

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	06/07/2018 13:55
Date Of Accident	05/07/2018 14:20
Exact Location Of Accident	TRAFFIC JUNC AT BUKIT PANJANG RING RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGF8686D
Insured/Policyholder	
Name Of Registered Owner	HUI SHOON CAR RENTAL
Co Reg No	53013461J
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-64531473

Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH-1.8 CVT (A)
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?	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	YES
Policy Number	5075881476-02
Cover Note Number	

Driver

Name of Driver	TAN SOK HOON
NRIC No	S7146651E
Date Of Birth	26/12/1971
Occupation	INDOOR
Date Of Driving Pass	02/02/1993
Driving Experience	25 YEARS AND 5 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-94561111
Fax Number	
Contact Number	
EMail Address	TSOKHOON@YAHOO.COM

Address	BLK 504 JELAPANG RD #07-356
Postcode	670504
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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	
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	SHC8953L
Vehicle Make/Model/Colour	HYUNDAI CRD/COMFORT/BLUE COLOR
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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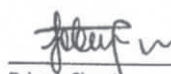
8. Consent under the Personal Data Protection Act (PDPA)

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:

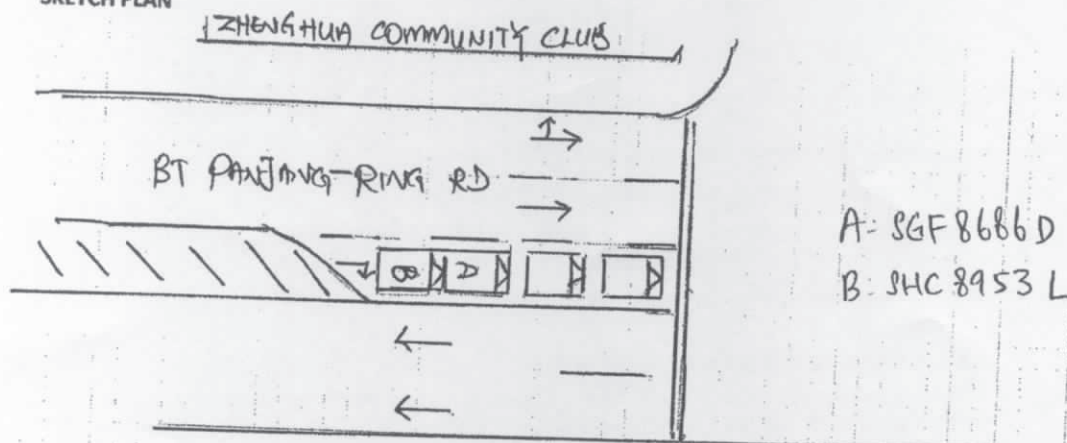


Driver's Signature
(If driver is not the policyholder)
Date & Time:




Reporting Centre Personnel's Signature
Name: Shuman
NRIC/FIN No.: 6171208 @ 11-5082

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS WAITING ALONG BT PANJANG RING RD BEHIND 2 VEHICLES FOR TRAFFIC INDICATION TO TURN RIGHT. SECONDS LATER, VEH. B, SHC 8953 L CAME FROM BEHIND & HIT THE REAR OF MY CAR. WE ALIGHTED TO CHECK DAMAGES BUT THE TAXI DRIVER REFUSED TO EXCHANGE PARTICULARS

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.:

6/7/18 @
11.50 AM

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: 5075881476-02

Cover : drivo PREMIUM

1. Index mark and Registration Number of Vehicle : **SGF8686D**
Chassis Number : JTDGG20W00J005039
2. Name of Policyholder : HUI SHOON CAR RENTAL
3. Effective Date of Insurance : 08 Dec 2017
4. Expiry Date of Insurance : 07 Dec 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 or Hirer's business.

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) Use for the carriage of passengers for reward purposes.
- (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)	: S\$1,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: YES
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: MAYBANK
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 : PANA HARRISON (ASIA) PTE LTD (00000690533)
Date of Issue : 21 Nov 2017 10:19 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Enquire Vehicle Registration Details**Owner Particulars**

NRIC/Passport/Company Cert No.: 53013461J
Owner ID Type: Business
Owner Name: HUI SHOON CAR RENTAL
Registered Address: 1 SIN MING INDUSTRIAL EST SECTOR C #01-125 SIN MING INDUSTRIAL ESTATE SINGAPORE 575636
Mailing Address: -
Birth Date: -

Vehicle Particulars

Vehicle No.: SGF8686D
Previous Vehicle No.: -
Effective Date of Ownership: 28 Sep 2016
Original Regn Date: 28 Sep 2016
Registration Date: 28 Sep 2016
Year of Manufacture: 2016
Vehicle Type: Private Hire (Self-Drive) Station Wagon/Jeep/Land Rover
Vehicle Scheme: -
Vehicle Attachment 1: No Attachment
Vehicle Attachment 2: -
Vehicle Attachment 3: -
Vehicle Make: TOYOTA
Vehicle Model: WISH 1.8 CVT
Primary Colour: Grey
Secondary Colour: -
Passenger Capacity: 6
Chassis No.: JTDGG20W00J005039
Engine No.: 2ZR1830916
Engine Capacity/Power Rating: 1798 cc / -
Maximum Power Output: 105.0 kW (140 bhp)
Propellant: Petrol
Max Unladen Weight: 1360 kg
Maximum Laden Weight: 1935 kg
Open Market Value: \$19,955.00

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	27 Sep 2026
Minimum PARF Benefit:	\$9,977.00
No. of Transfers:	0
IU Label No.:	1126857341
COE No.:	2016070103001631R
COE Expiry Date:	27 Sep 2026
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Registration Category:	B - Car above 1600cc or 97kW (130bhp)
Quota Premium (QP) / Prevailing Quota Premium:	\$57,010.00 / -
Actual QP Paid:	\$57,010.00
QP (Regn Cat):	\$57,010.00
OPC Cash Rebate Eligibility:	No
QP during COE Bidding Exercise:	\$57,010.00
Additional Registration Fee Rate:	First \$19,955.00 (100%)
Actual ARF Paid:	\$19,955.00
Vehicle Lifespan Expiry Date:	No Lifespan
CO2 Emission:	159.00 (g/km)
CEVS Rebate Utilised Amount:	-
Message:	To renew the COE, the Prevailing Quota Premium payable is that of Category B. This is a public service vehicle.

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