

## 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	02/07/2018 17:43
Date Of Accident	01/07/2018 14:45
Exact Location Of Accident	UPPER THOMSOM SLIP ROAD TOWARDS MARYMOUNT LANE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLT5251L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ONG ENG SHYAN
NRIC No	S7827875G
Email Address	ENGSHYAN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98785324
Alternative Phone No	OTHERS-98785324

### Vehicle Particulars

Manufacturer	HONDA
Model	SHUTTLE HYBRID 1.5X AUTO
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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPPHQ17-005657
Cover Note Number	

### Driver

Name of Driver	ONG ENG SHYAN
NRIC No	S7827875G
Date Of Birth	21/09/1978
Occupation	INDOOR
Date Of Driving Pass	22/08/1998
Driving Experience	19 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98785324
Fax Number	
Contact Number	OTHERS-98785324
Email Address	ENGSHYAN@GMAIL.COM

Address	BLK 516 WOODLANDS DRIVE 14 #09-159
Postcode	730516
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	RAINING
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?	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)	2
Passenger 1	NAME: : QING CHEE YONG 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

PLEASE REFER TO ATTACHED

#### Attachment(s)

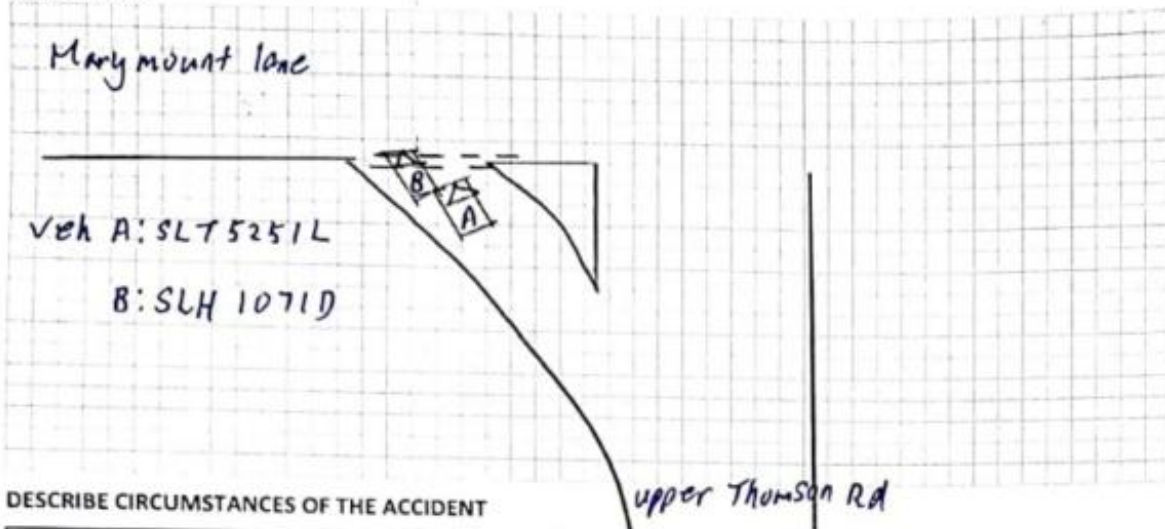
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLH1071D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	RAYHUL FIRDAUS BIN ABDOL SHUKOR
NRIC/Passport Number	S8111818C
Contact Number	90104687
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

# Accident Sketch Plan

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along upper thomson road, turning towards the slip road. I stopped when I saw a car in front of me at the slip road around 245pm.

He tried to drive off but stopped. I also follow but stop when he stopped - Then he drove off again but stopped again. I did the same.

When I saw him drive off for 3rd time, I took a look on my right and turned towards marymount lane but hit his back of car and I immediately stopped the car while his car rolled forward abit as he is already moving.

We stopped our car and exchange particulars.

\*IMPORTANT NOTE: You had been advised by the workshop that in the event that you wish to claim against your own policy (Own Damaged Claim), there is a FOURTEEN (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.

☐ Reporting Only ☐ Own Damaged ☐ Third Party ☐ Claim at other workshop (OD/TP)

## 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.:

GAZETTED SIGNATURE FORM 03

## Accident Sketch Plan

### SKETCH PLAN


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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.:

OWNER'S DRIVING LICENCE (FRONT)

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: **S78278756**

Name: **ONG ENG SHYAN  
(WANG YONGXIAN)**

Birth Date: **21 Sep 1978**

Issue Date: **28 Jun 2003**

**000607782B**





OWNER'S DRIVING LICENCE (BACK)

YOU ARE LICENCED TO DRIVE VEHICLES IN THE FOLLOWING

Class 2B Motorcycles  $\leq$  200 CC  
Class 2A Motorcycles between 201 CC and 400 CC  
Class 3 Motor cars  $\leq$  3000 kg with  $\leq$  7 passengers, exclusive of the driver; and motor tractors/vehicles  $\leq$  2500 kg

29 May 2005  
27 Mar 2007  
22 Aug 1998

S7827875G


S / No. 9000064936

NP 428A



Licence No: S7827875G

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7827875G




Name  
ONG ENG SHYAN  
(WANG YONGXIAN)  
王永賢


Race  
CHINESE

Date of birth 21-09-1978 Sex M


Country of birth  
SINGAPORE



4293405



NRIC No. S7827875G



Date of issue  
16-10-2008

Address  
APT BLK 516 WOODLANDS DRIVE 14  
#09-159  
SINGAPORE 730516

Company Limited  
 #17-00 Tower Block MND Complex Singapore 069110  
 3 | fax 65 6224 3903 | www.eqinsurance.com.sg  
 00490-N



## CERTIFICATE OF INSURANCE

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 RISKS AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)  
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

### PRIVATE CAR Comprehensive

Certificate No.: DMPPHQ17-005657

Form: MX2  
 Excess:  
 Insured/Named Driver SGD500.00  
 Unnamed Drivers SGD1,000.00  
 YEID Additional SGD3,000.00

1. Index Mark and Registration Number of Vehicles  
 SLT5251L

2. Name of Policyholder  
 ONG ENG SHYAN

3. Effective Date of the Commencement of Insurance for the purpose of the Act  
 31/10/2017

4. Date of Expiry of Insurance  
 30/10/2018

5. Person 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 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 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 has not been cancelled at the time of accident loss or damage.

6. Limitations as to use\*  
 Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover :

- (a) use for hire or reward
- (b) use for racing, pace-making, reliability trials 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 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) or and Amendment, Act or Acts passed in substitution thereof.

Authorised Signatory  
 EQ Insurance Company Limited

unmsys/HO/A000390/Carville Insurance A



A Member of Citystate



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



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Accident Photo



Accident Photo





Accident Photo



CHASSIS NUMBER

本田技研工業株式会社  
型式 DAA-GP7  
車台番号 GP7-1116277  
TD4H1H7-B610M -A -J



ODOMETER READING

