

## 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 #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	- - -
Insurance Company of Driver's Own Vehicle	- - -

#### 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

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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.

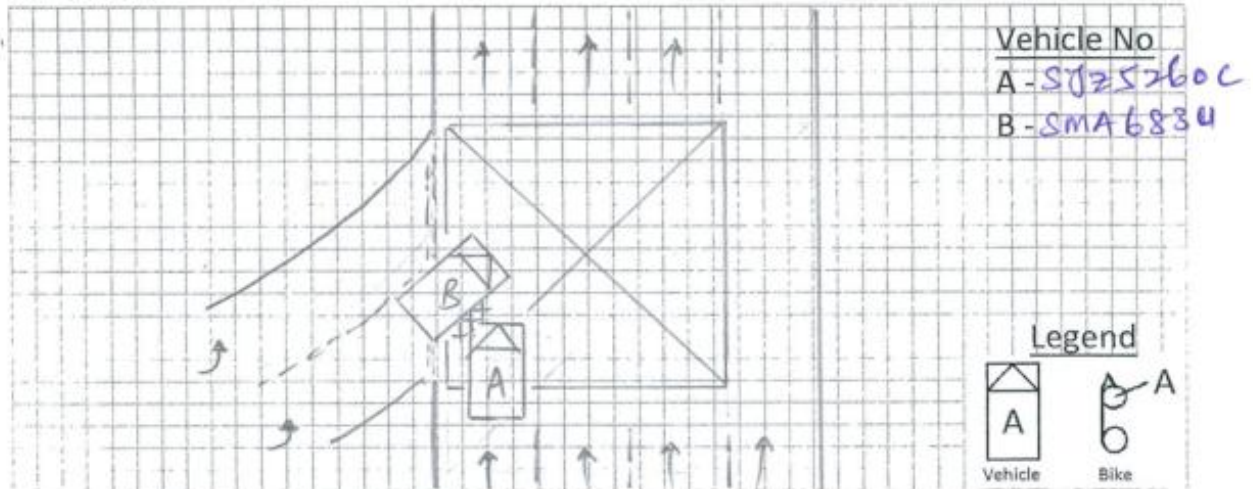
  
\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

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

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

## Sketch Plan #2

### 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

<b>CERTIFICATE NO:</b> MPC17A00558201 <b>Agency Name:</b> Sime Darby Insurance Brokers (Singapore) Pte Ltd <b>Agency Code:</b> B0000015	<b>Chassis No:</b> WBAFP32050C546809 <b>Engine No:</b> 06947594N52B25AF								
<b>1. Index Mark and Registration Number of Vehicle:</b> SJZ5260C									
<b>2. Name of Policyholder:</b> CHUA SENG KHAI									
<b>3. Period of Insurance (both dates inclusive):</b> 01 December 2017 to 30 November 2018									
<b>4. Persons or Classes of Persons entitled to drive</b> 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.									
<b>5. Limitations as to use</b> 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.									
<b>6. EXCESS APPLICABLE</b> <table style="width: 100%;"> <tr> <td style="width: 60%;">WINDSCREEN</td> <td style="width: 40%; text-align: right;">SGD 100.00</td> </tr> <tr> <td>SECTION I - INSURED/NAMED DRIVER</td> <td style="text-align: right;">SGD 500.00</td> </tr> <tr> <td colspan="2">ADDITIONAL EXCESS OTHER THAN NAMED DRIVERS:</td> </tr> <tr> <td>SECTION I - AGE &gt;70 OR DRIVING EXP &lt;2 YEARS OLD</td> <td style="text-align: right;">SGD 3,000.00</td> </tr> </table>		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
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								
<b>7. Hire Purchase Company:</b> 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.

