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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 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 witholding 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.
- 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.

Charles in Sealing that Charles and Landon	ACCIDENT STATEMENT
Date Of Report	21/08/2018 16:21
Date Of Accident	20/08/2018 18:45
Exact Location Of Accident	PIE TWDS CHANGI EXIT TO JALAN EUNOS
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SFE48R
Insured/Policyholder	
Name Of Registered Owner	FANG HUI HUAN
NRIC No	S0160153I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93881836
Alternative Phone No	OFFICE-93881836
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	SLK 200 K 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?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 27574835 QMX
Cover Note Number	9
Driver	
Name of Driver	FANG HUI HUAN
NRIC No	S0160153I
Date Of Birth	10/07/1948
Occupation	INDOOR
Date Of Driving Pass	05/11/1994
Driving Experience	23 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-93881836
Fax Number	
Contact Number	OFFICE-93881836
	Marian Control of the

NOEMAIL

127 DUNBAR WALK Address

Postcode 459433

Was driver an employee of the Insured's Company NO

OWNER If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

COLLISION - CHANGE/CROSS LANE Type Of Accident

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?

YES Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

NO

NO

1

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

Was there any audio recorded?

NO NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLL1653D

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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 .
 - 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:
 - 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			
2/4	Eunos		
			A = SFE 48 R.
			B = 524 1653 D
		PIE (Changi) Exit	to Jln Eunos
	MA		
	No.		
	101		
DESCRIBE CIRCUMSTANC	ES OF THE ACCIDENT		
Please	Refer to	Statemen.	f
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9.			
			71
	/		
DECLARATION	7.		
/We declare the foregoing pa	rticulars are true in every respect.		
Y			harrist
Jang Hhan			1000
Policyholder's Shagature	Driver's Signature	Reporting Ce	ntre Personnel's Signature

(If driver is not the policyholder)

Date & Time:

Date & Time:

Name:

NRIC/FIN No .:

21 Aug 2018

PERSONAL STATEMENT OF MDM FANG HUI HUAN (NRIC: S0160153I) REGARDING ACCIDENT ON JALAN EUNOS ON 20 SEP 2018 AT 6.45PM

1. In the evening of 20th September 2018, I was driving home on PIE (Changi) from Bukit Batok Crescent.

- Bukit Batok Crescent.

 2. At about 6.45pm, I had turned onto the Jalan Eunos exit. My car was in the second left lane.
- 3. As I drove toward the first traffic light I came to, the traffic light was red.
- 4. I thought to cut to the left-most lane in preparation for a left turn later on.
- As a cautious driver, I checked my rear-view mirror and the left lane next to me carefully - there were no oncoming cars from behind me.
- I decided to make the move to cut into the left-most lane, and put up the left-turn indicator.
- 7. As I was trying to move my car slowly into the left-most lane, all of a sudden, a car (SLL1653D) came on test from the left-most lane.
- The right side of SLL1653D rubbed against the left side of my car. There were flat scratches on the right side of SLL1653D and flat scratches on the left front side of my car, SFE 48R.
- 9. As there were no dents on either cars, it proves that I was moving very slowly into the left-most lane. Or else, the impact from the angle of the force of my car moving left-wards at an angle into the left-most lane would have caused an inward indentation on SLL 1653D or a dent on the front of my car.
- 10. I can only deduce that the car must have been driving at high speed along the left most lane, as I had not seen it when I checked the roads before deciding to cut to the left-most lane.
- Alternatively, SLL1653D might have sped up from behind me in my lane, and proceeded to try to cut to the left-most lane at the same time that I was.
- Therefore, SLL 1653D moved too close to my car, and the shearing force from him moving forward resulted in flat scratches on both cars.
- 13. This resulted in the accident of both cars shearing against each other.





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

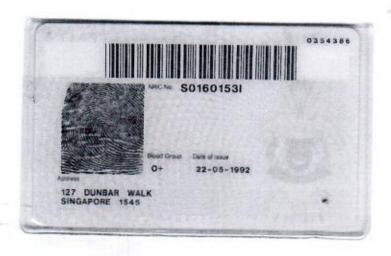
PAGE PAYE

Class 3

Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

05 Nov 1994





NP 429



MSIG Insurance (Singapore) Pte. Ltd. 4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807 Tel +65 6827 7888, Fax +65 6827 7800 Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

Certificate of Insurance

.

ROAD TRANSPORT ACT 1987 (MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)

(REPUBLIC OF SINGAPORE)

THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)

OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.X.1 Individual Ownership MOTOR MAX Comprehensive

Certificate No. A 27574835 QMX

Excess: SGD1,500

Windscreen Excess: SGD100

 Index Mark and Registration Number of Vehicle SFE48R

2. Name of Policyholder

Fang Hui Huan

 Effective Date of the Commencement of Insurance for the purposes of the Act 13/09/2017

4. Date of Expiry of Insurance

12/09/2018

5. Persons or Classes of Persons entitled to drive*

Fang Hui Huan
Loh Weng Whye, Loh Yin Shan
Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

* Provided that the person driving is permitted in accordance with the licensing or other laws or 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 only for social domestic and pleasure purposes and for the Policyholder's business. The Policy does not cover use for hire or reward 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.

* 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.

PLEASE NOTE ALL CLAIMS RELATED REPAIR MUST BE CARRIED OUT AT ANY MSIG AUTHORISED WORKSHOP LISTED IN THE ATTACHED.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination or if the Certificate 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 (Cap. 189).

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) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurers

(1)

for Chief Executive Officer