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# 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
- 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.

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THE RESIDENCE OF THE PROPERTY	and the state of t					
Sala Of Report	07/05/2018 10:35					
7 The Control of the	06/05/2018 14:15 JUNCTION OF CLAYMORE HILL AND DRAYCOTT PARK					
Tunot Location CE ACCIDENT						
	SINGAPORE  DETAILS OF OWN VEHICLE					
APPENDING THE RESERVE OF THE PERSON OF THE P						
Vehicle Registration Number	SKQ3291L					
Insured/Policyholder	THE WEEK					
Name Of Registered Owner	JONATHAN YEOW SHERNG WEE					
NRIC No	S8097137J					
Email Address	YANGYANG108@HOTMAIL.COM					
Mobile Phone No	(LOCAL) +65-97561182					
Alternative Phone No	OTHERS-90301288					
Vehicle Particulars						
Manufacturer	VOLKSWAGEN					
Model	GOLF A7 1.4 TSI AT 5G13GZ W/O HID					
Exact Purpose for which vehicle was being used at time of accident						
Are you claiming under your own insurance policy for repair to your vehicle?						
If No. Please state action to be taken	REPORTING ONLY					
Vehicle Category	PRIVATE CAR					
Insurance Company	ALLE AVE LTR					
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.					
Type Of Coverage	COMPREHENSIVE					
Fleet Policy	NO					
Policy Number	A 80417393 AVW					
Cover Note Number						
Driver						
	ZHANG YANG YANG					

ZHANG YANG YANG Name of Driver S7968705G NRIC No 23/03/1979 Date Of Birth INDOOR Occupation 30/04/2011 Date Of Driving Pass 7 YEARS AND 0 MONTHS Driving Experience FEMALE

Gender (LOCAL) +65-97561182 Mobile Number

Fax Number OTHERS-90301288 Contact Number

YANGYANG108@HOTMAIL.COM EMail Address

Address

4 LADY HILL ROAD

Postcode

258673

Was driver an employee of the Insured's Company NO

If No. Relationship of the Driver with the insured

SPOUSE

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

CLOUDY

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

YES

Foreign Vehicle Registration Number

JPU3613 (MOTORCYCLE)

Number of vehicles involved in the accident

2

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO

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)

3

Passenger 1

NAME:

DAUGHTER

GENDER:

: FEMALE

Passenger 2

NAME:

: MOTHER

GENDER:

: FEMALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

ORCHARD NEIGHBOURHOOD POLICE CENTRE

ROAD: 51 KILLINEY ROAD , POSTCODE: 239572 , COUNTRY:

SINGAPORE

Police Station Address Police Station Contact

TEL NO: 1800-7359999 - FAX NO: 67331934

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180506/2074

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

JPU3613

Vehicle Make/Model/Colour

Details Of Properties

MOTORCYCLE

Vehicle Category Name of Driver

SHASINDRAN A/L NADUNG SILIAN

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

G0989480U 82296899

#### SKETCH PLAN

### 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.
- 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 liability.
- 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.
- The 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.
- 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 aforesald.
- 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:
  - 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:

7/5/18

Reporting Centre Personnel's Signature
Name: WATTON

NRIC/FIN No.

	Che	Smore HILL	
C	A A	LOAMING BAY	A) SKQ3291L B) JPU 3613

### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

2,004
Line Mills
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Chi Co
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### 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: 7/5/20/8

(0:00 am

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





Police Station Of Origin: Orchard N.P.C

51 Killiney Road SINGAPORE 239572

Tel No: 1800-7359999

1 of 3 Report No. T/20180506/2074

## REPORT OF A TRAFFIC ACCIDENT

06/05/20	e Report N 18 18:24	Made:	Vide Report No.: E/20180506/0129	Station Diary No.: 122		
informan	ant's Particulars					
	Informant: ANG YAN		Address: 4 LADY HILL ROAD SINGAPORE 258673			
ID Type / NRIC NO	ID No.: / S79687	05G	Contact No.: Home/Office: Mobile: 90301288			
Nationalit BRITISH	y:		Email:			
Sex: Female	Age: 39	Date of Birth: 23/03/1979	Type of Informant: Driver			
Race: Chinese			Language:	Institution / School Name:		
Occupation: DOCTOR			Driving Licence Information: Class: 3	Date of Expiry:		

