

Manufacturer	HONDA
Model	CIVIC-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	DMPCSN3014691702
Cover Note Number	

Driver

Name of Driver	GEERMAINE TAN YU LING
NRIC No	S9230100A
Date Of Birth	23/08/1992
Occupation	INDOOR
Date Of Driving Pass	26/01/2011
Driving Experience	6 YEARS AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96453563
Fax Number	
Contact Number	
Email Address	GERKTAN@GMAIL.COM

Address	78 LENTOR GREEN
Postcode	789309
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO PROPERTY
Weather Conditions	AFTER RAIN
Road Surface	WET

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?	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?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	ANG MO KIO NORTH NPC
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO SKETCH PLAN / POLICE REPORT NO: T/20180102/2237

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	PZ1688H
Vehicle Make/Model/Colour	MINIBUS
Details Of Properties	
Vehicle Category	BUS
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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 liability.
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. 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:

- (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:

- 3 JAN 2018

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

3 / 01 / 2018

14 : 17

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

Jenny Lim
S6927273H

Car A: 530.578K
 BUSB: PZ1688H

Rochester Road

ECP (CITY)

Refer to Police Report. NO. T/20180102/2237.

Policyholder's Signature
Date & Time:
- 3 JAN 2018

3/01/2018
14:17

Reporting Centre Personnel's Signature
Name: Jenny Lim
NRIC/FIN No.: S6927273H



**SINGAPORE
POLICE FORCE**



T/20180102/2237

1 of 3

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

Report No. T/20180102/2237

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 02/01/2018 23:42	Vide Report No.: G/20180102/0196	Station Diary No.: 173
--	-------------------------------------	---------------------------

Informant's Particulars			
Name of Informant: GERMAINE TAN YU LING		Address: 78 LENTOR GREEN SINGAPORE 789309	
ID Type / ID No.: NRIC NO / S9230100A		Contact No.: Home/Office: Mobile: 96453563	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Female	Age: 25	Date of Birth: 23/08/1992	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: BANK OFFICER		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 02/01/2018 18:15	Type of Location: Straight Road
Location: Along Road 1 EAST COAST EXPRESSWAY ECP (Towards City), Rochor Road Exit				
Weather: Clear		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Moving Vehicle Against - Road Divider/Kerb/Railings			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
PZ1688H	Bus/Coach/Mi nibus				Slightly Damaged	0
SJD5298K	Car	HONDA	Civic	Maroon	Seriously Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20180102/2237

2 of 3

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

Report No. T/20180102/2237

CONTINUATION OF REPORT

Driver			
Name	GERMAINE TAN YU LING	ID No.	S9230100A
Related Vehicle	NIL	Contact No.	96453563
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 02/01/2018 at about 6.15pm, I was driving in my vehicle (SJD5298K) along ECP (Towards City). During which, I had just exited the Rochor Exit and was on the right lane of the 2 lane road. At that point in time, the road was wet as it had just finished raining and I was driving at about 50km/hr.

As I was driving along the exit on the bend, I felt like I needed to slow down and applied my brakes. At this juncture, my wheels lost traction and went out of control causing to swerve uncontrollably from the right lane to the left lane before it hit the divider. Whilst I was swerving across the road, my vehicle had slightly collided onto the side of a bus (PZ1688H).

The bus and my vehicle then came to a stop and both drivers of the vehicle alighted from it. There wasn't any complain of injury from the driver or it's passenger. The passengers then alighted from the bus and boarded another bus. The incident was also attended by the police; G/20180102/0196 and I was then advised to lodge a traffic accident report which will be handled by IO TP Yus Mastari.

I wish to state that my vehicle was seriously damaged during the accident and had to be towed away. I also state that I was not injured during the accident.



**SINGAPORE
POLICE FORCE**



T/20180102/2237

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

3 of 3

Report No. T/20180102/2237

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:
F /
Staff Sgt MUHAMMAD FAHMY BIN RAZALI

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
02/01/2018 23:42

Officer In Charge Of Case:
TP / GIT /
SI THABAGESH JEYATHESH
Contact No.: 65476232

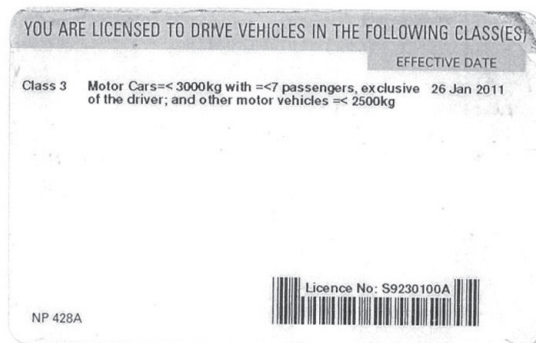
Classification Of Case:

SN 085

Authentication Stamp
NP168



Sketch Plan #3 Pg. 1



Sketch Plan #4 Pg. 1

03-01-18;02:14PM;

1/ 3



中国太平保險(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Co Reg No 2005010204E

MK1F
R SN
AN0450A
Cov. Type C

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)

ORIGINAL

CERTIFICATE No	CMPCSN014691702	Engine No	R18A13032325
		Chassis No	JHMF016308S214760
1 Index Mark and Registration Number of Vehicle	SJD6298K	AUTOSAFE	*****
2 Name of Policy Holder	MDM LIA GEOK KEE		
3 Effective date of the Commencement of Insurance for the purposes of the Regulations Ordinance or Enactment	20 March 2017	Named Drivers Ex Sect. 1	\$750.00
		Additional Ex Other than Named Drivers	
4 Date of Expiry of Insurance	25 March 2018	Ex Sect. 1 - Age <= 25	\$3,000.00
		Ex Sect. 1 - Age >= 26	\$500.00
		* Age as at date of accident	
		EX ON WINDSCREEN	\$100.00
5 Persons or Classes of Persons entitled to drive*			
(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 \$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.

Issued By: JIMMY RE. N. SOLUTIONS
Authorised Officer

Authorised Signatory

3 Anson Road #16-00 Springleaf Tower Singapore 079960 Tel: 6389 6111 Fax: 6225 3562 Website: www.sg.cntaiping.com

Accident Photo

