

## 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             | 23/07/2018 13:30              |
| Date Of Accident           | 21/07/2018 10:15              |
| Exact Location Of Accident | ALONG JALAN EUNOS AT PIE EXIT |
| Country/State of Loss      | SINGAPORE                     |

### DETAILS OF OWN VEHICLE

|  |                                     |
|--|-------------------------------------|
| Vehicle Registration Number  | SJZ5260C                            |
| <b>Insured/Policyholder</b>  |                                     |
| Name Of Registered Owner   | CHUA SENG KHAI                      |
| NRIC No  | S1279163A                           |
| Email Address  | CHUASENGKHAI@YAHOO.COM              |
| Mobile Phone No  | (LOCAL) +65-98008237                |
| Alternative Phone No   | OFFICE-98008237                     |
| <b>Vehicle Particulars</b>   |                                     |
| Manufacturer   | BMW                                 |
| Model  | 528I-2.0 D/AB 2WD 4DR GAS/D NAV (A) |
| 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? | YES                                 |
| If No, Please state action to be taken                                       |                                     |
| Vehicle Category   | PRIVATE CAR                         |

### Insurance Company

|                           |                |
|---------------------------|----------------|
| Name of Insurance Company | ECICS LIMITED  |
| Type Of Coverage          | COMPREHENSIVE  |
| Fleet Policy              | NO             |
| Policy Number             | MPC17A00558201 |
| Cover Note Number         |                |

### Driver

|                      |                        |
|----------------------|------------------------|
| Name of Driver       | CHUA SENG KHAI         |
| NRIC No              | S1279163A              |
| Date Of Birth        | 31/08/1957             |
| Occupation           | INDOOR                 |
| Date Of Driving Pass | 08/07/1975             |
| Driving Experience   | 43 YEARS AND 0 MONTHS  |
| Gender               | MALE                   |
| Mobile Number        | (LOCAL) +65-98008237   |
| Fax Number           |                        |
| Contact Number       | OFFICE-98008237        |
| Email Address        | CHUASENGKHAI@YAHOO.COM |

|   |                                    |
|---|------------------------------------|
| Address   | BLK 15 TAMPINES AVENUE 8<br>#13-23 |
| Postcode  | 529601                             |
| 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 | -<br>-<br>-                        |
| Insurance Company of Driver's Own Vehicle           | -<br>-<br>-                        |

#### General Information of the Accident

|                    |                            |
|--------------------|----------------------------|
| Type Of Accident   | COLLISION - MAJOR/MINOR RD |
| 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

STATEMENT RECORDED BY SOO - PROGRESSIVE AUTOMOTIVE PTE LTD (6741 5336)

#### 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         | SMA683U       |
| Vehicle Make/Model/Colour           |               |
| Details Of Properties               |               |
| Vehicle Category                    | PRIVATE CAR   |
| Name of Driver                      | PANG BOON KAI |
| NRIC/Passport Number                | S7307450I     |
| Contact Number                      | 97231160      |
| Address                             |               |
| Postcode                            |               |
| Insurance Company Name              |               |
| Nature Of Damage                    |               |
| No. Of Passenger (Including Driver) |               |

## Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

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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:

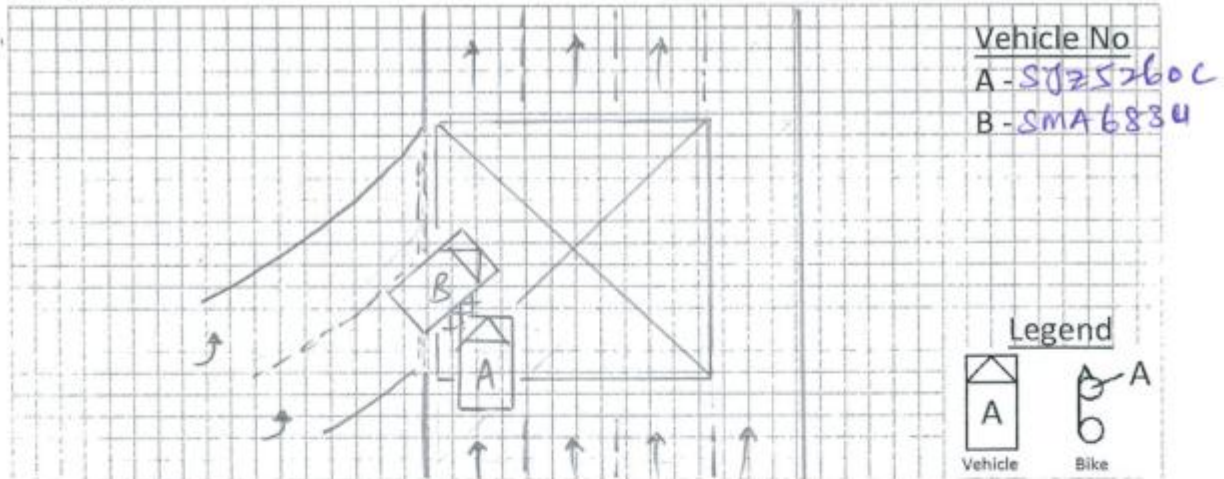
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling straight along the Jalan Eunus Rd at PIE exit. Due to the heavy traffic, so I move slowly only. Suddenly a veh B came out from the exit side road and hit onto the left front portion of my vehicle.

## DECLARATION

I/We declare the foregoing particulars are true in every respect. Please be advised that your insurer may have a 14 day clause whereby the claim against own policy must be made within the stipulated timeframe from the date of occurrence. Kindly check your policy for more details.

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.:



## CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks 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)

E-DRIVE AUTHORISED  
WORKSHOPS

MZ300  
COMPREHENSIVE  
ORIGINAL

CERTIFICATE NO: MPC17A00558201

Chassis No: WBAFP32050CS46809

Agency Name: Sime Darby Insurance Brokers (Singapore) Pte Ltd

Engine No: 06947594N52B25AF

Agency Code: B0000015

1. Index Mark and Registration Number of Vehicle: SJZ5260C

2. Name of Policyholder: CHUA SENG KHAI

3. Period of Insurance (both dates inclusive): 01 December 2017 to 30 November 2018

4. Persons or Classes of Persons entitled to drive

- a) The Policyholder and all Named Drivers declared under the policy
- 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.

5. 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, race, 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.

6. EXCESS APPLICABLE

|   |              |
|---|--------------|
| WINDSCREEN                                      | SGD 100.00   |
| SECTION I - INSURED/NAMED DRIVER                | SGD 500.00   |
| ADDITIONAL EXCESS OTHER THAN NAMED DRIVERS:     |              |
| SECTION I - AGE >70 OR DRIVING EXP <2 YEARS OLD | SGD 3,000.00 |

7. Hire Purchase Company: UNITED OVERSEAS BANK LIMITED

Signed for and on behalf of ECICS Limited

Chief Executive Officer

### Important Notice:

- i) Policyholders are hereby warned that it shall be unlawful for any person to use or cause or permit any other person to use a motor vehicle without a valid insurance under the Act.
- ii) On the sale of a motor vehicle, Policyholders must surrender all insurance papers issued including the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189).
- iii) The Certificate of Insurance and the Policy will cease to be valid once the motor vehicle has been sold or transferred.
- iv) The Payment Before Cover Warranty or Premium Payment Warranty found in the Policy must be complied with otherwise there would be no liability under the Policy and Certificate of Insurance.

**REPUBLIC OF SINGAPORE DRIVING LICENCE**


 Licence Number **S1279163A**  
 Name **CHUA SENG KHAI**  
 Birth Date **31 Aug 1957**  
 Issue Date **21 Feb 2004**

001139626J

**REPUBLIC OF SINGAPORE**  
**IDENTITY CARD NO. S1279163A**


 Name **CHUA SENG KHAI**  
**蔡成凱**  
 Race **CHINESE**  
 Date of Birth **31-08-1957** Sex **M**  
 Country of Birth **SINGAPORE**

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

|          |  | PASS DATE   |
|----------|--|-------------|
| Class 2B | Motorcycles not exceeding 200 cc   | 18 Mar 1977 |
| Class 2A | Motorcycles between 201 cc and 400 cc  | 18 Mar 1977 |
| Class 2  | Motorcycles exceeding 400 cc   | 18 Mar 1977 |
| Class 3  | Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms | 08 Jul 1975 |

NP 428A

Licence No: S1279163A

1503617


 NRIC No **S1279163A**


 Blood Group **O+** Date of issue **13-12-1993**

**BLK 15 TAMPINES AVENUE 8 #13-23**  
**SINGAPORE 529601**  
 NRIC No: S1279163A Date: 31/01/2015



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





**Accident Photo**



**Addendum Sheet**





## ADDENDUM

ORIGINAL REPORT NO. : MPA 218094746 VEHICLE REGISTRATION NO. : SJZ 5260C

NAME (AS SHOWN IN NRIC) : Chua Seng Khai NRIC/FIN/Passport No. : S1279163A

(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate

ADDRESS : Blk 15 Tampines Ave 8 #13-23 Singapore (529601)

CONTACT (TEL) : - MOBILE NO. : 98008237

EMAIL ADDRESS : Chua Seng Khai @ yahoo-com

DATE OF ACCIDENT : 21/7/18 TIME OF ACCIDENT : 1015

PLACE OF ACCIDENT : Along Jalan Ennos AT PIE Exit.

INSURANCE COMPANY : ECICS.

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

### Charge to OD claims

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