

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 | 06/08/2018 17:59 |
| Date Of Accident | 04/08/2018 18:20 |
| Exact Location Of Accident | CTE EXIT TO BALESTIER |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------------------|
| Vehicle Registration Number | SJS6991G |
| Insured/Policyholder | |
| Name Of Registered Owner | LAU KAM YUEN |
| NRIC No | S6964979C |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-98521423 |
| Alternative Phone No | OFFICE-NOPHONE |

Vehicle Particulars

| | |
|--|--------------------------|
| Manufacturer | BMW |
| Model | 730LI AT D/AB 4DR SR LED |
| 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? | NO |
| If No, Please state action to be taken | THIRD PARTY |
| Vehicle Category | PRIVATE CAR |

Insurance Company

| | |
|---------------------------|---|
| Name of Insurance Company | DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | MT/00500427 |
| Cover Note Number | 28/06/2018 TO 27/06/2019 |

Driver

| | |
|----------------------|-----------------------|
| Name of Driver | LAU KAM YUEN |
| NRIC No | S6964979C |
| Date Of Birth | 10/07/1969 |
| Occupation | INDOOR |
| Date Of Driving Pass | 07/07/2007 |
| Driving Experience | 11 YEARS AND 0 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-98521423 |
| Fax Number | |
| Contact Number | OFFICE-NOPHONE |
| Email Address | NOEMAIL |

| | |
|---|-------------------|
| Address | 70E LORONG AH SOO |
| Postcode | 534086 |
| 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) | 2 |
| Passenger 1 | NAME: : LEE LEY KENG |
| | 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

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 | SDY9911H |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | SEAH YEU CHERN |
| NRIC/Passport Number | S0028652D |
| Contact Number | |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | |

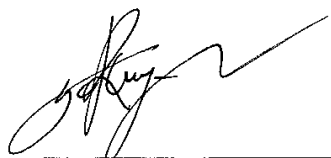
SKETCH PLAN

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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.

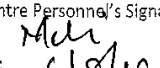


Policyholder's Signature
Date & Time:



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

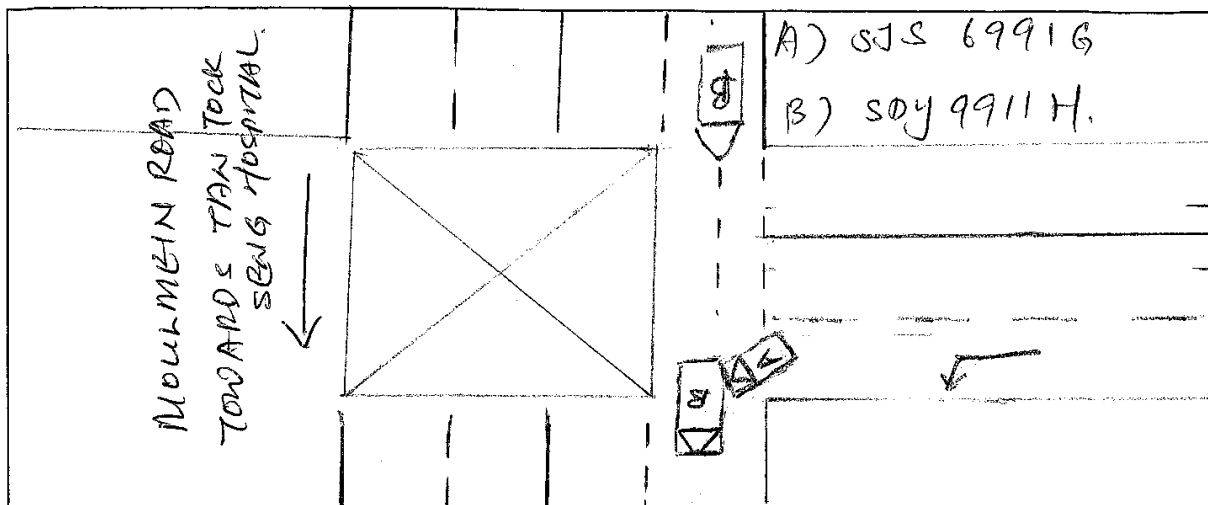


Reporting Centre Person's Signature
Name: 
NRIC/FIN No.: 618118

Sketch Plan Pg. 2

SKETCH PLAN

Accident Date: 4/8/18 Time: 6:20pm Location: CTE EXIT BALESTIER
 My Vehicle A: SJS 6991G Vehicle B: SOY 9911H Vehicle C/Others: /



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the above date & time I (SJS 6991G) was driving my vehicle along CTE and exited to Balestier. I stopped my vehicle at the junction due to red light & waiting for traffic light to turn green. When traffic light turn green I made a left turn. As I was making a turn, vehicle B (SOY 9911H) beat the red light coming from Jalan Besar towards Moulmein Road & hit onto front right portion of my vehicle.

() Claim OD / TP at Ah Lim Motor ☒ Claim OD (TP) at other workshop () Reporting Only

Remarks : Please forward a copy of my file accident report to

My workshop : KUM CYBER MOTOR WORKSHOP
 Email Address : kumchaw1@sinnet.com.sg
 & Myself :
 Email Address :

Note : Please take note that your insurer have **14 days timeframe** for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information.

DECLARATION

I/We declare the foregoing particulars are true in every respect. Vehicle :- SJS 6991G

Policyholder's Signature
 Date & Time: 6/8/18

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

Witnessed by Reporting Centre
 Personnel Mah
6/8/18





Contact us at
 Hotline: (65) 6532 2888
 E-mail: CustomerService@DirectAsia.com

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act")
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore)
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

| | |
|---|--|
| Certificate No. | : MT/00500427 |
| Type of Coverage / Driver Plan | : Car Comprehensive (Value Plus Plan) |
| 1) Vehicle Registration No. | : SJS6991G |
| Chassis No. | : WBAYE22080DZ20932 |
| 2) Name of Policy Holder | : Lau, Kam Yuen |
| 3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act | : 28/06/2018 00:00 |
| 4) Date/Time of Expiry of Insurance | : 27/06/2019 23:59 |
| 5) Persons or Classes of Persons Entitled to Drive | |
| (a) The Insured | |
| (b) Any named person under the policy who is driving on the Insured's order or with his permission. | |
| (c) Any authorised person, provided such person is aged 30 and above and holds a valid driving licence of 2 years or more, who is driving on the Insured's order or with his permission | |
| The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving. | |
| 6) Limitations as to use* | |
| Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business. | |
| *Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading. | |
| Sum Insured | : Market Value |
| Own Damage Excess | : S\$ 900.00 (before any applicable GST) |
| Windscreen Excess | : S\$ 100.00 (before any applicable GST) |
| Choice of workshop | : DirectAsia approved workshops |
| Finance company / Hire Purchase | : |
| Main driver | : Lau, Kam Yuen |
| Named driver | : None |
| Important Note: This policy does not cover drivers below the age of 30 and drivers who hold a valid driving licence of less than 2 years with the exception of the named drivers above. | |

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 the Road Transport Act, 1987 (Malaysia).

Issued on: 25/06/2018

Direct Asia Insurance (Singapore) Pte. Ltd.



Edip Okur
 Chief Underwriting Officer

Direct Asia Insurance (Singapore) Pte Ltd
 88 South Bridge Road Singapore 058716
 www.DirectAsia.com

Company Registration: 200822611G

REPUBLIC OF SINGAPORE DRIVING LICENCE

S6964979C

LAU KAM YUEN

Birth Date: 10 Jul 1969
Valid Date: 07 Jul 2007

001512652E



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S6964979C



Name

LAU KAM YUEN

刘 锦 源

Race

CHINESE

Date of birth

10-07-1969

Country/Piece of birth

MALAYSIA

Sex

M


S6964979C

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

| | PASS DATE |
|--|-------------|
| Class 2B Motorcycles =< 200 cc | 07 Jul 2007 |
| Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg | 07 Jul 2007 |

NP 428A

Licence No: S6964979C



5613402



NRIC No: **S6964979C**



Date of Issue

17-06-2016

Address

**70E LORONG AH SOO
SINGAPORE 534086**

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo



