

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.

ACCIDENT STATEMENT

Date Of Report	19/02/2018 19:58
Date Of Accident	16/02/2018 16:30
Exact Location Of Accident	ALONG AH18 BEFORE JUNC TANJUNG PAHANG
Country/State of Loss	MALAYSIA/PAHANG DARUL MAKMUR

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLD986S
Insured/Policyholder	
Name Of Registered Owner	ROSET LIMOUSINE SERVICES PTE LTD
Co Reg No	200406722Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-89999999
Alternative Phone No	OFFICE-89999999

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	ATTRAGE 1.2 CVT
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCFHQ17-000185
Cover Note Number	

Driver

Name of Driver	NG YONG YU (HUANG YONGYU)
NRIC No	S8309456G
Date Of Birth	24/03/1983
Occupation	OUTDOOR
Date Of Driving Pass	26/12/2002
Driving Experience	15 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-90304603
Fax Number	
Contact Number	OFFICE-90304603
Email Address	NOEMAIL

Address	BLK 219 JURONG EAST STREET 21 #10-615
Postcode	600219
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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 MOTORCYCLIST
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	BJH7424 (MOTORCYCLE)
Number of vehicles involved in the accident	2
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?	YES
If Yes, Please state which Police Station	
Police Station Name	KETUA POLIS DAERAH ROMPIN, 26700 MUADZAM SHAH, ROMPIN, PAHANG
Police Station Address	ROAD: 26700 MUADZAM SHAH , POSTCODE: 26700 , COUNTRY: MALAYSIA
Police Station Contact	TEL NO: 09-4522222 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - TRAFIK ROMPIN/000182/18 & TRAFIK ROMPIN/000183/18.

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	BJH7424
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

Accident Sketch Plan

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.

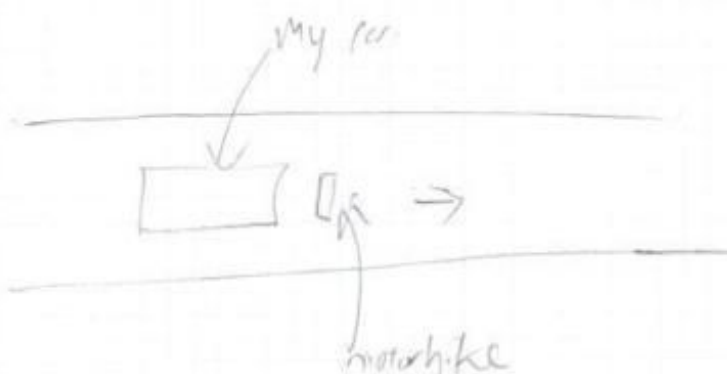
Policyholder's Signature
Date & Time:

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

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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving straight from Kuantan to Singapore on the 198 Johor Kuantan - Johor Bahru, suddenly out of no where a motorbike drove across the road diagonally to the other side, it was too sudden, I brake but was not able to stop in time and hit the motor cycle.

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.:

Police Report

Salinan Repot Polis

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POLIS DIRAJA MALAYSIA

REPOT POLIS

Balai : TG GEMOK
Daerah : ROMPIN
Kontinjen : PAHANG
No Repot : TRAFIK ROMPIN/000182/18
Tarikh : 16/02/2018
Waktu : 1819 PM
Bahasa Diterima : B. Malaysia

Pegawai Penyiasat : R190234

Butir-butir Penerima Repot

Nama : MOHAMAD HAFIZUDDIN BIN ABDUL MUTALIB

No Personel : R200235

Pangkat : KONST/P

Butir-butir Jurubahasa (Jika Ada)

Nama : ---

No K/P (Baru) : ---

No Polis/Tentera : ---

No Paspot : ---

Bahasa Asal : ---

Alamat : ---

Butir-butir Pengadu

Nama : NG YONG YU

No K/P (Baru) : ---

No Polis/Tentera : ---

No Paspot : E6905393K

No Sijil Beranak : ---

Jantina : Lelaki

Tarikh Lahir : 24/03/1983

Umur : 34 tahun 10 bulan

Keturunan : Cina

Warganegara : Singapore

Pekerjaan : SALESMAN

Alamat Tempat Tinggal : 219 JURONG EAST STREET 21 10615 SINGAPORE 600219, 600219

Alamat Ibu/Bapa : ---

Alamat Pejabat : ---

No Tel (Rumah) : ---

No Tel (Pejabat) : ---

No Tel (HP) : 6590304603

Emel : ---

Pengadu Menyatakan:-

DI SALIN DARI SEHELAI KERTAS PUTIH

16 FEB 2018, 1630HRS, I WAS DRIVING MY CAR PLAT NO (SLD 9868 S) MODEL MITSUBISHI ATTRAGE STRAIGHT FROM Kuantan to Singapore on km 158 Jalan Kuantan-Johor Baru, suddenly out of no where, a motorbike drive across the road, from 1 side diagonally to the other side, I jammed my emergency brake when I saw the motorcycle, but it was too near and I was not able to stop on time and hit the motorcycle. The rider run away after the collision. The damage to my car is damage to the front part of car, leaking fluid is spotted under the car, wind screen break, air bag was activated and other damages I not sure yet. This is my report.

Tandatangan Pengadu:

Tandatangan Jurubahasa(Jika ada) :

Tandatangan Penerima Repot:

ID Pencetak | Tarikh @ Masa Cetak

: R200235 | 16/02/2018 06:31:47 PM

Police Report

SAHABAT KEPOLISAN

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POLIS DIRAJA MALAYSIA REPOT POLIS

Balai : TG GEMOK
Daerah : ROMPIN
Kontinjen : PAHANG
No Repot : TRAFIK ROMPIN/000183/18
Tarikh : 16/02/2018
Waktu : 1902 PM
Bahasa Diterima : B. Malaysia

Pegawai Penyiasat : R190234

Butir-butir Penerima Repot

Nama : MOHAMAD HAFIZUDDIN BIN ABDUL MUTALIB

No Personel : R200235

Pangkat : KONST/P

Butir-butir Jurubahasa (Jika Ada)

Nama : ---

No K/P (Baru) : ---

No Polis/Tentera : ---

No Paspot : ---

Bahasa Asal : ---

Alamat : ---

Butir-butir Pengadu

Nama : NG YONG YU

No K/P (Baru) : ---

No Polis/Tentera : ---

No Paspot : E6905393K

No Sijil Beranak : ---

Jantina : Lelaki

Tarikh Lahir : 24/03/1983

Umur : 34 tahun 10 bulan

Keturunan : Melayu

Warganegara : Malaysia

Pekerjaan : SALESMAN

Alamat Tempat Tinggal : 219 JURONG EAST STREET 21 10615 SINGAPORE

Alamat Ibu/Bapa : ---

Alamat Pejabat : ---

No Tel (Rumah) : ---

No Tel (Pejabat) : ---

No Tel (HP) : 6590304603

Emel : ---

Pengadu Menyatakan:-

ACCORDING TO TRAFIK ROMPIN REPORT 182/18, I WANT TO MAKE AN ADDITION TO MY REPORT WHICH IS REGISTERED NUMBER FOR MOTORCYCLE IS -BJH 7424- MODEL MODENAS KRISS AND I BELIEVE THE RIDER IS (1) FEMALE AND SHE IS ILLEGAL IMMIGRANT ACCORDING TO THE WITNESS MR HENG, PHONE NUMBER 012-7614386, THIS IS MY REPORT.

Tandatangan Pengadu:

Tandatangan Jurubahasa (Jika ada) :

Tandatangan Penerima Repot:

ID Pencetak | Tarikh @ Masa Cetak

: R200235 | 16/02/2018 07:06:27 PM

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo

