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 witholding 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.

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	ACCIDENT STATEMENT
Date Of Report	23/04/2018 16:38
Date Of Accident	23/04/2018 08:40
Exact Location Of Accident	BLK 40 EXIT CARPARK AT HOLLAND DRIVE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKU708B
Insured/Policyholder	
Name Of Registered Owner	TAN CHIA HOE
NRIC No	S1308173E
Email Address	DESIGN5MELECT@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96731032
Alternative Phone No	OFFICE-64747983
Vehicle Particulars	
Manufacturer	NISSAN
Model	TEANA-2.0 (A)
Exact Purpose for which vehicle was being used at time of accident	PERSONAL
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A28983846- QMY
Cover Note Number	
Driver	
Name of Driver	TAN CHIA HOE

NRIC No S1308173E Date Of Birth 30/04/1958 Occupation **OUTDOOR** Date Of Driving Pass 05/08/1980

Driving Experience 37 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96731032

Fax Number

Contact Number OFFICE-64747983

EMail Address DESIGN5MELECT@GMAIL.COM Address BLK 950 HOUGANG ST 91

#02-306

Postcode 530950

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

Verificie

Insurance Company of Driver's Own Vehicle

#3

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

1

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Number of Passengers (Including Driver)

Was notice of intended Prosecution given?

NO

NO

If Yes, against whom?

Circumstances of Accident

SEE ATTACHED

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 CB7562C

Vehicle Make/Model/Colour TOYOTA GREY

Details Of Properties RIGHT SIDE

Vehicle Category COMMERCIAL VEHICLE

Name of Driver LIM SIEW HOON NRIC/Passport Number S7706110Z

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

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 Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by
 interested parties.
- 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:
 - 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:

23/4/2011

Driver's Signature

(If driver is not the policyholder)

Date & Time

160 K/

TAN CHONG MOTOR SALES PTE LTD

NGAPORE 589823

err

Reporting Ventre Personnel's Signature Name: KURAIZLI

NRIC/FIN No.:

Sketch Plan Pg. 2

SKETCH PLAN	Holland Ir	
		_ CB7562C (gray Private)
	Sku 708 B	Trasfic 17 Lt
		- Holland E Rue

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

date: 23-04.2018 Moring about 8.40 am
1. Tan chia the any vehicle was stopped in front of traffic light. Suddenly CB 7562C hit at the back of my vehicle
light. Suddenly CB 7562C hit at the back of my vehicle
[20] 11일 12일 12일 12일 12일 12일 12일 12일 12일 12일
마다에 마다 아들까지 않는 맛을 보고 있다. 하나 하나 사람이 그렇게 그렇게 그렇게 되었다.
그는 그 마바람들에 작용하다는 마음하는 마음을 하고 바다 하는 다른 사람이 되었다.

DECLARATION

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

Policyholder's Signature
Date & Time 77 4 2015

Driver's Signature (If driver is not the policyholder) Date & Time: TAN CHONG MOTOR SALES PTE LTD 913 DUKIT TIMAH ROAD... SINGAPORE 188828

Beporting Centre Personnel's Signature
Name: Wurat ZAH OSMAN

NRIC/FIN No.:



MSIG Insurance (Singapore) Pte. Ltd. 4 Shenton Way, # 21-01, SGX Centre 2, Singapore 060807 Tel : 65 6827 7880, Fax +65 6827 7800 Co. Reg. No. 200412212G GST Reg. No. 20:0412212G

Certificate of Insurance

ROAD TRANSPORT ACT 1987 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)
THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.X.1

Individual Ownership

MOTOR MAX PLUS

Comprehensive

Certificate No. A 28983846 QMY

Excess: SGD700

Windscreen Excess: SGD100

- 1. Index Mark and Registration Number of Vehicle SKU708B
- Name of Policyholder

Tan Chia Hoe

- Effective Date of the Commencement of Insurance for the purposes of the Act 29/06/2017
- 4. Date of Expiry of Insurance

28/06/2018

Persons or Classes of Persons entitled to drive

Tan Chia Hoe

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

* Provided that the person driving is permitted in accordance with the licensing or other laws or 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.

Limitations as to use

Use only for social domestic and pleasure purposes and for the Policyholder's business.
The Policy does not cover use for hire or reward 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.

* 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.

PLEASE NOTE ALL CLAIMS RELATED REPAIR CAN BE CARRIED OUT AT ANY WORKSHOP OF YOUR CHOICE OR AT ANY MSIG AUTHORISED WORKSHOP LISTED IN THE ATTACHED.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

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) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurers

for Chief Executive Officer











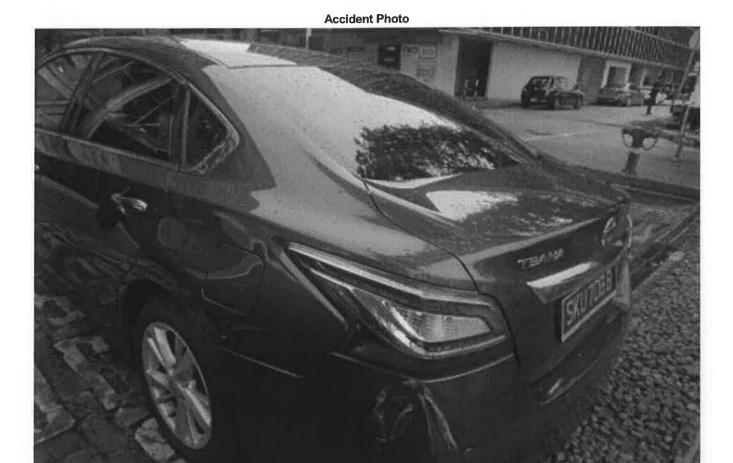












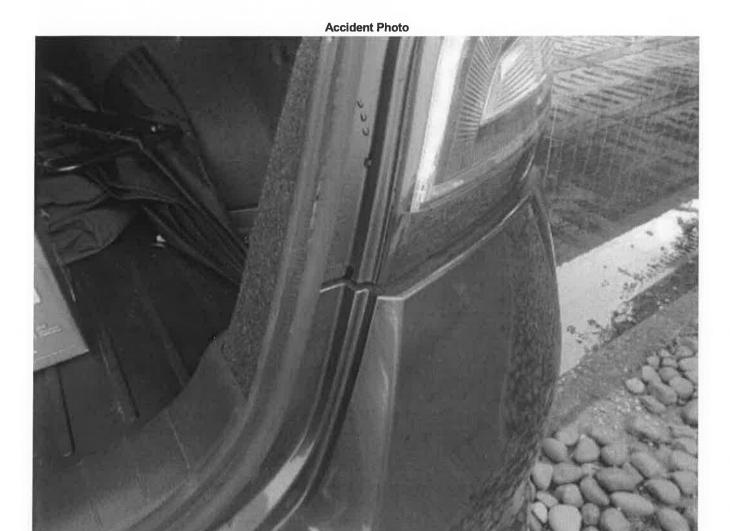












Accident Photo







