

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	22/03/2018 11:24
Date Of Accident	21/03/2018 20:20
Exact Location Of Accident	ANG MO KIO STREET 41 TURNING TO ANG MO KIO AVE 8
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJS393Y
Insured/Policyholder	
Name Of Registered Owner	ANG CHONG PENG
NRIC No	S1456113G
Email Address	E9ANG@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-97889919
Alternative Phone No	OTHERS-97889919

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E200K-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?	YES
If No, Please state action to be taken	
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	DMPCSN3098161700
Cover Note Number	

Driver

Name of Driver	ANG CHONG PENG
NRIC No	S1456113G
Date Of Birth	02/09/1960
Occupation	INDOOR
Date Of Driving Pass	30/10/1981
Driving Experience	36 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97889919
Fax Number	
Contact Number	OTHERS-97889919
Email Address	E9ANG@YAHOO.COM.SG

Address	1 MARYMOUNT TERRACE #19-01
Postcode	574036
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	COLLISION - MAJOR/MINOR RD
Weather Conditions	CLEAR
Road Surface	DRY

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)	2
Passenger 1	NAME: : NG BEE KEOW 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?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJC4937L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE HIRE
Name of Driver	S S JOSHUA
NRIC/Passport Number	S8435494E
Contact Number	92278317
Address	BLK 315 SEMBAWANG VISTA #12-177
Postcode	750315
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	3


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: 22/3/18
11:20

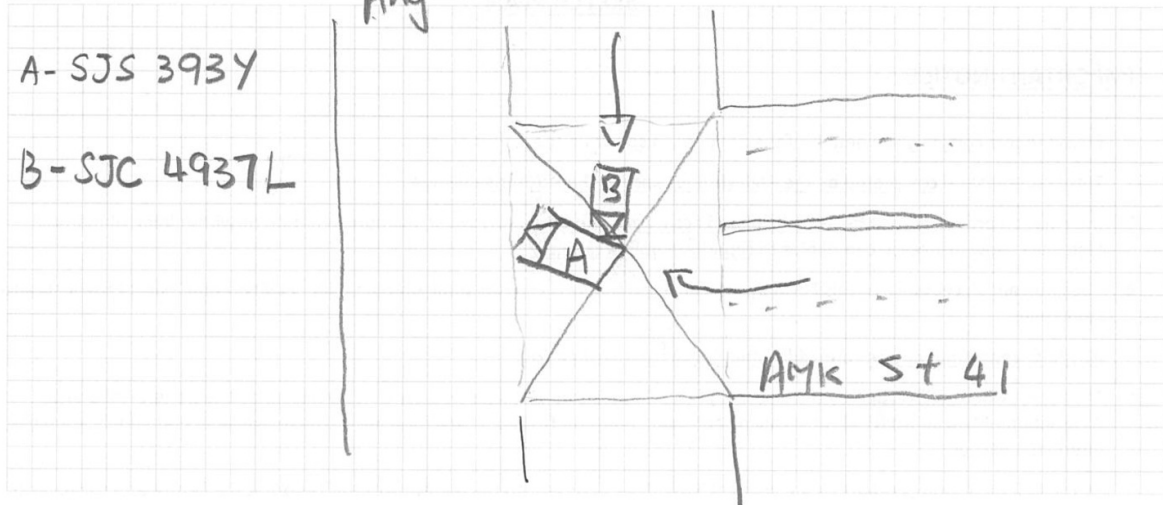
Driver's Signature
(If driver is not the policyholder)
Date & Time:


Reporting Centre Personnel's Signature
Name:

NRIC/FIN No.: Jenny Lim
S6927273H

Ang mo kio Ane 8

B-SJC 4937L



On ~~22~~ 21/03/18 at 20:20 I was travelling from Ang Mo Kio St 41 toward - Ang mo kio Ave 8.
At the junction of Ang Mo kio St 41 and Ang Mo kio Ave 8 while I was turning right to Ang Mo kio Ave 8, the ~~vehit~~ vehicle SJC 4937L hit my vehicle at the right side back door. The ~~what~~ weather was clear and I was quite sure the oncoming vehicles ~~are~~ were at a safe distance away.

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

GIARMC SketchPlanForm V3

Date & Time:

Jenny Lim
S6927273H

Driver's NRIC + Driving License Pg. 1

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1456113G**
Name: **ANG CHONG PENG**

Birth Date: **02 Sep 1960**
Issue Date: **27 Sep 2004**



001288560A



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S1456113G**

Name: **ANG CHONG PENG**
汪忠平

Race: **CHINESE**
Date of Birth: **02-09-1960** Sex: **M**
Country of Birth: **SINGAPORE**



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

	PASS DATE
Class 3 Motor cars =< 3000 kg with =< 7 passengers, exclusive of the driver; and motor tractors /vehicles =< 2500 kg	30 Oct 1981

NP 428A

Licence No: S1456113G

1866652

NRIC No: **S1456113G**

Blood Group: **A+** Date of issue: **07-04-1994**

1 MARYMOUNT TERRACE #19-01
SINGAPORE 574036

NRIC No: **S1456113G** Date: **05/09/2008** No: **6091339**





中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

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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)

TIFICATE No.	DMPCSN3098161700	Engine No : 271956311576 Chassis No: WDB2110412B4
Index Mark and Registration Number of Vehicle	SJS393Y	20 Loyalty
Name of Policy Holder	MR ANG CHONG PENG	
Effective date of the Commencement of Insurance for purposes of the Regulations, Ordinance or Enactment	28 DECEMBER 2017 (13:50 HOURS)	NAMED DRIVERS EX SECT. I..... IN ADDITION TO NAMED DRIVERS EX
Date of Expiry of Insurance	27 DECEMBER 2018	EX SECT. I - AGE <= 25..... EX SECT. I - AGE >= 26..... * AGE AS AT DATE OF ACCIDENT
Persons or Classes of Persons entitled to drive *		EX ON WINDSCREEN.....

(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 REGULATIONS TO DRIVE THE MOTOR VEHICLE OR HAS BEEN SO PERMITTED AND IS NOT DISQUALIFIED BY COURT OF LAW OR BY REASON OF ANY ENACTMENT OR REGULATION IN THAT BEHALF FROM DRIVING THE

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 TRIAL, SPEED-TESTING, THE CARRIAGE OF GOODS OTHER THAN SAMPLES IN CONNECTION WITH ANY TRADE OR USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

EXCESS WHICHEVER IS APPLICABLE FOR LOSSES OCCURRING OUTSIDE SINGAPORE (CONSTRUCTIVE TOTAL LOSS) WILL BE DOUBLED.

ONE TIME WAIVER OF EXCESS FOR THE FIRST S\$1,000 WILL APPLY TO THE INSURED AND NAMED DRIVER 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 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 For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.



Signed By:

Authorised Officer

Authorised Signatory

3 Anson Road #16-00 Springleaf Tower Singapore 079909 Tel: 6389 6111 Fax: 6225 3592 Website: www.china-taiping.com.sg

Accident Photo



Accident Photo



Accident Photo



Accident Photo

