

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	17/07/2018 12:46
Date Of Accident	16/07/2018 11:25
Exact Location Of Accident	CROSS JCT OF CLEMENTI ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJJ4370J
Insured/Policyholder	
Name Of Registered Owner	TEO CHEN CHENG
NRIC No	S1619926E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97955812
Alternative Phone No	OFFICE-97955812

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	NEW BEETLE 1.6 A 6SPD
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3042011700
Cover Note Number	

Driver

Name of Driver	DAE YUN KWON
Work Permit No	S2661554B
Date Of Birth	05/03/1966
Occupation	INDOOR
Date Of Driving Pass	22/01/1996
Driving Experience	22 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81660115
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 178 LOMPANG RD #12-40 SINGAPORE 670178
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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	CLEAR
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)	3
Passenger 1	NAME: : TEO CHEN CHENG GENDER: : FEMALE
Passenger 2	NAME: : LYDIA KWON GENDER: : FEMALE

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	SKT929K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	96281056
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:
NRIC/FIN No.:

OWNER'S NRIC Pg. 1

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1619926E

Name
TEO CHEN CHENG

張清清


Race
CHINESE

Date of Birth
28-12-1963

Sex
F

Country of Birth
SINGAPORE

S1619926E



1372068



NRIC No. S1619926E

Blood Group
AB+

Date of issue
13-10-1993

APT BLK 178 LOMPANG ROAD #12-40
SINGAPORE 670178

NRIC No: S1619926E Date: 02-06-2005 No: 5189483



DRIVER'S NRIC AND DRIVING LICENSE Pg. 1

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S2661554B**

Name: **DAE YUN KWON**

Birth Date: **05 Mar 1966**

Issue Date: **27 Oct 2015**

002487264J

NO
SG
DR

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S2661554B**

Name: **DAE YUN KWON**

Race: **KOREAN**

Date of Birth: **05-03-1966** Sex: **M**

Country of Birth: **KOREA, SOUTH**

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

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

EFFECTIVE DATE: 22 Jan 1996

NP 428A

Licence No: S2661554B

8208343

NRIC No: **S2661554B**

Nationality: **KOREAN, SOUTH**

Blood Group: **O+** Date of issue: **12-07-1996**

APT BLK 178 LOMPANG ROAD #12-40
SINGAPORE 670178

NRIC No: **S2661554B** Date: **02-06-2005** No: **5189461**

CERTIFICATE OF INSURANCE Pg. 1

CERTIFICATE OF INSURANCE



中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

06/03/2018

MX1EE SN
AN0367A
Cov.Type: C
AUTOSAFE

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 No.	DMPCSN3042011700	Engine No :BFS069843
		Chassis No:WVWZZZ9CZ8M563264
1. Index Mark and Registration Number of Vehicle	SJJ4370J	
2. Name of Policy Holder	TEO CHEN CHENG	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	18 MAY 2018	NAMED DRIVERS EX SECT. IS\$500.00 ADDITIONAL EX OTHER THAN NAMED DRIVERS:
4. Date of Expiry of Insurance	11 SEPTEMBER 2018	EX SECT. I - AGE <= 25.....S\$3,000.00 EX SECT. I - AGE >= 26.....S\$500.00 * AGE AS AT DATE OF ACCIDENT
5. Persons or Classes of Persons entitled to drive *		EX ON WINDSCREENS\$100.00

(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.

6. Limitations as to use: *

USE FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS.
THE POLICY DOES NOT COVER USE FOR HIRE OR REWARD TUITION DRIVING TEST RACING PACE-MAKING, RELIABILITY TRIAL, SPEED-TESTING, THE CARRIAGE OF GOODS OTHER THAN SAMPLES IN CONNECTION WITH ANY TRADE OR BUSINESS OR USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

EXCESS WHICHEVER IS APPLICABLE FOR LOSSES OCCURRING OUTSIDE SINGAPORE (CONSTRUCTIVE TOTAL LOSS/THEFT) WILL BE DOUBLED.
ONE TIME WAIVER OF EXCESS FOR THE FIRST S\$1,000 WILL APPLY TO THE INSURED AND NAMED DRIVERS IN THE EVENT OF OWN DAMAGE CLAIM AT OUR AUTHORISED WORKSHOPS FOR EACH POLICY YEAR.

* 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).
Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Countersigned By:



Authorised Officer

匯華貸款私人有限公司
Hui Hua Credit Pte Ltd

ROC 1993016380

No. 1 Bukit Batok Crescent

#02-22 WCEGA Plaza

Singapore 658064

Tel: 64696611 (5 Lines) Fax: 64698358

Authorised Signatory

3 Anson Road #16-00 Springleaf Tower Singapore 079909 Tel: 6389 6111 Fax: 6225 3592 Website: www.sg.cntaiping.com

<http://sgportal.cntaiping.com/chinainsB2B/Spool/AN0367A-SJJ4370J-DMPCSN3042011700-1lcsn-15> 06/03/2018

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

