

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	13/11/2018 17:58
Date Of Accident	12/11/2018 19:25
Exact Location Of Accident	MACPERSON RD TRAFFIC JUNCTION TOWARDS BENDEMEER RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SCK1000A
Insured/Policyholder	
Name Of Registered Owner	LOO LIEW PIAN
NRIC No	S1122945Z
Email Address	DAVID.LOO@ME.COM
Mobile Phone No	(LOCAL) +65-96363753
Alternative Phone No	OTHERS-96363753

Vehicle Particulars

Manufacturer	BMW
Model	640i
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5096219416
Cover Note Number	

Driver

Name of Driver	LOO LIEW PIAN
NRIC No	S1122945Z
Date Of Birth	23/04/1955
Occupation	INDOOR
Date Of Driving Pass	17/07/1973
Driving Experience	45 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96363753
Fax Number	
Contact Number	OTHERS-96363753
Email Address	DAVID.LOO@ME.COM

Address	25 KEPPEL BAY VIEW #20-78
Postcode	098415
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 - HEAD TO REAR
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)	2
Passenger 1	NAME: : WIFE 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

PLEASE REFER TO SKETCH PLAN

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	SJT5332K
Vehicle Make/Model/Colour	HYUNDAI
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	UNKNOWN
NRIC/Passport Number	
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: 13-11-2018
16:20 hrs

Driver's Signature

(If driver is not the policyholder)
Date & Time:

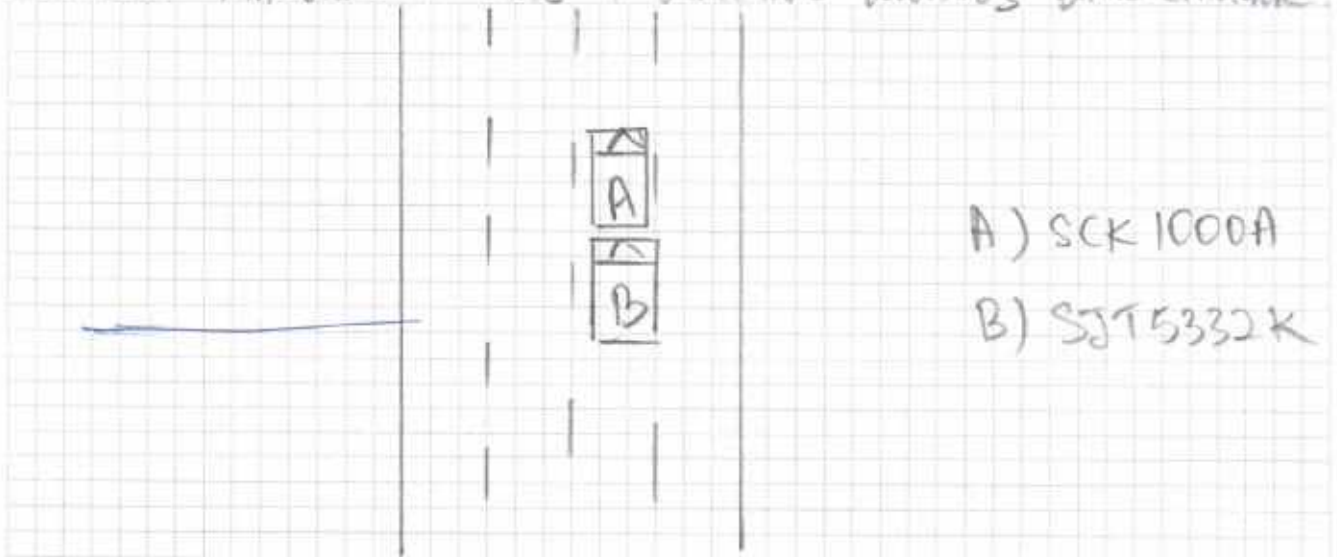
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN

MACPHERSON ROAD 1-2 LANE ROAD TOWARDS BRANDMEER



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

SCK1000A driven by me was stationary at the traffic junction waiting for the light to turn green when SJT 5332K hit the rear of my car. The lady driver of SJT 5332K initially denied having banged into my car when she saw that there was no visible damage. She owned up only when my wife Rosie who was my passenger pointed out the damage on her car to her. The bonnet of her car was bent. I told her I would make a Report. We did not exchange particulars. This morning I inspected my car and I found that there were some scratches, minor dents and ~~the~~ paintwork on the bumper bumper sustained a cracked line. ~~or~~ cracked line.

That's all.

DECLARATION

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

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.:

Claim Handling

Accident MY/1019654

Policy No.	5096219416	Vehicle No.	SDK1000A	GST Registration No.	
Certificate No.					
Policyholder Name	LOO LIEW PIAN			Policyholder NRIC	S11229452
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	96363753	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No *
KPI	+ No - Yes	TCA	+ No - Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	50	Private Hire	No

Accident Details

Report Date	13/11/2018 19:17	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	12/11/2018	Time of Accident hh:mm	19:25	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	MACPHERSON RD TRAFFIC JUNCTION TOWARDS BENDERMEER RD				

Excess

Own Damage Excess	1,500.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	1,500.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

Benefits

GST Registered Information

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

Policyholder Mailing Address

Address 1	25 KEPPEL BAY VIEW	Address 2	#20-78 REFLECTIONS AT KEPPEL	Address 3	SINGAPORE 098415
Address 4		Address Type	Singapore address	Post Code	098415
Unit No.		Related Policy Number	5096219416		