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 06/05/2018 14:15	Type of Location Straight Road	
CLAYMORE  Alighting poin Weather:	HILL t before American Club	Road Surface:	l r	Dood County 11 1 11	
Olambia		Dry		Road Speed Limit:	
Traffic Flow:		Traffic Control:	1	Traffic Volume: Light	
Two Way			1	_ight	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SKQ3291L	Car				No Damage	2

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA
STATE OF	
SENTIMENTAL	
MALAY	
NAME OF THE PERSON OF THE PERS	





2 of 3

Report No. T/20180506/2074

Police Station Of Origin: Orchard N.P.C 51 Killiney Road SINGAPORE 239572 Tel No: 1800-7359999

#### CONTINUATION OF REPORT

Driver			The state of the s			
Name	ZHANG YANG YANG		ID No.	3	S7968705G	
Related Vehicle	SKQ3291L (Car)		Conta	ct No.	90301288	
Hospital/Clinic	NIL		Class Drivin Licent Expir	g	Class: 3 Date of Expiry: NIL	
Date Treatment	NIL Date Dis			charge	NIL	
	ted Medical Leave	NIL	Degree o	f Injury	NIL	

#### Brief Details.

On 6/5/18 at about 1415hrs, I drove my vehicle to exit from Tanglin Club and I had parked my vehicle (SKQ3291L) at the alighting point along Claymore Hill towards Claymore Road as I wanted to check the GPS for the routes. Subsequently, I slowly drove my vehicle out from the alighting point after making sure that there is no vehicle behind me. While I was about drove off, a Malaysia motorbike (JPU3613) suddenly appeared on my right side and I believed that the right side of my vehicle had collided to the left side the motorbike. Subsequently we had called for police assistance.

The biker had suffered some scratches on his right knee cap area however my two passengers and myself did not suffer from any injuries. My vehicle has no damages however the biker claimed that the left side of the motorbike body has some scratches due to the accident. There is no in-vehicle camera in my vehicle.

There is also a witness who informed that he will be lodging a police report with regards to this accident.

Traffic Police was at scene and requested me to lodge a police report.





Police Station Of Origin: Orchard N.P.C 51 Killiney Road SINGAPORE 239572 Tel No: 1800-7359999

3 of 3 Report No. T/20180506/2074

CONTINUATION OF REPORT

## Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: E / Sgt 2 YAN LUFENG	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 06/05/2018 18:24
Officer In Charge Of Case: TP / GIT / SI THABAGESH JEYATHESH Contact No.: 65476232	Classification Of Case:
Authentication Stamp	

# ACCIDENT STATEMENT

	ACCI	DENT DAYE: (06 / 05 / 2018) (DD/MM/YYYY), TIN	NE: (14:15)(HH:MM)
4.5	1000	TION: January of Claymor Hill an	1 Drays att Paux
100	LOCA	HON JEWICHOT J CONTROL 1101	o Welcell land
	1.	DETAILS OF VEHICLE	
	5.77	a) VEHICLE NUMBER: SKR 32911	
		DINSURANCE COMPANY: MAIG	
		CIPOUCY NUMBER: A 80 4173 93 A	AVW
		DIPOUCY TYPE: [COMPREHENSIVE / THIRD PARTY /	
		HAKE & MODEL: VOLKSWAGEN, C	SalF
		MTYPE: (SALOON / COUPE / MPV /V AN / LORRY / M	
		g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL /	
		h) PURPOSE OF USING AT ACCIDENT TIME: PO	
		I) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE	
		IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPOR	
	2.	INSURED / POLICY HOLDER	,
D	-570	AINAME Jonethan Year shering wee	(MADE / FEMALE)
		bINRIC/FIN/PASSPORT: 5809 71371 C	ONTACT: 9756 1152
		CLADDRESS: 4 LADY HILL PLD	
S W	®	* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER	3
this of pas	ssen of	DRIVER	
Cincluding	246	OINAME: Zhang Yang Yang	(MALE / FEMALE)
1 3	+1010501	DIRKIG/FIN/FASSFORT	ONTACT: 90301285
		C)ADDRESS: SAME	
		*d) DATE OF BIRTH: (_23 / 05 / (979 )(DD/MM/	VVVVI
		e)OCCUPATION: (INDOOR / OUTDOOR)	(((())
		FIDATE OF DRIVING PASS -: 3/04/2011	M 52
	4	WAS DRIVER AN EMPLOYEE OF THE INSURED'S	
		IF NO, RELATIONSHIP OF THE DRIVER WITH IN:	
	5.	g) WEATHER CONDITION: (CLEAR / RAINING / OTHE	
		b)ROAD SURFACE: ORY / WET / OTHERS	1927-1
	6,	WAS ANYBODY INJURED (YES / NO)	
	7.	a) REPORTED TO POLICE (ES / NO)	tile sum H is
		IF YES, PLEASE STATE WHICH POLICE STATION: K	-illing pails steeting
EAT.	8.	THIRD PARTY VEHICLE JTM 3615	
in of least	thy tr	a) VEHICLE NUMBER: 609894	ODEL: Motor Sike
Sududies :	distri	b) DRIVER'S NAME: Shagnolven All Madie	ONTACT: 8729 6599
6. %		C) NRICAELIN/PASSPORT: CTOTATTO C	ONTACT: 8729 6349
	9.	THIRD PARTY VEHICLE	opri.
in deep	225,175		ODEL:
Tar Taretine	doloas	e) DRIVER'S NAME:C  1) NRIC/FIN/PASSPORT:C	ONTACT:
		I) NKIC/FIN/FASSPORI:C	ONIACI.

Chail = Yargyansios @ homeil com

fax =



MSIG Insurance (Singapore) Pte. Ltd. 4 Shenton Way #21-01 SGX Centre 2 Singapore 069807 Tel: (65) 6827 7888 Fax: (65) 6827 7800 Co. Reg. No. 200412212G. GST Reg. No. 20-0412212G

# Certificate of Insurance

ORIGINAL

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 VW DRIVEEASY Comprehensive

Certificate No. A 80417393 AVW

Excess: SGDS00

Windscreen Excess: 83D100

 Index Mark and Registration Number of Vehicle SKQ3291L

2. Name of Policyholder

JONATHAN YEOW SHERNG WEE

- Effective Date of the Commencement of Insurance for the purposes of the Act 20/11/2017
- 4. Date of Expiry of Insurance 19/11/2018
- Persons or Classes of Persons entitled to drive

JONATHAN YEOW SHERNG WEE Zhang Yang Yang

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 (Malaysla), are not to be included under these headings.

PLEASE NOTE ALL CLAIMS RELATED REPAIR MUST BE CARRIED OUT AT VOLKSWAGEN CENTRE SINGAPORE.

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.

Signature / Date

Counter-Signatory:

Winner Consultancy Pte, Ltd.

Army Ler Senior Vice President, Agencies

Approved Insurers

This certificate is not valid unless it is signed for & on behalf of the Company and Counter-Signed by a duly authorised representative of the Counter-Signatory.

XWCPLSASX2017100413254390

## REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$7968705G





ZHANG YANG YANG



CHINESE 23-03-1979 F Country of birth CHINA



9118550



№87968705G

BRITISH Date of Issue 08-03-2011

4 LADY HILL ROAD SINGAPORE 258673

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES!

FFEETIVE DATE

Motor Cars=<3000kg with =<7 passengers, exclusive 30 Apr 2011 of the driver; and other motor vehicles = 2500kg

REPUBLIC OF SINGAPORE DRIVING LICENCE

ZHANG YANG YANG

turn time 23 Mar 1979 --- Date 30 Apr 2011

S7968705G



NP 428A