

Blue Cherry

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	01/03/2018 14:10
Date Of Accident	26/02/2018 07:30
Exact Location Of Accident	JUNCTION OF ULU PANDAN ROAD/CLEMENTI ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJU1474E
Insured/Policyholder	
Name Of Registered Owner	MOTORWAY CAR RENTALS PTE LTD
Co Reg No	199902927C
Email Address	MICHAEL.OHAGAN@MWGROUP.NET
Mobile Phone No	(LOCAL) +65-93266180
Alternative Phone No	OFFICE-93266180

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	JETTA
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5093337471
Cover Note Number	

Driver

Name of Driver	MICHAEL GERALD O'HAGAN
Passport No/FIN	G6147156T
Date Of Birth	26/02/1976
Occupation	INDOOR
Date Of Driving Pass	19/02/2009
Driving Experience	9 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93266180
Fax Number	
Contact Number	OTHERS-93266180
EMail Address	MICHAEL.OHAGAN@MWGROUP.NET

Address	61 MOUNT SINAI DRIVE #02-04 RIDGEWOOD
Postcode	277113
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	COLLISION - HEAD TO REAR
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	SKV8858T
Vehicle Make/Model/Colour	VOLKSWAGEN GOLF
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	NG TECK BING
NRIC/Passport Number	S6973592D
Contact Number	97670693
Address	
Postcode	
Insurance Company Name	MSIG INSURANCE (SINGAPORE) PTE. LTD.
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:

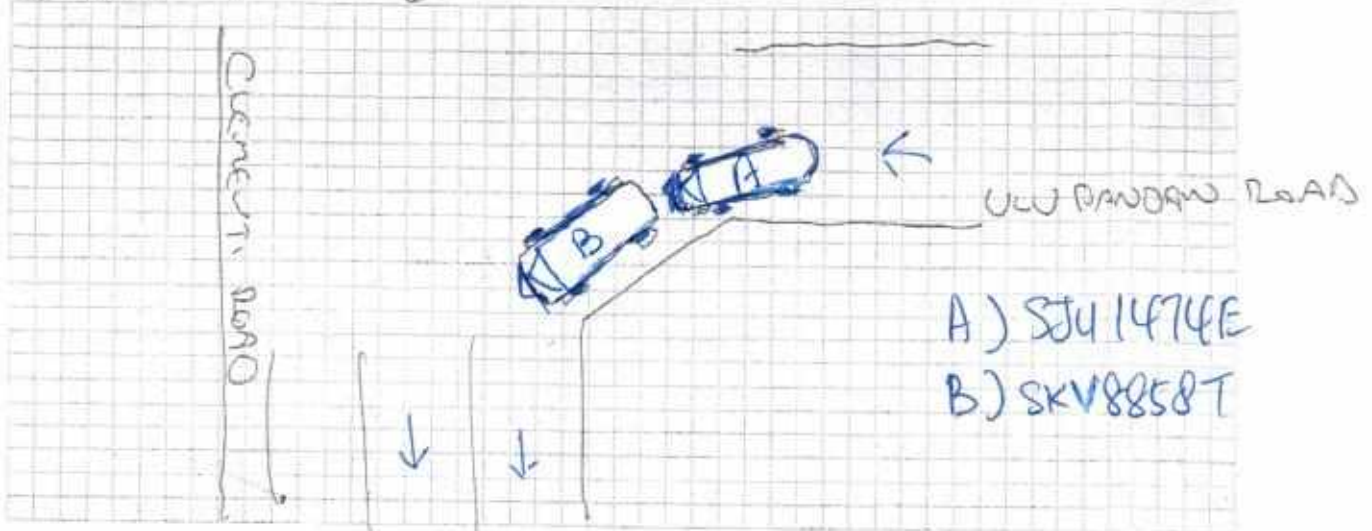
26/04/18
13:30

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

01/03/2018
Resal WATHA

SKETCH PLAN

24/02/18 @ 730 am



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Morning of 24th FEB 2018

Pulling onto Clementi Road from Ulu Pandan Road
Driver of SKV8858T WAS STATIONARY. Driver of SJU1474E
Pulled up behind. Driver of SJU1474E
Seeing a gap in Traffic on Clementi Road anticipated
the driver in front would pull out. He moved
forward too soon and bumped into the back of
SKV8858T.

No Injuries Minor scratch to the bumper of
SKV8858T

DECLARATION

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

Policyholder's Signature
Date & Time:



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

24/02/18

1330

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

24/02/2018
Resdi Wintars

Claim Handling

The premium on this policy has not been collected.

Accident MT/0983852

Policy No.	5093337471	Vehicle No.	SJU1474E	GST Registration No.	
Policyholder Name	MOTORWAY CAR RENTALS PTE LTD			Policyholder NRIC	
Product Code	FLEET INSURANCE	Cover Type	Third Party, Fire & Theft	Loading	
Contact No.(Mobile)	NA	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	
KFK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	Not available

Accident Details

Report Date	27/02/2018 13:03	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head
Date of Accident	26/02/2018	Time of Accident hh:mm	07:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG ULU PANDAN ROAD				

Benefits

Excess

Own damage Excess	0.00	Additional Excess	0.00	Windscreen Excess	
Unnamed Driver Excess		Outside Singapore OD Excess	0.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

GST Registered Information

GST Registered	Yes	GST Registration Date	01/08/1999
GST Registration No.	199902927C	GST Status Verified	Yes
Modification History			

Policyholder Mailing Address

Address 1	1094 LOWER DELTA ROAD	Address 2	MOTORWAY BUILDING	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.		Related Policy Number	5093337471		

OI Driver Info

Driver Name		Driver Type		Driver DOB	
Unnamed driver Name		Driver NRIC		Driving Experience	
Register Date of Driver License		Driver Age		Contact No.(Home)	
Contact No.(Mobile)		Contact No.(Office)		Address 3	
Address 1		Address 2		Post Code	
Address 4		Address Type	Foreign address		
Unit No.					
Does he own a Singapore Registered car?	☒ Yes ☐ No	Driver Vehicle No.		Driver Insurer Company	

Modification History

Claim 002

New

Claim Type *	OD-MX	Insured Name	MOTORWAY CAR RENTALS PTE	Insured NRIC		
Contact No.(Mobile)		Contact No.(Home)	NIL	Contact No.(Office)		
Email Address	rent@motorwaycarrentals.com	DI Vehicle Number	SJU1474E	TP Vehicle Number		
Claim Description	SJU1474E / SKV885BT ON 26 Feb 2018				Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Fully at Fault	GIA report		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received		
Date Registered	06/03/2018 09:56	Claim Close Date				
Report Taken By	ROSLI WAHAB					

☒ Print AK letter

Save Submit

Attachment

Accident No.	MT/0983852	Claim No.	002		
Last Doc. Received	☒ Yes ☐ No	Upload Date	06/03/2018 09:57		
Path *		Category *	Confidential	Urgency	
	Browse	Clear	Please Select	☒ No ☐ Yes	Normal
	Browse	Clear	Please Select	☒ No ☐ Yes	Normal
	Browse	Clear	Please Select	☒ No ☐ Yes	Normal

Browse...	Clear	Please Select	60	Normal
Browse...	Clear	Please Select	60	Normal
Browse...	Clear	Please Select	60	Normal

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	De
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 06 Mar 2018 09:57	Photos	Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 06 Mar 2018 09:57	Photos	Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 06 Mar 2018 09:57	Photos	Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 06 Mar 2018 09:57	Photos	Normal	Photo
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 06 Mar 2018 09:56	SAS	Normal	SAS
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 06 Mar 2018 09:56	NRIC/ Driving License	Normal	NRIC/ Driving
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 06 Mar 2018 09:56	NRIC/ Driving License	Normal	NRIC/ Driving
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 06 Mar 2018 09:56	NRIC/ Driving License	Normal	NRIC/ Driving

Video List

Uploaded By/Date	Folder Date	File Name	Source
		Display in New Window	Scan and uploading



MotorWay Car Care Centre Pte Ltd

(CO. REG NO.: 20000-0606-)

1094, Lower Delta Road, Motorway Building, Singapore 169205

Tel: (65) 6468 2200 Fax: (65) 6273 5535

Website: www.motorway.com.sg

ACCIDENT STATEMENT FORM

Please attach this form together with Driver IC, driving license and Insurance Certificate.

