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

	ACCIDENT STATEMENT
Date Of Report	22/05/2018 12:35
Date Of Accident	20/05/2018 17:15
Exact Location Of Accident	JUNCTION OF MORSE ROAD AND TELOK BLANGAH ROAD
Country/State of Loss	SINGAPORE
· ·	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKK2188R
Insured/Policyholder	3KK2 100K
•	IONOK OALKIA
Name Of Registered Owner	KWOK SAI KUAI
NRIC No	\$1472459A
Email Address	SKKWOKDES@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98364155
Alternative Phone No	OTHERS-98364155
Vehicle Particulars	
Manufacturer	INFINITI
Model	Q50
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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	18-MU005270-R01
Cover Note Number	
Driver	
Name of Driver	KWOK JI HAO DONOVAN

NRIC No S9605047Z

Date Of Birth 28/01/1996

Occupation INDOOR

Date Of Driving Pass 07/11/2016

Driving Experience 1 YEAR AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97262069

Fax Number

Contact Number

EMail Address KWOK_DONOVAN@YAHOO.COM.SG

8 BEDOK RIA CRESCENT Address

Postcode 489824

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured **CHILDREN**

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 WET

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? YES

Was any injured conveyed to hospital by

ambulance?

YES

NO

YES

1

Was any other material or property damaged? YES

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

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name **TELOK BLANGAH NPP**

ROAD: 51 TELOK BLANGAH DRIVE #01-116, POSTCODE: 100055, Police Station Address

COUNTRY: SINGAPORE

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT: T/20180520/2074.

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

FBF718M Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category **MOTORCYCLE**

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

DETAILS OF INJURED PERSON 1

Name

Approximate Age

Injuries Sustain

Injured person in which vehicle? FBE718M

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

YES

Address

Postcode

Sketch Plan Pg. 1

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.
- 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
- 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)
 - (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")
- all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted (b) 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 (c) 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 22 MAY 2018

12:30pm

Driver's Signature (If driver is not the policyholder) Date & Time 2 2 MAY 2018

12-30pm

Reporting Centre Personnel's Signature
Name: Pon Kwee Choo

S6840583A NRIC/FIN No.:

Sketch Plan Pg. 2

KETCH PLAN	ing and the second of the seco		
			<u></u>
	8		
	35	X	
	Mase	1 1 1 2 2 2 2 2 2 2 2 2	
Ho	76)		
Bus			
Motorcycle	[car] Telo	k Bluggh Rd	
ESCRIBE CIRCUMSTANCES O			
Please refer to	Polia report: 7,	12018052012074	
1. 102 . 10			
· · ·	 		
		 -	
		<u> </u>	
***		· · · · · · · · · · · · · · · · · · ·	
······································	-		
		·	
<u> </u>			
		_	
· · · · · · · · · · · · · · · · · · ·		- -	
ECLARATION			
We declare the foregoing particul	ars are true in every respect.		\
	1 de		<i>)</i> ,
	1900	\$	∠
olicyholder's Signature	Driver's Signature	Reporting Centre Pe	rsonnel's Signature
ate & Time: 22/05/18	(If driver is not the policyholder)	Name: P	oh Kwee Choo
ARWC Studinplace on 12.30 pm.	Date & Time:	NRIC/FIN No.:	S6840583A
AN VIC SECRETIMENT OF SERVER	22/05/2018 12:30pm	1	/





Police Station Of Origin: Telok Blangah NPP 51 Telok Blangah Drive #01-116 SINGAPORE 100055 Tel No: 1800-2729999

1 of 3 Report No. T/20180520/2074

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/05/2018 19:18			Vide Report No.:	Station Diary No.: 19		
Informant	's Particu	ars				
Name of It	nformant:		Address:			
KWOK JI I	HAO DON	OVAN	8 BEDOK RIA CRESCENT SINGAPORE 489824			
iD Type / i	D No.:		Contact No.:	:		
NRIC NO / S9605047Z			Home/Office:	Mobile: 97262069		
Nationality	<i>ı</i> :		Email:			
SINGAPO	RE CITIZE	N		·		
Sex: Age: Date of Birth:			Type of Informant:			
Male	22	28/01/1996	Driver			
Race:			Language:	Institution / School Name:		
Chinese			English			
Occupatio	n:		Driving Licence Information:			
Student			Class: 3	Date of Expiry:		

