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 <u>truthful and accurate</u> 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

	aforesaid.	
		ACCIDENT STATEMENT
	Date Of Report	12/05/2018 14:08
	Date Of Accident	11/05/2018 14:40
	Exact Location Of Accident	REPUBLIC AVE SLIP RD TO OPHIR RD (ECP TWDS AYE)
	Country/State of Loss	SINGAPORE
	D	ETAILS OF OWN VEHICLE
	Vehicle Registration Number	SKL9221B
	Insured/Policyholder	
	Name Of Registered Owner	LIM MEE LAN
	NRIC No	S6978508E
	Email Address	NOEMAIL
	Mobile Phone No	(LOCAL) +65-81837167
	Alternative Phone No	OTHERS-81837167
	Vehicle Particulars	
	Manufacturer	TOYOTA
	Model	ESTIMA-2.4 AERAS (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	THIRD PARTY
	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	DMPCSN3102961701
	Cover Note Number	
	Driver	
	Name of Driver	CHIN SIEW CHOI
	NDIO N.	000000401

Name of Driver

NRIC No

S6880218J

Date Of Birth

16/07/1968

Occupation

OUTDOOR

Date Of Driving Pass

CHIN SIEW CHO

S6880218J

16/07/1968

OUTDOOR

24/03/1993

Driving Experience 25 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-91080908

Fax Number

Contact Number

EMail Address NOEMAIL

APT BLK 112 BEDOK NORTH ROAD #12-341 Address

Postcode 460112

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 **COLLISION - HEAD TO REAR**

Weather Conditions **CLEAR** Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO 2 Number of vehicles involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

YES

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

Was any other material or property damaged?

NO

Number of Passengers (Including Driver)

2

Passenger 1

NAME: : THOMAS GENDER: : MALE

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

AS PER ATTACHED 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 SGS4680C

Vehicle Make/Model/Colour TOYOTA PICNIC LIGHT BLUE COLOUR

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

96606009 **Contact Number**

Address Postcode

Insurance Company Name

Nature Of Damage **FRONT**

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

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- 7. 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:

- 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)
 - (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
- 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.
- 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.
- 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:

Reporting Centi ersonnel's Signature

Name: NRIC/FIN No.: 7. B. 440

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	Sketch Pla	n #2 Pg. 1								
SKETCH PLAN			K.	o(AYF)						
DESCRIBE CIRCUMSTANCES OF T			20a4 A Sk	1221B						
My vehicle SKL9221B along Republic Ave.										
At the Slip road to ophin Road (ECP-7AYE) I stopped my car and checked for traffic Coming from my right. Puddenly my car was. ?										
banged from										
vehicle SGS 4680C had banged onto my car										
Mar. I too	olc sone	photes. 7	hat Is A	ALL:						
DECLARATION				·						
DECLARATION I/We declare the foregoing particulars are true in every respect.										
Policyholder's Signature Date & Time: GIARMC SketchPlanForm_V3	Driver's Signature (If driver is not the policyho Date & Time:	///OAM Re	eporting Centre Personn ame: RIC/FIN No.:	6						
O() \$4.										

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中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Co. Reg. No. 200208384E

MX1/NDF R SN AN0472A Cov.Type: C

MOTOR PRIVATE CAR

5. Persons or Classes of Persons entitled to drive

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)

ORIGINAL

Engine No :2AZC046947

UE.	RIFICATE NO.	DMPCSN.	31029	61701		Chano: ACR507028872
1.	Index Mark and Registration Number of Vehicle	SKL922	18			AUTOSAFE
2.	Name of Policy Holder	LIM ME	E LAN	(NON-D	RIVER)	
3.	Effective date of the Commencement of Insurance for the purposes of the Regulation Ordinance or Enactment	ıs,	20 00	ctober	2017	Named Drivers Ex Sect. I \$\$1,000.00 Additional Ex Other than Named Drivers:
4.	Date of Expiry of Insurance		19 00	ctober	2018	Ex Sect. I - Age <= 25
	•					EX ON WINDSCREEN S\$100.00

Any 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.

6. 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, 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.

Excess whichever is applicable for lossed occurring outside Singapore (Conttructive Total Loss/Theft) will be doubled.

One time Waiver of Excess for the first \$\$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

HIRE PURCHASE CO.: INDEX CREDIT PTE LTD AS HP OWNER

* 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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: ____CCL_INSURANCE_AGENCY_PTE_LTD
Authorised Officer

Authorised Signatory

5

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. \$6978508E



Name



LIM MEE LAN

林 Race

CHINESE

Date of Birth

10-04-1969

Country of Birth

MALAYSIA



NRIC No. S6978508E



8237429

Nationality

MALAYSIAN

Blood Group Date of issue

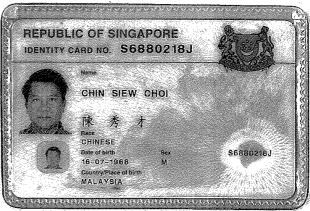
13-03-1997

APT BLK 112 BEDOK NORTH ROAD #12-341 SINGAPORE 460112

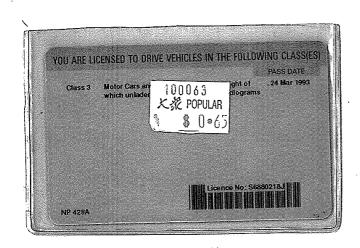
NRIC No: \$6978508E

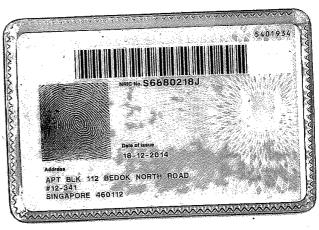
DRIVER IC N DL Pg. 1





Drive-





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