





## 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 liability.
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	17/10/2018 10:50
Date Of Accident	01/10/2018 17:00
Exact Location Of Accident	JURONG ISLAND OILTANKING TERMINAL CARPARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJN1271K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	REACH INT
Co Reg No	53247782X
Email Address	DAVISCHH@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96743845
Alternative Phone No	OFFICE-96743845

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	AVANTE-2.0 GL
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 HIRE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5092838086
Cover Note Number	

### Driver

Name of Driver	CHUA HAN HUI
NRIC No	S8738800Z
Date Of Birth	01/12/1987
Occupation	INDOOR
Date Of Driving Pass	27/04/2007
Driving Experience	11 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96743845
Fax Number	
Contact Number	OTHERS-96743845
EMail Address	DAVISCHH@GMAIL.COM

Address	BLK 627 WOODLANDS AVENUE 6 #09-866
Postcode	730627
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLIDED INTO PARKED VEHICLE
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
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

PLEASE 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	SLV4430H
Vehicle Make/Model/Colour	HONDA CIVIC
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	HUIN SENG KWAN
NRIC/Passport Number	S1744718A
Contact Number	91720363
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## 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:

16 Oct 2018

12:51 hr

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

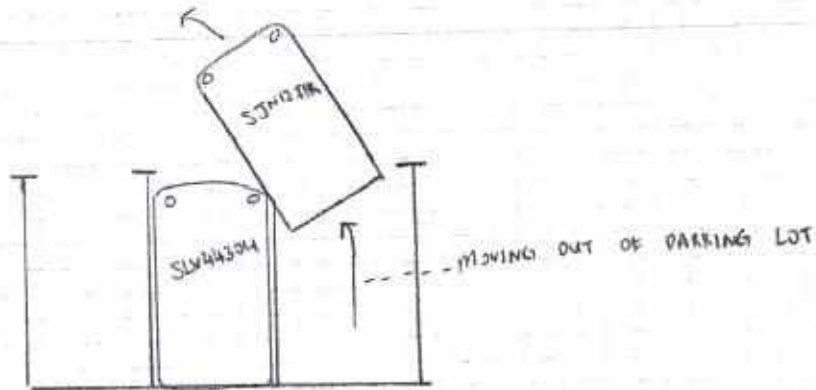
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

17th Oct 2018  
Rohit Kumar



SKETCH PLAN

JURONG ISLAND, OIL TANKING TERMINAL CARPARK



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 01 Oct 2018, I was driving my Hyundai Avante (~~SJW1271K~~ SJW1271K).

While driving out of my parking lot, I have collided against my the car on the left parking lot (SLV4430H). The car (SLV4430H) is parked and stationary.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature  
Date & Time:

16 Oct 2018

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

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

17/10/2018  
Rafael [Signature]

## INFORMATION RESOURCES

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT, THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

## Business Profile (Business) of REACH INT (53247782X)

Date: 18/01/2018

## Existing Sole-Proprietor(s) / Partner(s)

Name	ID	Nationality/Place of Incorporation/Origin	Address	Address Source	Date of Entry	Position
CHUA HAN HUI	S8738800Z	SINGAPORE CITIZEN	627 WOODLANDS AVENUE 6 #09-866 SINGAPORE (730627)	OSCARS	23/10/2013	Owner

## Withdrawn Partner(s)

Name	ID	Nationality/Place of Incorporation/Origin	Address	Address Source	Date of Entry	Date of Withdrawal
					Position	

## Abbreviation

OSCARS - One Stop change of Address Reporting Service by Immigration & Checkpoint Authority.

## Note :

- The information contained in this Business Profile is extracted from lodgements filed by this entity with ACRA.
- The list of officers for this entity is available for online authentication within 30 days from the date of purchase of this Business Profile. Please scan the QR code available on the last page of this profile to access the authentication page. For more information, please visit [www.acra.gov.sg](http://www.acra.gov.sg).

FOR REGISTRAR OF COMPANIES AND BUSINESS NAMES  
SINGAPORE

RECEIPT NO. : ACRA180118151126

DATE : 18/01/2018

This is computer generated. Hence no signature required.



Authentication No. : E18046311F

## Claim Handling

Accident MT/1014332

Policy No.	5052530000	Vehicle No.	SJN1271K	GST Registration No.	
Certificate No.					
Policyholder Name	REACH INT			Policyholder NRIC	51247702X
Product Code	PRIVATE CAR INSURANCE	Driver Type	drvr CLASSIC	Loading	0
Contact No.(Mobile)	NA	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	= No Yes	TCA	= No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	Not available

## Accident Details

Report Date	04/10/2018 11:21	Accident Report Within 24 hrs	Yes	Accident Type	Unknown
Date of Accident	01/10/2018	Time of Accident h:mm	17:05	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	AT JURONG ISLAND OIL TANKING TERMINAL CARPARK				

## Excess

Own damage Excess	2,000.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess	2,000.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		

## Benefits

## GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

## Policyholder Mailing Address

Address 1	BLK 527 #09-056	Address 2	WOODLANDS AVENUE 5	Address 3	SINGAPORE 730627
Address 4		Address Type	Singapore address	Post Code	730627
Unit No.	#09-066	Related Policy Number	5052530000		

## Q1 Driver Info

Driver Name		Driver Type		Driver DOB	
Unnamed Driver Name		Driver NRIC		Driving Experience	
Register Date of Driver License		Driver Age		Contact No.(Home)	
Contact No.(Mobile)		Contact No.(Office)		Address 1	
Address 1		Address 2		Address 3	
Address 4		Address Type	Foreign address	Post Code	
Unit No.					
Does he own a Singapore Registered car?	Yes = No	Driver Vehicle No.		Driver Insurer Company	

Modification History

Claim 002 **New**

Claim Type *	OD-MX	Insured Name	REACH INT	Insured NRIC	11247
Contact No.(Home)	NR737660	Contact No. (Home)		Contact No. (Office)	NIL
Email Address		UI Vehicle Number	SJN1271K	TP Vehicle Number	SLV44
Claim Description	SJN1271K / SLV440H ON 1 Oct 2018			Name of Preferred Workshop	
Preferred Workshop		Insured Liability	Polly at Fault		
POAWM No.		Insured Option	Please Select	GIA report	Received
Date Registered	17/10/2018 10:47	Claim Close Date		Date Received	17/10/
Report Taken By	ROSLI WAHAB				

Print AK letter

Save Submit

## Attachment

Accident No.	MT/1014332	Claim No.	002
Last Date Received	* Yes No	Upload Date	17/10/2018 11:03
Path *			
Choose File	No file chosen	Clear	Category *
Choose File	No file chosen	Clear	Confidential
Choose File	No file chosen	Clear	Urgency *
Choose File	No file chosen	Clear	Destination
Choose File	No file chosen	Clear	
Choose File	No file chosen	Clear	
Choose File	No file chosen	Clear	
Message Read			

## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	M
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Oct 2018 11:03	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-10-17	
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Oct 2018 11:03	SAS	Normal	SAS 2018-10-17	

10/17/2018

Claim Handling( Claim Task )

	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Oct 2018 10:48	Photos	Normal	Photos 2018-10-17
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Oct 2018 10:48	Photos	Normal	Photos 2018-10-17
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Oct 2018 10:48	Photos	Normal	Photos 2018-10-17
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Oct 2018 10:48	Photos	Normal	Photos 2018-10-17
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Oct 2018 10:48	Photos	Normal	Photos 2018-10-17
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Oct 2018 10:48	Photos	Normal	Photos 2018-10-17
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Oct 2018 10:48	Photos	Normal	Photos 2018-10-17
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Oct 2018 10:48	Photos	Normal	Photos 2018-10-17

Video List

Uploaded By/Date	Folder Date	File Name	Source
		<input type="button" value="Display in New Window"/> <input type="button" value="Scan and uploading"/>	



# ACCIDENT STATEMENT

ACCIDENT DATE: (01 / 12 / 2018) (DD/MM/YYYY), TIME: (17:00) (HH:MM)

LOCATION: Island 15 AND, OIL TANKING TERMINAL CARPARK

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SJN1241K  
 b) INSURANCE COMPANY: NTUC Income  
 c) POLICY NUMBER: 5092838086  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: HYUNDAI AVANTE 2.0  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: PERSONNEL USE  
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)  
 IF NO, PLEASE STATE THIRD PARTY CLAIM / REPORTING ONLY

## 2. INSURED / POLICY HOLDER

- A) NAME: CHUA HAN HUI (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S87388002 CONTACT: 96443845  
 c) ADDRESS: BLK 624 WOODLANDS AVE 1 #09-866 (730627)

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

- a) NAME: AS ABOLH (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
 c) ADDRESS: \_\_\_\_\_

\* d) DATE OF BIRTH: (01 / 12 / 1987) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 27 APR 07

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)  
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: \_\_\_\_\_

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)  
 b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: \_\_\_\_\_

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SLV4430H MODEL: HONDA CIVIC  
 b) DRIVER'S NAME: HUI SENG KWAN  
 c) NRIC/FIN/PASSPORT: S1744718A CONTACT: 91720363

## 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
 e) DRIVER'S NAME: \_\_\_\_\_  
 f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

EMAIL = davischh@gmail.com

VIDEO = .VIL

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S8738800Z



Name

CHUA HAN HUI

蔡漢輝

Race

CHINESE

Date of birth

01-12-1987

Country of birth

SINGAPORE

Sex

M

S8738800Z

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence No. S8738800Z

Name

CHUA HAN HUI

DOB Date: 01 Dec 1987

Issue Date: 17 Dec 2016



1002639426G



4819504

NRIC No. S8738800Z



Date of issue

12-01-2012

APT BLK 627 WOODLANDS AVENUE 6 #09-808  
SINGAPORE 730627

NRIC No. S8738800Z  
SINGAPORE S8738800Z

Date: 25/10/2014

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

Class 3 Motor cars with unladen weight  $\leq$  3000kg with  $\leq$  7 passengers, exclusive of driver; and other motor vehicles with unladen weight  $\leq$  2500kg

EFFECTIVE DATE

27 Apr 2007

NP 428A



Licence No: S8738800Z

## Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND 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)

**Certificate Number:** 5092838086

**Cover :** drive CLASSIC

- |  |   |
|--|---|
| 1. Index mark and Registration Number of Vehicle   | : <b>SJN1271K</b>   |
| Chassis Number   | : KMHOU41DR8U633285   |
| 2. Name of Policyholder  | : REACH INT   |
| 3. Effective Date of Insurance   | : 22 Jul 2017   |
| 4. Expiry Date of Insurance  | : 03 Feb 2019   |
| 5. Persons or Classes of Persons entitled to drive#  |   |
| (a) The Policyholder.  |   |
| (b) Any other person who is driving on the Policyholder's order or with his/her 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. |
| 6. Limitations as to Use#  |   |
| (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business. |   |

**This Policy does not cover**

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) Use for any purpose in connection with the Motor Trade.

# Limitations rendered Inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: DBS BANK LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : AUTOSHIELD PTE. LTD. (00000573469)  
Date of Issue : 21 Jul 2017 19:23 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:



Authorised Officer



Chief Executive