DRIVER IC/DL Pg. 1

**REPUBLIC OF SINGAPORE DRIVING LICENCE**


Licence Number: **S1279163A**

Name: **CHUA SENG KHAI**

Birth Date: **31 Aug 1957**

Issue Date: **21 Feb 2004**

001130626J



**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

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



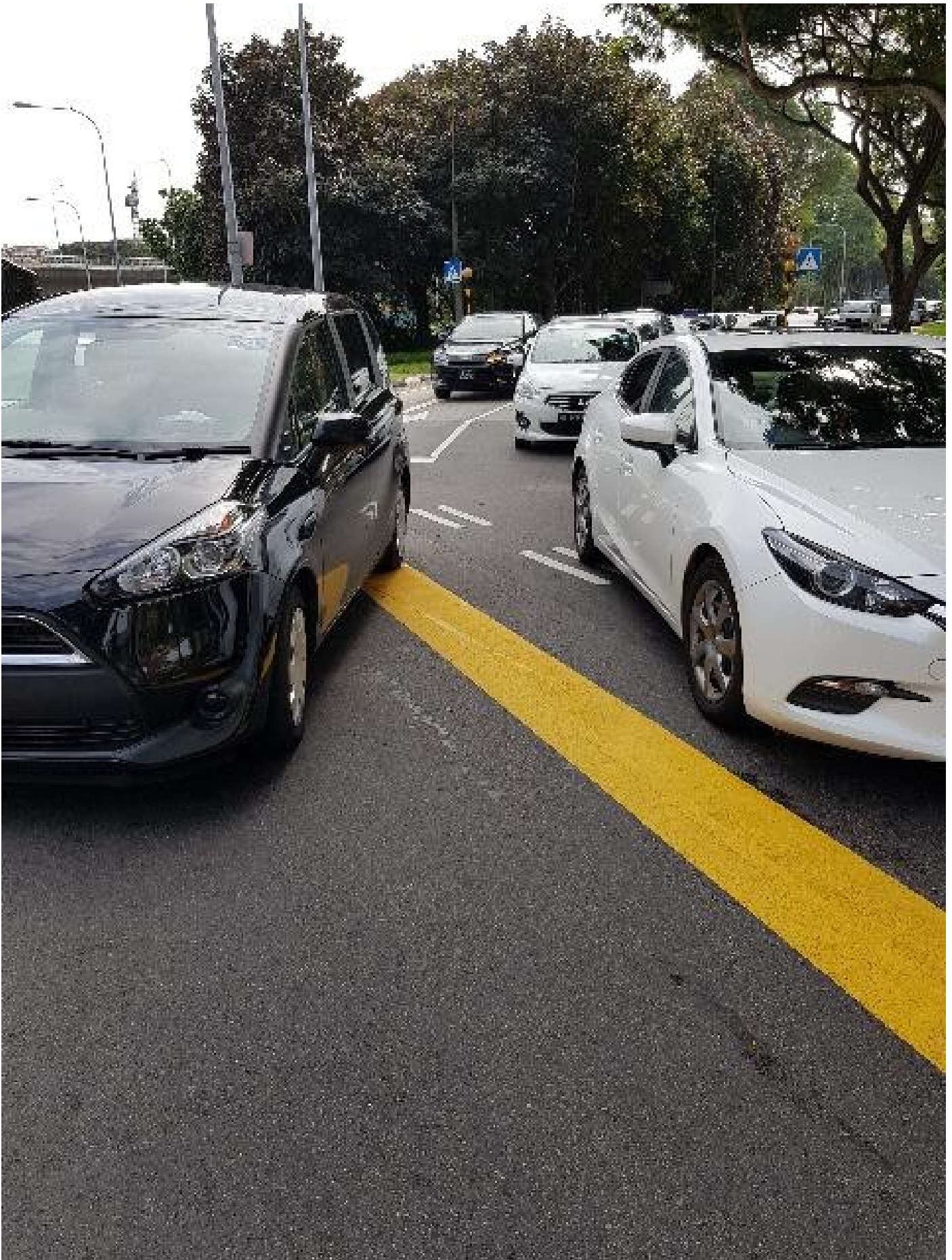
Accident Photo



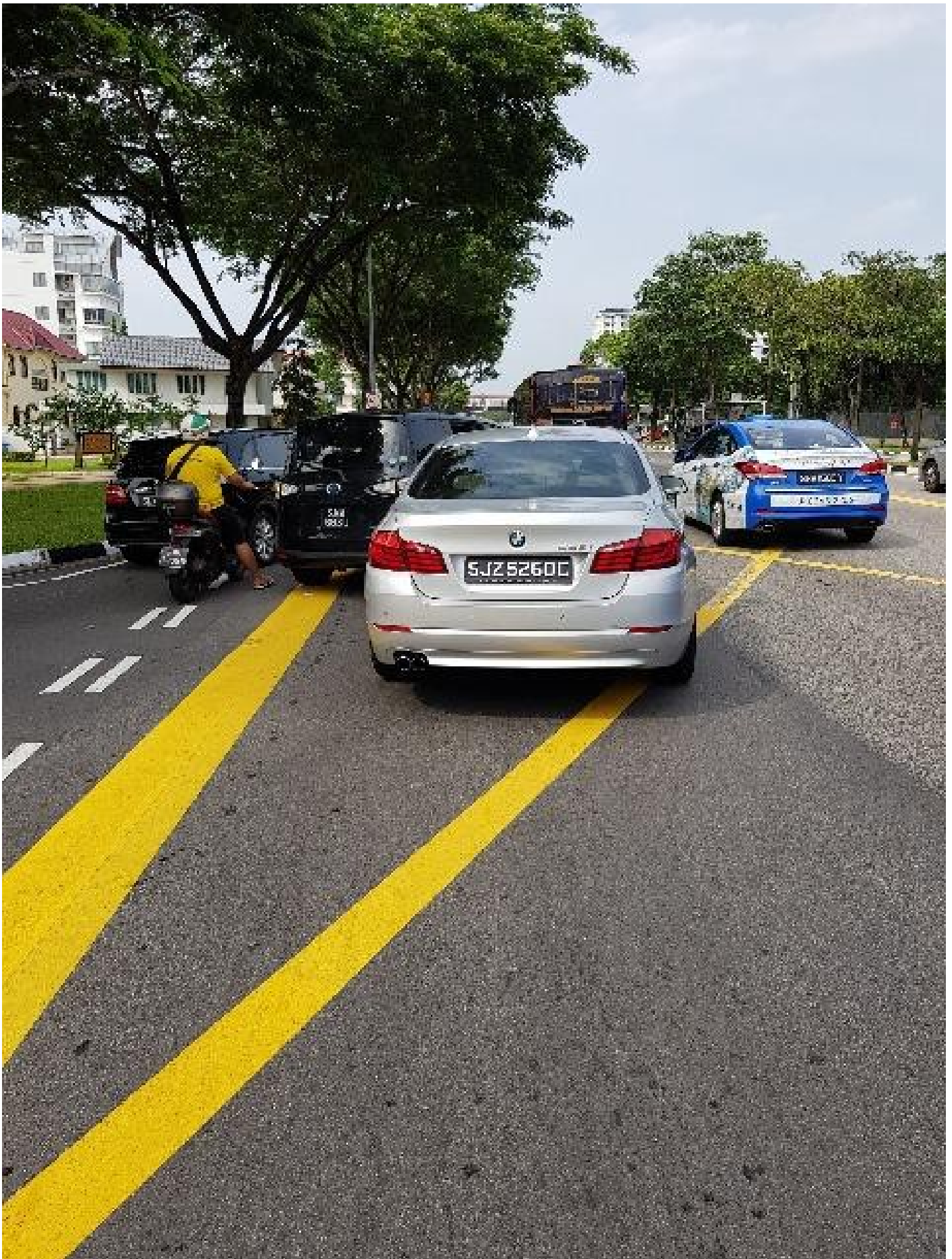
Accident Photo



Accident Photo



Accident Photo





Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE  
6 Raffles Quay #18-00 Singapore 048580  
Tel (65) 6224 0010 Fax (65) 6224 0030  
Operating Hours : Monday to Friday, 09:00 – 17:00  
UEN: S66550020G / GST Reg. No.: M400017735

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MPA 218094746 Vehicle Registration No: SJZ 5260 C  
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 : 21/2/18 Time of Accident : 1015  
Place of Accident : Along Jalan Ennos at PIE Exit.  
Insurance Company : ECICS

(B) ADDITIONAL INFORMATION / AMENDMENTS:

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Policyholder / Driver's Signature  
Date: \_\_\_\_\_

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