General Informati	on of the Accident			
Type of Accident:	Injury Conveyed By Ambulance	Drink e Drive: No	Date/Time of Accident: 20/05/2018 17:15	Type of Location: T-Junction
Location: Along Road 1 MORSE ROAD				
	ok Blangah Road and Mor		ds Mount Faber	1
Weather:	. Ro	ad Surface:		Road Speed Limit:
Cloudy	We	et		30 Km/h
Traffic Flow:	Tra	affic Control:		Traffic Volume:
Two Way	No	t Controlled	•*	Light ·
Type of Collision: Between Moving	Vehicles - Head To Side			Anyone conveyed by ambulance:

Details of Ve	ehicle Involved			en de la companya de	a participation	
Vehicle No	Туре	Make	Model	Color .	Condition	No of Passenger
FBE718M	Motorcycle				Slightly	0
	•				Damaged	
SKK2188R	Car		,	•	Slightly	0
			•		Damaged	

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





Police Station Of Origin: Telok Blangah NPP 51 Telok Blangah Drive #01-116 SINGAPORE 100055 Tel No: 1800-2729999 2 of 3 Report No. T/20180520/2074

CONTINUATION OF REPORT

Driver	\$.	Value 1		1	73. %. 16	
Name	KWOK JI HAO DONG		ID Ņo	•	S9605047Z	
Related Vehicle	SKK2188R (Car)			Conta	ct No.	97262069
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g ce &	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc	harge	NIL:	
No. of Days granted Medical Leave NIL		NIL	Degree of	Injury	NIL	

Brief Details.

On 20/05/2018 at about 1715hrs, I was driving towards Telok Blangah Road in my Infiniti Q50 white coloured car with register number SKK2188R. I was heading to Mount Faber.

I was about to turn into Morse road. I checked my left side mirror and my blind spot and it was clear. I also signaled before making the turn. As I made my left turn my front left side of the car suddenly hit onto a motorcycle. The rider fell. I then stopped and alighted to make a check. The rider was conscious however I did saw abrasions on his arms and legs. I then called for ambulance.

Later police and ambulance came to the scene. The rider was then conveyed by the ambulance. I was then advised by the police to make a police report.





Police Station Of Origin: Telok Blangah NPP 51 Telok Blangah Drive #01-116 SINGAPORE 100055 Tel No: 1800-2729999

3 of 3 Report No. T/20180520/2074

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 Informant:
Jale -
Date/Time: 20/05/2018 19:18
Classification Of Case:
SN 045

CERTIFICATE OF INSURANCE Pg. 1

Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No.: M2-0000023-4) 20 McCallum Street #09-01 Toklo Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmls@tokiomarine.com.sg W: www.tokiomarine.com

A member of the Tokio Marine Group



Certificate of Insurance

FORM MX1

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)

Policy No.: 18-MU005270-R01 (Private Motor Car)

1. Index Mark and Registration Number

SKK2188R

Chassis No.: JN1BCAV37Z0480133

of Vehicle

2. Name of Policyholder

MR KWOK SAI KUAI

3. Effective date of the Commencement of Insurance for the purposes of the Act

19/04/2018

4. Date of Expiry of Insurance

22/03/2019

- 5. Persons or Class of Persons entitled to drive*
 - (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 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.
- 6. 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 or the carriage of goods (other than samples) in connection with any trade or business or use for any purpose in connection with the Motor

* 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION Account: 0751DDA

Insurance Plan: Limit for total loss or theft:

Comprehensive Approved Workshop Plan

Policy Excess:

Prevailing Market Value

Own Damage Claims

SGD 1,500 Windscreen Excess SGD 100

Financial Interest:

DBS BANK LTD

Tokio Marine Insurance Singapore Ltd.

Authorised Signature

User Name: Intermediaries from TM O Printed 19/02/2018

OWNER'S NRIC & DRIVING LICENCE Pg. 1





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

TYPES DATE

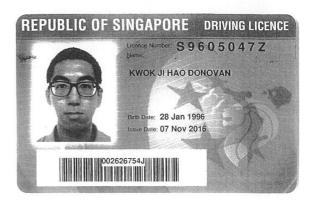
TYPES A

Motes Caus and Moter Tractives the weight,
which uniteden does not exceed 2500 bilegrams





DRIVER'S DRIVING LICENCE Pg. 1



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

Class 3 Motor cars with unladen weight =< 3000kg with =< 7 07 Nov 2016 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg

NP 428A

DRIVER'S NRIC Pg. 1

REPUBLIC OF SINGAPORE







KWOK JI HAO DONOVAN

Race CHINESE

Date of birth 28-01-1996

Country of birth



4792244





NRIC No. S9605047Z

11-11-2011

8 BEDOK RIA CRESCENT SINGAPORE 489824

Accident Photo



Accident Photo



Accident Photo



CHASSIS NUMBER







Scene Photo





Scene Photo



Scene Photo