Date of Accident : 26/02/18

Time of Accident : 0730 am / pm / noon

Exact Location of Accident : JUNCTION ULU PANDAN ROAD + CLEMENTS ROAD

Detail of Own vehicle - Policyholder

Name of registered Owner : Motorway Car Rentals Pte Ltd

NRIC / FIN / Passport number : 199902927C

Address : 1094 Lower Delta Road, Motorway Building (S) 169205

H/P : 64682200

Fax : 62735535

Vehicle Particulars

Vehicle Registration Number : S201474E

Vehicle Make and Model : VW JETTA

Purpose was being used at time of accident : Private use / Commercial use / Hire & reward

Action to be taken for repair your vehicle : Third party claims / Own damage claims / Reporting only

Insurance Company

Name of Insurance Company : Liberty Insurance / Tokio Marine Insurance WTC

Type of coverage : Comprehensive / Third Party Fire & Theft / Third party only

Policy number : _____

Details of Own Vehicle - Driver

Name of Driver : MICHAEL OHAGAN

NRIC / FIN / Passport number : G6147156T

Date of Birth : 26/02/1976

Occupation : ENGINEER

Date of driving pass : 1/1/1

Address : 61 MAUNA SINAI DRIVE, 02-04 R. DEERWOOD SINGAPORE 277113

H/P : 93266160

Email : michael.ohagan@mwgroup.net

Relationships of the Driver with the Insured : Hire & reward

Information Of The Accident (Please circle)

Injuries even if slight : Yes / No

Any Material or property damaged: Yes / No

Weather conditions : Clear / Raining / Drizzling

Road surface: Wet / Dry

Was the accident reporting to the police : Yes / No

Was notice of intended prosecution given : Yes / No If Yes, against to _____



MotorWay Car Care Centre Pte Ltd

(CO. REG NO.: 20000-0606-)

1094, Lower Delta Road, Motorway Building, Singapore 169205

Tel: (65) 6468 2200 Fax: (65) 6273 5535

Website: www.motorway.com.sg

Details of Other Vehicle / Property 1

Vehicle Registration Number: SHV8858T

Vehicle Make and Model: VW GOLF

Name of Driver: NG TEEN HING

NRIC / FIN / Passport number: S6973592D

Address: 8 Ridgeway Close #02-14 Singapore 276698

H/P: 9767 0693 J

Insurance Company Name: MSIA SG

Details of Other Vehicle / Property 2

Vehicle Registration Number: _____

Vehicle Make and Model: _____

Name of Driver: _____

NRIC / FIN / Passport number: _____

Address: _____

H/P: _____

Insurance Company Name: _____

Details of Witness (if any)

Name: N/A

Address: _____

H/P: _____

Email: _____

Details of Injured Person 1 (if any)

Name: N/A

Address: _____

Injuries sustained: _____

Injured person in which vehicle: _____

Was injured conveyed to hospital by ambulance: Yes / NO

Details of Injured Person 2 (if any)

Name: N/A

Address: _____

Injuries sustained: _____

Injured person in which vehicle: _____

Was injured conveyed to hospital by ambulance: Yes / NO

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

Policyholder's signature: _____

Date and time: ____/____/____ @ ____

Driver's signature: _____

Date and time: 26/02/18 @ 1300



EMPLOYMENT PASS

Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer

M+W SINGAPORE PTE. LTD.



Name

MICHAEL GERALD O'HAGAN

Occupation

MANAGER, OPERATIONS (CONSTRUCTION)

FIN

G6147156T

Date of Application

20-07-2017

Date of Issue

03-08-2017

Date of Expiry

22-09-2019



L8188621

VISIT PASS
Immigration Regulations

Name
MICHAEL GERALD O'HAGAN



Date of Birth	Sex	Nationality
26-02-1976	M	AUSTRALIAN
FIN	Date of Issue	Date of Expiry
G6147156T	03-08-2017	22-09-2019

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED
OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.



REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Portrait Photograph **G6147156T**

Name
MICHAEL GERALD O'HAGAN

Birth Date 26 Feb 1976
Issue Date 26 Mar 2016
Valid Till 27/03/2021

002551339A



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

	EFFECTIVE DATE
Class 3 Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$	19 Feb 2009

NP 428A

Licence No: G6147156T

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 Number: 5093337471

Cover : Third Party, Fire & Theft

1. Index mark and Registration Number of Vehicle : **SJU1474E**
Chassis Number : **WVWZZZ1KZAU000424**
2. Name of Policyholder : **MOTORWAY CAR RENTALS PTE LTD**
3. Effective Date of Insurance : **02 Oct 2017**
4. Expiry Date of Insurance : **01 Oct 2018**
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/her 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#
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: N/A
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A DBS Bank Ltd
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : MOTOR-WAY CREDIT PTE LTD (00000614920)
Date of Issue : 10 Aug 2017 11:48 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:



Authorised Officer



Chief Executive