

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 withholding 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	04/06/2018 10:03
Date Of Accident	02/06/2018 15:30
Exact Location Of Accident	CTE TOWARDS JALAN BUKIT MERAH
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC5023X
Insured/Policyholder	
Name Of Registered Owner	HTPL TOURS & TRAVELS PTE. LTD
Co Reg No	201728886Z
Email Address	JIJIBINDU@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-90662045
Alternative Phone No	OFFICE-62554754
Vehicle Particulars	
Manufacturer	TOYOTA
Model	HIACE-3.0 COMMUTER GL (A)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5099337368
Cover Note Number	
Driver	
Name of Driver	JIJI ISAAC
NRIC No	S7262292H
Date Of Birth	30/05/1972
Occupation	OUTDOOR
Date Of Driving Pass	29/06/2015
Driving Experience	2 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90662045
Fax Number	
Contact Number	OFFICE-62554754
Email Address	JIJIBINDU@YAHOO.COM.SG

Address	BLK 241 KIM KEAT LINK #05-185
Postcode	310241
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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	SLL2014S
Vehicle Make/Model/Colour	HONDA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHONG CHEE KONG
NRIC/Passport Number	S1139375F
Contact Number	91286649
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

Veh A: PC 5023 X

Veh B: 3LL 2014 S

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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:
 - (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
- (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:

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

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

SKETCH PLAN

Veh A: PC 5023Y

Veh B: SLL 2014S

← Jalan Bukit Merah



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

While I travelling along Filter lane CTE towards Jalan Bukit Merah, I stopped my vehicle for traffic, sudden Vehicle B behind me hit onto my rear.

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:

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

Claim Handling

Accident MT/0997008

Policy No.	5066337368	Vehicle No.	PCS023X	GST Registration No.	
Policyholder Name	HTPL TOURS & TRAVELS PTE. LTD.			Policyholder NRIC	2017288662
Product Code	BUS INSURANCE	Cover Type	Comprehensive	Leading	0
Contact No.(Mobile)	90662045	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remarks		eCode	No
RFR	- No Yes	TCA	- No Yes	eCode Reason	
NCD Protection	00	NCD Endowment(%)	0	Private Hire	No

Accident Details

Report Date	04/06/2018 10:39	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	02/06/2018	Time of Accident hh:mm	15:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	CTE TOWARDS JALAN BUKIT MERAH				

Benefits

Excess

Own Damage Excess	2,000.00	Additional Excess		Windscreen Excess	500.00
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	3,000.00	Outside Singapore TP Excess			

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	No
Modification History			

Policyholder Mailing Address

Address 1	3 NORRIS ROAD	Address 2	SINGAPORE 208248	Address 3	
Address 4		Address Type	Singapore address	Post Code	208248
Unit No.		Related Policy Number	5066337368		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	JIN ISAAC	Driver NRIC	S7262292H	Driver DOB	30/05/1972
Register Date of Driver License	29/06/2015	Driver Age	46	Driving Experience	2
Contact No.(Mobile)	90662045	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 241 #05-185	Address 2	KJM SEAT LANE	Address 3	SINGAPORE 310141
Address 4		Address Type	Foreign address	Post Code	310141
Unit No.	05-185				
Does he own a Singapore Registered car?	Yes - No	Driver Vehicle No.	PCS023X	Driver Insurer Company	NTUC

Declaration

Breathalyzer or Blood Test Reading ¹	0 mg	Any Injury?	Yes - No
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Modification History

Claim 001 New

Claim Type *	OD-MK	Insured Name	HTPL TOURS & TRAVELS PTE. L	Insured NRIC	2017288662
Contact No.(Mobile)	NIL	Contact No.(Home)	NIL	Contact No.(Office)	NIL
Email Address		OT Vehicle Number	PCS023X	TP Vehicle Number	BL120145
Claim Description	PCS023X / SLL20145 ON 2 Jun 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Fully at Fault	GIA report	Received
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	04/06/2018 00:00
Date Registered	04/06/2018 10:43	Claim Close Date			
Report Taken By	ROSLI WAHAB				

Print All Letter

Save Submit

Attachment

Accident No.	MT/0997008	Claim No.	001
Last Doc. Received	Yes No	Upload Date	04/06/2018 10:44

Choose File	No file chosen	Category *	Confidential	Urgency *	Description *
Choose File	No file chosen	Clear Please Select	NO	Normal	
Choose File	No file chosen	Clear Please Select	NO	Normal	
Choose File	No file chosen	Clear Please Select	NO	Normal	
Choose File	No file chosen	Clear Please Select	NO	Normal	
Choose File	No file chosen	Clear Please Select	NO	Normal	
Choose File	No file chosen	Clear Please Select	NO	Normal	
Message Read		Clear Please Select	NO	Normal	

Send Message Upload

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)	Action
	NAC_BUKIT_MERAH_000676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 04 Jun 2018 10:44	Photos	Normal	Photos 2018-6-4		Edit
	NAC_BUKIT_MERAH_000676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 04 Jun 2018 10:44	Photos	Normal	Photos 2018-6-4		Edit
	NAC_BUKIT_MERAH_000676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 04 Jun 2018 10:44	Photos	Normal	Photos 2018-6-4		Edit



NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 04 Jun 2018 10:44	Photos	Normal	Photos 2018-6-4	Edit
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 04 Jun 2018 10:44	Photos	Normal	Photos 2018-6-4	Edit
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 04 Jun 2018 10:44	Photos	Normal	Photos 2018-6-4	Edit
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 04 Jun 2018 10:43	Photos	Normal	Photos 2018-6-4	Edit
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 04 Jun 2018 10:43	Photos	Normal	Photos 2018-6-4	Edit
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 04 Jun 2018 10:43	Photos	Normal	Photos 2018-6-4	Edit
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 04 Jun 2018 10:43	Photos	Normal	Photos 2018-6-4	Edit
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 04 Jun 2018 10:43	SAS	Normal	SAS 2018-6-4	Edit
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 04 Jun 2018 10:43	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-6-4	Edit

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
		Display in New Window	Scan and uploading	

Accord Auto Services Pte Ltd

Tel: 6271 7433 / 9274 0999 Fax: 6274 5715 Email: avclaims@mycarworkshop.com

Particular Of Insured/Driver & Details Of The Accident

Motor Accident Report

*Date of Accident: 22/06/2018 *Time of Accident: 3:27 PM
*Accident Location: CTE towards Jalan Bukit Merah

Vehicle Details

*Vehicle Number: P.C. 5003X *Make & Model: Toyota Hiace Commuter GL 3.0A

Insured / Policyholder

*Owner Name: HPL Tours & Travels Pte Ltd *NRIC: 201728886Z
*Address: _____
*Email: _____ *HP: 90662045
*Occupation: _____ (Indoor / Outdoor) *Tel / H / Other: office: 6255 4754

Driver () same as above

*Driver Name: Jiji Isaac *NRIC: _____
*Address: ADI - BLK - 241, #05-185, TOAPAYAH - 3-310041
*Date of Birth: 30/05/1972 *Driving Pass Date: _____ *HP: 90662045
*Email: jijibindu@yahoo.com.sg *Gender: Male / Female
*Occupation: _____ (Indoor / Outdoor) *Tel / H / Other: _____
*Driver an employee: Yes / No (*If no, what is relationship with the policyholder: _____)

Passengers Details

*P/Name: _____ (Male/Female) *P/Name: _____ (Male/Female)
*P/Name: _____ (Male/Female) *P/Name: _____ (Male/Female)

Insurance Company

*Insurer: NTUC *Coverage: C / TPFT / TPO *Policy No: _____

Detail of other vehicle / Property 1

Vehicle No.: 8LL 2014S
Make & Model: _____
Vehicle Category: Van
Name of Driver: CHONG CHEE KONG
NRIC : 81139375F
HP : 91286649
No. of Passengers (Including Driver): _____

Detail of other vehicle / Property 2

Vehicle No.: _____
Make & Model: _____
Vehicle Category: _____
Name of Driver: _____
NRIC : _____
HP : _____
No. of Passengers (Including Driver): _____

For Official Use Only

*Claiming against Own Ins.: Yes / No (If No, Reporting Only / TP Claims)

General Information of the accident

*Type of accident: Head-Rear / Side swipe / others: _____
*Weather conditions: Dry / Raining / others: _____ *Any video cam: Yes / No
*Road Surface: Dry / Wet / others: _____
*Witness: Yes / No (Name: _____ NRIC: _____ HP: _____)
*Accident reported to police: Yes / No *Summon against whom: _____
*Injured party: Yes / No *No. of passengers (include driver): _____
-I/Name: _____ *Fasten seat belt: Yes / No *Conveyed by Ambulance: Yes / No
-I/Name: _____ *Fasten seat belt: Yes / No *Conveyed by Ambulance: Yes / No

REPUBLIC OF SINGAPORE DRIVING LICENCE



AC

30 May 1972

29 Jun 2015

002444592J



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7262292H



Name

JIJ I ISAAC

Race

INDIAN

Date of birth

30-05-1972

Sex

M

Country of birth

INDIA

S726229

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

EFFECTIVE DATE

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg 29 Jun 2015

NP 426A



S714218

NRIC No. S7262292H



Nationality

INDIAN

Date of issue

28-06-2005

APT BLK 241 KIM KEAT LINK #05-185
SINGAPORE 310241

S7262292H

01/09/2014 (R)

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 : 5099337368

Cover : Comprehensive

1. Index mark and Registration Number of Vehicle :

PC5023X

Chassis Number :

KDH2230027705

2. Name of Policyholder :

~~HTPL HOLDINGS~~ HTPL TOURS & TRAVELS

3. Effective Date of Insurance :

03 Apr 2018

4. Expiry Date of Insurance :

02 Apr 2019

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 the carriage of passengers in connection with the Policyholder's business.

(b) Limited to carry 14 passengers

This Policy does not cover

(a) Use for racing, pace-making, reliability trial or speed-testing.

(b) Use whilst drawing a trailer except the towing (Other than for reward) of any one disabled mechanically propelled vehicle.

* 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.

GEOGRAPHICAL LIMIT : WITHIN THE REPUBLIC OF SINGAPORE ONLY

EXCESS (SECTION I) : S\$2,000

EXCESS (SECTION II) : S\$3,000

WINDSCREEN EXCESS : S\$500

INSURE WITH COE : YES

HIRE PURCHASE COMPANY : DAIMLER FINANCIAL SERVICES AFRICA & ASIA PACIFIC LTD

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 : INSUREMYCAR.COM.SG (00000615275)

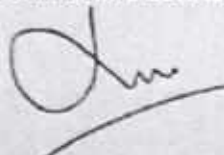
Date of Issue : 03 Apr 2018 13:36 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive