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 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	13/11/2018 16:27
Date Of Accident	12/11/2018 21:00
Exact Location Of Accident	AT 604 WOODLANDS DR 42
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLW5844K
Insured/Policyholder	
Name Of Registered Owner	SEE SIEW ENG JULIN
NRIC No	S0316668F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91796899
Alternative Phone No	HOME-64817817
Vehicle Particulars	
Manufacturer	BMW
Model	X5 XL
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	THIRD PARTY
Fleet Policy	NO
Policy Number	MT/00518979
Cover Note Number	
Driver	
	DOLL INIO EA LACON (EL INIOEA)

Name of Driver POH JING FA JASON (FU JINGFA)

NRIC No S8533028D
Date Of Birth 05/10/1985
Occupation INDOOR
Date Of Driving Pass 16/12/2011

Driving Experience 6 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91796899

Fax Number
Contact Number

EMail Address SAMHENG@LIVE.COM

APT BLK 12C MARSILING LANE #28-81 Address

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured **RELATIVE**

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

NO

YES

NO

1

NO

NO

Weather Conditions **RAINING** Road Surface WET

Other Information

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by ambulance?

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?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER SKETCH PLAN

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? NO NO

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1 GBG1451P

Vehicle Registration Number Vehicle Make/Model/Colour

Details Of Properties

COMMERCIAL VEHICLE Vehicle Category CHAN LEI KHEONG Name of Driver

NRIC/Passport Number S1518920G

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 14

Accident Sketch Plan Pg. 1

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 insurers) 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:
 - (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 Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN DESCRIBE CIRCUMSTANCES OF THE ACCIDENT Accident Date & Time : 12/11/2018 2100

Accident Location: 60	Accident Location: 604 Woodlands Pr 42_		
·.			
l was s	stationary at the mentioned location-		
. Before 1	proceed		
Suddenly	I fest an impact on my rear portion. I not ad		
that vehic	te B had collided on to my stationary venicle.		
Vehicle B	dover also admitted it was his fault & to		
proceed to	claim his insurance.		
•			
		, ,	
		•	
DECLARATION Report	ting Only Own Damage A Third Party Claim at other worksho	p (OD/TP)	
I/We declare the foregoing particu		oy (Own Damage Cleim), eframe from the day of	
8	PH W		
Policyholder's Signature	Driver's Signature Reporting Centre Personnel's Signature	ature	
Date & Time:	(If driver is not the policyholder) Name: NRIC/FIN No		

NRIC/FIN No.:

GIARMC SketchPlanForm V3



Contact us at

Hotline: (65) 6532 2888

CustomerService@DirectAsia.com E-mail:

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.

MT/00518979 Certificate No.

Type of Coverage / Driver Plan Car Third-Party Only (Value Plus Plan)

1) Vehicle Registration No. SLW5844K

WBAFE42010LK96738 Chassis No.

2) Name of Policy Holder SEE, SIEW ENG THEIR

3) Effective Date / Time of Commencement

of Insurance for the Purpose of the Act 10/08/2018 00:00

4) Date/Time of Expiry of Insurance 16/04/2019 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.

Market Value Sum Insured

S\$ 0.00 (before any applicable GST) Own Damage Excess

Not Applicable (before any applicable GST) Windscreen Excess

Choice of workshop DirectAsia approved workshops

Finance company / Hire Purchase

Main driver POH JING FA JASON

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: 08/08/2018

> Edio Okur **Chief Underwriting Officer**

Direct Asia Insurance (Singapore) Pte. Ltd.

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

DRIVER DETAILS Pg. 1

IDENTITY CARD NO \$8533028D





POH JING FA JASON (FU JINGFA)

傳 故 法

CHINESE

0ste of hirth 05-10-1985

Country Place of pire-SINGAPORE

REPUBLIC

.

DRIVING LICENCE



Libergos Namber: \$8533028 D

POH JING FA JASON (FU JINGFA)

Birth Date 05 Oct 1985 tecue Date. 26 Sep 2006



5560594



S8533028D



12-02-2016

APT BLK 12C MARSHING LANE #28-81 SINGAPORE 733012

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

PASS DATE

Class 3 Motor cars =< 3000 kg with =< 7 passengers, exc driver; and motor fracturs/vehicles =< 2500 kg Class 4 fleaty motor cars and motor fracturs > 2500 kg

16 Dec 2011

S8533028D

S/No 9000154502

NP 428A

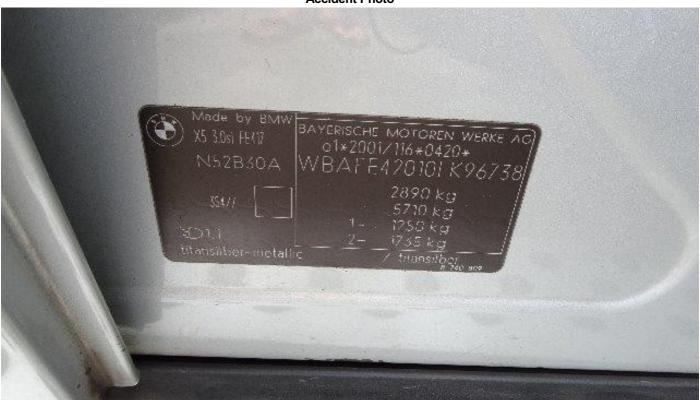












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