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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 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.

aforesaid.	ou nereby consent to the archiving of this report at the centre and to copies of the report being made available
<b>国</b>	ACCIDENT STATEMENT
Date Of Report	16/05/2018 10:10
Date Of Accident	15/05/2018 19:30
Exact Location Of Accident	ALONG QUEENSWAY TOWARDS COMMONWEALTH
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJW613S
Insured/Policyholder	
Name Of Registered Owner	PETRUS WOUTER VAN ECHTELT
Passport No/FIN	G5390733X
Email Address	PERRYVANECHTELT@GMAIL.COM
Mobile Phone No	(LOCAL) +65-93804210
Alternative Phone No	OTHERS-93804210
Vehicle Particulars	
Manufacturer	HYLINDAL

Manufacturer	HYUNDAI
	SANTA FE
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?

If No, Please state action to be taken THIRD PARTY Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD

NO

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 5094759202

Cover Note Number

Driver

Name of Driver PETRUS WOUTER VAN ECHTELT

Passport No/FIN G5390733X Date Of Birth 25/01/1973 Occupation INDOOR Date Of Driving Pass 24/07/2014

Driving Experience 3 YEARS AND 9 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-93804210

Fax Number

Contact Number OTHERS-93804210

EMail Address PERRYVANECHTELT@GMAIL.COM Address

42 WATTEN ESTATE

Postcode

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 - 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

SKP1961E

Vehicle Make/Model/Colour

BMW X3

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

NG SONG HUA

NRIC/Passport Number

S1222512A

Contact Number

98263852

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## SKETCH PLAN

## IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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 liability.
- 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. 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.
- 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) 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
- 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.
- (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:

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

## DECLARATION

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

Policyholder's Signature

Date & Time: 1615 1200

9:05

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

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

#### Claim Handling Accident MT/0994598 5094759202 Vehicle No. 578/6135 IGST Registration No. Polycyholder NATE. G5390733H VAN ECHTELT PETRUS WOUTER **Policyholder Name** WIVE CLASSIC Lassing Product Code PRIVATE CAR INSURANCE Cosm Type Contact No.(Home) Cortact Na. (Office) Contact Sul/Mobile) WERRITATION. fox \* econs Email Address Special Remark eCode Resourt KFI. = No. Yes Powate Hire NCD ENTHERWARD NO. NCO Protection ✓ Accident Details Acoders Type Collision - Head to Rear 17705/2018 09:42 Accident Report Within 24 hrs. Yes. Time of Acoders his min Country of Accident Singapure Date of Accident 15/05/2018 ICH No. Reporting Centre Orange Force ALONG QUEENSWAY TOWARDS COMMONWEALTH Accident Encatron P Benefits Trees. Additional Excess Windsomen Excess: 100:00 Dwn damage Excess 000.000 Dutside Singapare GD Excess 600.00 Unnamed Driver Excess 0.00 0.00 Cluside Singapore TP Excess 0.00 GST Registration Date GST Registered Yes **GST Status Verified** GST Registration No. Modification History → Policyholder Mailing Address Address ) SINGAPORE 287619 WATTEN ESTATE Address 2 Address 1 42 WATTEN ESTATE NOAD Post Code 287519 Address 4 Address Type Singapore address Balated Policy Number 2004799302 P OI Driver Info Hain Driver VAN ECHTELT PETRUS WOUTER Driver Type Sinver DOB-Unnamed driver Name Driver NEED G5390733K 25/01/1953 Driving Experience Driver Age Register Date of Driver License: 24/07/2014 Contact No.(Office) Contact No.(Name) Contact No.(Mobile) 91801210 WATTEN ESTATE Address 3 \$1NGAPORE 287519 42 WATTEN ESTATE SOAD Address 2 Address 1 Past Code Address 4 Address Type Sirrigapore address 287519 Louis No. Dijes he win a Singapore Registered car? Tes o No Driver Vehicle No. 5180135 Driver Trisurer Cumpany NYUG Breathaiyser or Blood Test Reading? Any InjuryT Yes - No Modification (Hatory Claim 001 New Insured Name Insured NRIC G5390733X WAS ECHTELT PETRUS WOUTER Cisim Type. \* OD-MX Contact No.(Office) Contact No.(Pletrie) Contact No.(Home) 98338556 OI Vehicle Number TP Venicle Number 57W#135 Name of Preferred Workshop Claim Description SJW6135 / SK#1981E ON 15 May 2018 Preferred Workshop Contact . Incured continty . Nor at Fault Preferend Repair Option GIA require Received Preferred Workshop, Na Require Finalisation Dalm Close Date 17/05/2018 00:00 Date Resistered 17/05/2018 09:45 Report Taken By ROSLI WAHAB C. Pront AK letter Save Submit Attachment Chilty No. 001 Accident No. 947/09945/69 Last Doc. Received \* Yes D. No. **Unfoat Date** 17/05/2015 09:47 Category \* ChinEdwinial Urgency \* Description \* Clear Please Select Chuose File No file chosen \* 100 Clear Hease Select **Normal** Choose File No file chosen \* NO ٠ Clear Please Select tiormal Choose File No file chosen Y NO Normal \* Clear Please Select Choose File No file chosen ٠ Clear Please Select Chagse File No file chasen \* 40 \* Normal \* NO \* Normal . Chacce File No file chosen Clear Please Salect Sand Mussige Upload Message Read - Attachment Liet Attachment Uploaded Br/Date Cidegory streenty Description NAC\_BURIT\_MERAH\_BODE/BI NATIONAL ASSESSMENT CENTRE SERVICES (8 UKIT MERAH)) on 17 May 2018-09:47 Photos 3018-1-17 Philips NAC\_BUKIT\_MERAH\_BODE76; NATIONAL ASSESSMENT CENTRE SERVICES (B. UKIT MERAH)) oo 17 May 2018 99:47 Photos 2018-5-17 Edit Photos Photos 2018-5-17 Self NAC\_BUKIT\_MERAH\_800676( NATIONAL ASSESSMENT CENTRE SERVICES (#: UKIT HERAH)) un 17 May 2018 09:47 Photos

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Display in New Winiting Scan and uptrading