OI Driver Info

Driver Name	LOO LIEW PIAN	Driver Type	Main Driver	Driver DOB	23/04/1955
Unnamed driver Name		Driver NRIC	S11229452	Driving Experience	41
Register Date of Driver License	01/01/1977	Driver Age	63	Contact No.(Home)	
Contact No.(Mobile)	96363753	Contact No.(Office)		Address 3	SINGAPORE 098415
Address 1	25 KEPPEL BAY VIEW	Address 2	#20-78 REFLECTIONS AT KEPPEL	Post Code	098415
Address 4		Address Type	Singapore address		
Unit No.					
Does he own a Singapore Registered car?	Yes - No	Driver Vehicle No.	SDK1000A	Driver Insurer Company	NTUC

Declaration

Breathalyzer or Band Test Reading?	0 mg	Any Injury?	Yes - No
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Modification History

Claim 001 New

Claim Type *

Contact No.(Mobile)

Email Address

Claim Description

Preferred Workshop		Insured Liability	Not at Fault	Insured Name	LOO LIEW PIAN	Insured NRIC	S11229
SALES No.	Yes	Preferred Repair Option	Preferred Workshop Name unknown	Contact No.	96363753	Contact No.(Office)	
Finalisation				Vehicle No.	SDK1000A	Vehicle Number	S1T553
Date Registered		GIA report	Received	SDK1000A / S1T5532K ON 12 Nov 2018			
Report Taken By				Claim Close Date		Date Received	13/11/2018

Print AK letter

Save Submit

Attachment

Accident No.	MY/1019654	Claim No.	001
Last Doc. Received	Yes No	Upload Date	13/11/2018 19:20
Path *		Category *	Confidential
Choose File	No file chosen	Urgency *	Normal
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Message Read			

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Mt
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Nov 2018 19:20		Photos	Normal	Photos 2018-11-13	

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Nov 2018 19:20	Photos	Normal	Photos 2018-11-13
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Nov 2018 19:20	Photos	Normal	Photos 2018-11-13
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Nov 2018 19:20	Photos	Normal	Photos 2018-11-13
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Nov 2018 19:20	Photos	Normal	Photos 2018-11-13
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Nov 2018 19:20	Photos	Normal	Photos 2018-11-13
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Nov 2018 19:20	Photos	Normal	Photos 2018-11-13
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Nov 2018 19:20	Photos	Normal	Photos 2018-11-13
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Nov 2018 19:20	Photos	Normal	Photos 2018-11-13
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Nov 2018 19:20	Photos	Normal	Photos 2018-11-13
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Nov 2018 19:20	SAS	Normal	SAS 2018-11-13
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Nov 2018 19:20	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-11-13

Video List

Uploaded By/Date	Folder Date	File Name	Source
		Display in New Window	Seen and uploading

ACCIDENT STATEMENT

ACCIDENT DATE: 12/11/2018 (DD/MM/YYYY), TIME: 19:23 (HH:MM) Bendemeer Rd.
 LOCATION: Macpherson Rd traffic junction in direction of Bendemeer Rd.

1. DETAILS OF VEHICLE
 - a) VEHICLE NUMBER: Sek 1000A
 - b) INSURANCE COMPANY: Income
 - c) POLICY NUMBER: 5096219416
 - d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 - e) MAKE & MODEL: Bmw 640
 - f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 - g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 - h) PURPOSE OF USING AT ACCIDENT TIME: Private
 - 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: LOO LIEW PIAN (MALE / FEMALE)
 - b) NRIC/FIN/PASSPORT: S11239452 CONTACT: 96363783
 - c) ADDRESS: 25 Koppel Bay View, # 20-78, Reflections Singapore 098415

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

- DRIVER
- a) NAME: As above (MALE / FEMALE)
 - b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 - c) ADDRESS: _____

d) DATE OF BIRTH: 23/04/1955 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 17-7-73

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: Hyundai

8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: STJ 5332K MODEL: Hyundai

b) DRIVER'S NAME: unknown

c) NRIC/FIN/PASSPORT: unknown CONTACT: unknown

9. THIRD PARTY VEHICLE

d) VEHICLE NUMBER: _____ MODEL: _____

e) DRIVER'S NAME: _____

f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

Email: david.loo@me.com

Fax: _____

VIDEO YES

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1122945Z



Name
LOO LIEW PIAU

Race
CHINESE

Date of Birth
23-04-1955

Sex
M

Country of Birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1122945Z**

Name
LOO LIEW PIAU

Birth Date: **23 Apr 1955**

Issue Date: **14 Apr 2004**




001194940H

0511825



NRIC No: **S1122945Z**



Blood Group: **O+** Date of Issue: **09-09-1992**

25 KEPPEL BAY VIEW #20-7B
SINGAPORE 098415


NRIC No: **S1122945Z** Date: **08/08/2012** No: **7085508**

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

	PASS DATE
Class 2B Motorcycles not exceeding 200 cc	07 Dec 1976
Class 2A Motorcycles between 201 cc and 400 cc	07 Dec 1976
Class 2 Motorcycles exceeding 400 cc	07 Dec 1976
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 3500 kilograms	17 Jul 1973

425A

Licence No: **S1122945Z**



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: 5096219416

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : **SCK1000A**
Chassis Number : **WBA6A02000DZ11049**
2. Name of Policyholder : **LOO LIEW PIAN**
3. Effective Date of Insurance : **18 Dec 2017**
4. Expiry Date of Insurance : **17 Dec 2018**
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 business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) 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\$1,500
EXCESS (SECTION 2)	: N/A
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
PRIMARY DRIVER	: LOO LIEW PIAN
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
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)

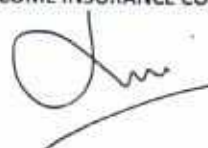
Agency : WINNER INSURANCE AGENCIES PTE LTD (00000572570)
Date of Issue : 28 Nov 2017 17:11 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive