

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	21/02/2018 18:20
Date Of Accident	20/02/2018 21:40
Exact Location Of Accident	ALONG YIO CHU KANG ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFL3141Y
Insured/Policyholder	
Name Of Registered Owner	LOW SENG YEW
NRIC No	S7401485B
Email Address	SY_LOW74@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-97571091
Alternative Phone No	OTHERS-97571091

Vehicle Particulars

Manufacturer	CHEVROLET
Model	OPTRA-1.6 (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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	SI17V11033/VPE/R03
Cover Note Number	

Driver

Name of Driver	LOW SENG YEW
NRIC No	S7401485B
Date Of Birth	31/01/1974
Occupation	INDOOR
Date Of Driving Pass	13/10/1999
Driving Experience	18 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97571091
Fax Number	
Contact Number	OTHERS-97571091
Email Address	SY_LOW74@YAHOO.COM.SG

Address	BLK 466D SEMBAWANG DRIVE #20-353
Postcode	754466
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	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

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	SKM7091S
Vehicle Make/Model/Colour	AUDI A3
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHEAH KIN KAN
NRIC/Passport Number	S7710618I
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	4

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:

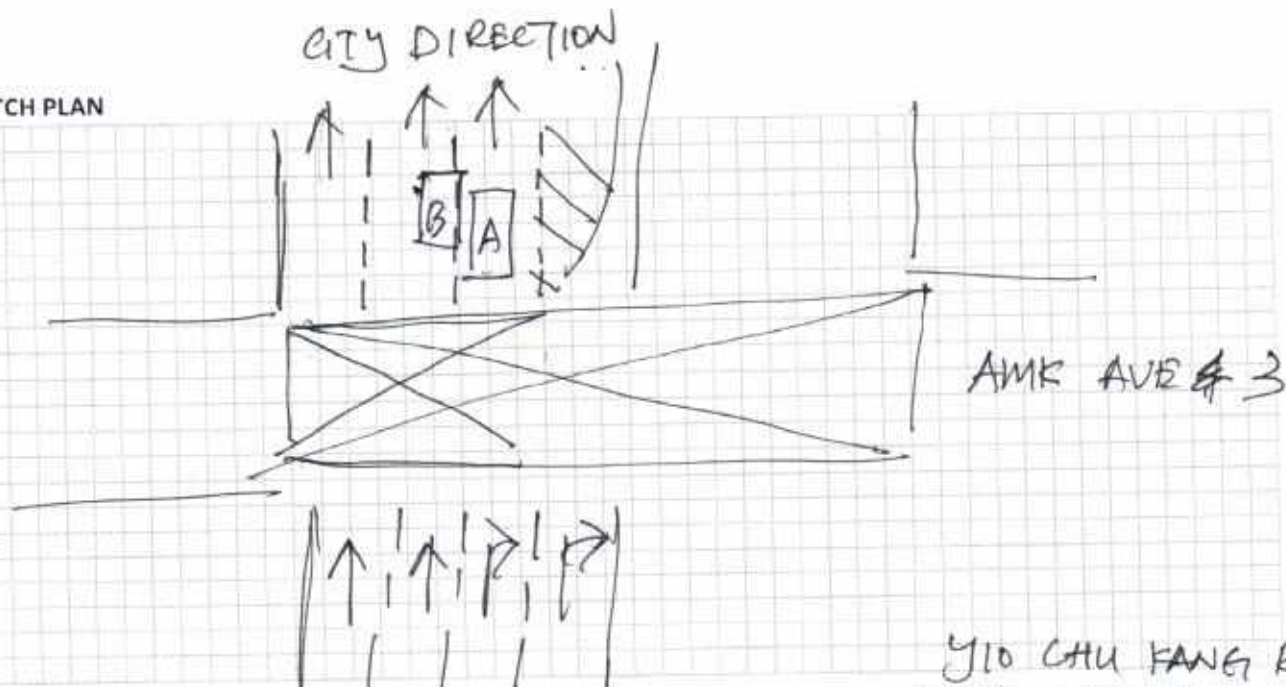
180 HRA 21/2/18

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

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

21/02/2018
Rashid WAHAB

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

TRAVELLING ALONG YIO CHU KANG (CITY DIRECTION). NEAR
FLYOVER ABOVE ANG MO KIO AVE 3. AFTER MOVING OFF FROM
JUNCTION, HEARD A KNOCK ON LEFT HAND SIDE MIRROR.
FILTER LEFT (BOTH CARS) TO AND STOP ALONG ROAD TO
CHECK. NOTICE THIRD PARTY CAR, A DENT AT CORNER OF
DRIVER DOOR (RIGHT SIDE). & NO MAJOR DENT OR DAMAGED
BUT FOUND AT SELF CAR, LEFT SIDE PORTION.

DECLARATION

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

Policyholder's Signature

Date & Time: 1800/21/2/18

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

21/2/2018

Police Officer

ACCIDENT STATEMENT

ACCIDENT DATE: 20/02/2018 (DD/MM/YYYY), TIME: 21:40 (HH:MM)

LOCATION: YIO CHU KANG ROAD

1. DETAILS OF VEHICLE

a) VEHICLE NUMBER: SFL 3141Y
 b) INSURANCE COMPANY: LIBERTY INSURANCE
 c) POLICY NUMBER: 3117V11033 / VPE / R03
 d) POLICY TYPE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT
 e) MAKE & MODEL: CHEVROLET / OPERA
 f) TYPE: SALOON COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS
 g) VEHICLE CATEGORY: PRIVATE COMMERCIAL / MOTORCYCLE
 h) PURPOSE OF USING AT ACCIDENT TIME: LEISURE
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) NO
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

a) NAME: LOW SENG YEW (MALE) (FEMALE)
 b) NRIC/FIN/PASSPORT: S7401485B CONTACT: 97571091
 c) ADDRESS: 466D SEMBAWANG DRIVE #2D-353
SE 754466

* CONTINUE TO 3, d IF DRIVER ALSO POLICY HOLDER

No of passengers
 (including driver)
(1)

DRIVER
 a) NAME: LOW SENG YEW (MALE) (FEMALE)
 b) NRIC/FIN/PASSPORT: S7401485B CONTACT: 97571091
 c) ADDRESS: _____

d) DATE OF BIRTH: 31/01/1974 (DD/MM/YYYY)
 e) OCCUPATION: INDOOR (OUTDOOR)
 f) DATE OF DRIVING PASS: 13/10/1999

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES/NO) YES

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____

5. a) WEATHER CONDITION: CLEAR RAINING / OTHERS _____

b) ROAD SURFACE: DRY WET / OTHERS _____

6. WAS ANYBODY INJURED (YES/NO) NO

7. a) REPORTED TO POLICE (YES/NO) NO

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: 8KM 7091S MODEL: AUDI A3
 b) DRIVER'S NAME: CHEAH KIN KAN
 c) NRIC/FIN/PASSPORT: S77106181 CONTACT: NIL

9. THIRD PARTY VEHICLE

d) VEHICLE NUMBER: _____ MODEL: _____
 e) DRIVER'S NAME: _____ CONTACT: _____
 f) NRIC/FIN/PASSPORT: _____

No of passengers
 (including driver)
()

email: sy-low74@yahoo.com.sg

fax: _____
 VIO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7401485B



Name

LOW SENG YEW

劉盛耀

Race

CHINESE

Date of birth

31-01-1974

Sex

M

Country of birth

SINGAPORE

S7401485B

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S7401485B

Name

LOW SENG YEW

Birth Date: 31 Jan 1974

Issue Date: 14 Jul 2003



1000635949K



369051E

NRIC No. S7401485B



Date of issue

10-01-2005

APT BLK 4860 SEMBAWANG DRIVE #20-353
SINGAPORE 754486

NRIC No: S7401485B

Date: 20-04-2006

No: 5375391

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 2B Motorcycles not exceeding 200 cc
Class 2A Motorcycles between 201 cc and 400 cc
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

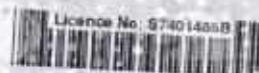
PASS DATE

03 Jun 1992

17 Jun 1997

13 Oct 1999

NP 426A



Licence No: S7401485B

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 1950 (Malaysia)

Name of Policyholder:

LOW SENG YEW

Date of Issue:

05 Jul 2017

Registration No.:

SFL3141Y

Effective Date of Commencement:

30 Jul 2017 00:00

Chassis No.:

KLANA196E4H112451

Certificate No.:

SI17V11033/ VPE / R03

Date of Expiry:

29 Jul 2018 23:59

Type of Certificate:

MX1

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.

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.

Limitations as to use:

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The Policy does not cover:

A) Use for hire or reward.

B) Use for racing, pace-making, reliability trials or speed-testing.

C) Use for the carriage of goods (other than samples) in connection with any trade or business.

D) 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.

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).



For and on behalf of
LIBERTY INSURANCE PTE LTD
Approved Insurers

For Information Only:

Coverage(s):

Third Party Fire & Theft

Sum Insured:

MARKET VALUE AT THE TIME OF LOSS

Excess:

Name of Finance Company:

SWEE SENG CREDIT P/L

Name of Producer:

CUSTOMER SERVICES CENTRE (D9999-CSC)