# ACCIDENT STATEMENT

	ACCIDENT DATE: 15/5/2018 (DD/MM/YYYY	), TIME:(19:30)(HH:MM)
712	LOCATION: QUEEKSWAY TOWARDS	Commercial Koczis
	1. DETAILS OF VEHICLE	a
	OVEHICLE NUMBER: SJW6135	
	DINSURANCE COMPANY: NTUC I MCOULE	<u> </u>
	CIPOLICY NUMBER: 5094759202	
	dIPOLICY TYPE: (COMPREHENSIVE / THIRD PAR	RTY / THÍRD PARTY FIRE &THEFT)
	EIMAKE & MODEL: HVUHDAI SAHLA FE	
	(TYPE:(SALOON / COUPE / MPY /VAN / LORR	Y / MOTORCYCLE / OTHERS)
	gIVEHICLE CATEGORY: (PRIVATE / COMMERCI	AL / MOTORCYCLE)
	h) PURPOSE OF USING AT ACCIDENT TIME: PL	IVATE USE
	IJ ARE YOU CLAIMING UNDER YOUP OWN INSU	
	IF NO, PLEASE STATE THIRD PARTY CLAIM / RE	PORTING ONLY)
	2. INSURED / POLICY HOLDER	7.7
	ANAME: PETILUS WALTER VANECHTE	(MALE / FEMALE)
	DINRIC/FIN/PASSPORT: 65390733 X	CONTACT: 4380440
	CIADDRESS: 42 WATTEN ESTATE RD	
	A CONTRACT TO A 1 S DOUGH ALSO DOLLOWING	NDER
a	* CONTINUE TO 3.d IF DRIVER ALSO POLICY HO	), LUEK
the of passon		(MALE / FEMALE)
Cinduding de	b) NRIC/FIN/PASSPORT:	CONTACT:
(1)	cJADDRESS:	
Samuel Sec.	C)NOONESS.	
	*d) DATE OF BIRTH: (25/01/1973)(DD/	MM/YYYY]
	e)OCCUPATION: (INDOOR / OUTDOOR)	A STANSON OF THE STAN
	FIDATE OF DRIVING PASS - 24 1071	2014
	4. WAS DRIVER AN EMPLOYEE OF THE INSUR	ED'S COMPANY? (YES / NO)
	IF NO, RELATIONSHIP OF THE DRIVER WIT	H INSURED:
	5. a) WEATHER CONDITION: (CLEAR / RAINING /	OTHERS
	b)ROAD SURFACE: (DRY / WET / OTHERS	
	6. WAS ANYBODY INJURED (YES / NO)	
	7. a) REPORTED TO POLICE (YES / NO)	. 29
	IF YES, PLEASE STATE WHICH POLICE STATION	-
18	8. THIRD PARTY VEHICLE	MODEL: BMW X3
75 St (4.35%)	O VEHICLE NUMBER: SEP 1961 E	MODEL: BANK ~ 3
. Instruktiva eta	c) NRIC/FIN/PASSPORT: S 1222 5124	CONTACT: 98263852
11	9. THIRD PARTY VEHICLE	
- T-10 Miles	A) VEHICLE NUMBER	MODEL:
\$ 51 A \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	a) PRIVER'S NAME	TANK DELLA
To the the	d) VEHICLE NUMBER:	CONTACT:
es man	S III (MOSTILATIONS ARE)	
100	14	

CMail = REDEYVANECHTECT @ GMAIL COM

Pax =



## EMPLOYMENT PASS

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

Employer BW PACIFIC PTE, LTD.



VAN ECHTELT PETRUS WOUTER

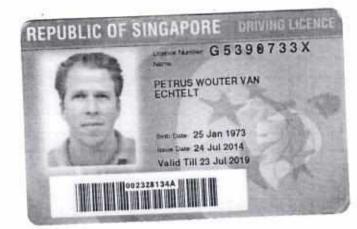
CHIEF FINANCIAL OFFICER

G5390733X

31-08-2017 02-11-2017

02-11-2019

L8420397



# VISIT PASS

Immigration Regulations

VAN ECHTELT PETRUS WOUTER



Date of Birth Sex

25-01-1973 M

Date of Issue

G5390733X 02-11-2017

Date of Expiry

NETHERLANDS 02-11-2018

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



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

EFFECTIVE DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive 24 Jul 2014 of the driver; and other motor vehicles =< 2500kg

Licence No. G5390793X

NP 428A



# 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: 5094759202

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle

: SJW613S

Chassis Number

: KMHSH81BMAU590988

2. Name of Policyholder

: VAN ECHTELT PETRUS WOUTER

3. Effective Date of Insurance

: 05 Oct 2017

4. Expiry Date of Insurance

: 04 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 business or profession.

## This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) 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) : \$\$600 EXCESS (SECTION 2) : N/A WINDSCREEN EXCESS : \$\$100 ADDITIONAL EXCESS - N/A

UNNAMED DRIVER EXCESS : PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP : NO INSURE WITH COE : YES NCD PROTECTION : NO TRANSPORT ALLOWANCE : NO **EXCESS WAIVER** : NO

PRIMARY DRIVER : VAN ECHTELT PETRUS WOUTER

NAMED DRIVER (1) : N/A NAMED DRIVER (2) : N/A HIRE PURCHASE COMPANY : N/A

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

: ASSURE PTE. LTD. (00000572842)

Date of Issue

: 04 Oct 2017 11:33 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive