#### 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 <u>truthful and accurate</u> 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.
- 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.

aforesaid.	consent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	20/09/2018 16:38
Date Of Accident	19/09/2018 19:00
Exact Location Of Accident	BOON LAY WAY TOWARD COMMONWEALTH AVE WEST
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SDG1081A
Insured/Policyholder	
Name Of Registered Owner	TAN LING FANG
NRIC No	S7578444I
Email Address	YHANGOOS@OUTLOOK.COM
Mobile Phone No	(LOCAL) +65-93834757

OFFICE-93834757

Alternative Phone No Vehicle Particulars

Manufacturer VOLKSWAGEN

Model GOLF A7 1.4 CL 92 (DSG)

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 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/00460679

Cover Note Number

Driver

 Name of Driver
 TAN LING FANG

 NRIC No
 \$7578444I

 Date Of Birth
 09/08/1975

 Occupation
 INDOOR

 Date Of Driving Pass
 19/09/2018

Date Of Driving Pass 19/09/2018
Driving Experience 0 YEAR AND 0 MONTH

Gender FEMALE

Mobile Number (LOCAL) +65-93834757

Fax Number

Contact Number OFFICE-93834757

EMail Address YHANGOOS@OUTLOOK.COM

238 WESTWOOD AVENUE Address

#03-41 648363

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** 

**CHAIN COLLISION** Type Of Accident

Weather Conditions **CLEAR** Road Surface DRY

Other Information

Postcode

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

NO

YES Was any other material or property damaged?

I have been approached by unknown person(s)

NO soliciting/offering accident claims assistance.

1 Number of Passengers (Including Driver)

**Details of Police Action** 

Was the accident reported to the police?

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? YES

Remarks/ Reasons: VIDEO SIZE EXCEEDED

NO Was there any audio recorded?

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

SLQ2632G Vehicle Registration Number

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR TIN MYO HTET Name of Driver S7366643J NRIC/Passport Number

**Contact Number** 

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF OTHER VEHICLE PROPERTY 2** 

90094553

Vehicle Registration Number SKK7702Z

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR
Name of Driver LAU WEI HOE
NRIC/Passport Number S8486866C
Contact Number 91449733

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Sketch Plan Pg. 1

#### **SKETCH PLAN**

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 5. Any false reporting may be referred to the Police for investigation.
- 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: -- | 4 | 2018

**Driver's Signature** 

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

# Sketch Plan #2 Pg. 1

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oliovholder's Signature	Driver's Signature		Reporting Centre	Personnel's Signature
olicyholder's Signature ate & Time: 30/9/30/8	(If driver is not the policyh Date & Time:	older)	Name: NRIC/FIN No.:	



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/00460679

Type of Coverage / Driver Plan : Car Comprehensive (Value Plus Plan)

1) Vehicle Registration No. : SDG1081A

Chassis No. WVWZZZAUZHW060917

2) Name of Policy Holder : Tan, Ling Fang

3) Effective Date / Time of Commencement

of Insurance for the Purpose of the Act : 28/04/2018 00:00

4) Date/Time of Expiry of Insurance : 27/04/2019 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\$ 500.00 (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 : Tan, Ling Fang

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: 20/03/2018

Direct Asia Insurance (Singapore) Pte. Ltd.

Edip Okur Chief Underwriting Officer Company Registration: 200822611G























