1 1 1/2 1

### 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 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.
- $\bar{\textbf{5}}.$  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 ladgement 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.

HARRIST WATER CONTRACTOR	ACCIDENT STATEMENT
Date Of Report	26/11/2018 12:37
Date Of Accident	24/11/2018 11:10
Exact Location Of Accident	JUNC OF PUNGGOL EAST & PUNGGOL FIELD
Country/State of Loss	SINGAPORE
And the second of the second of the second	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMC6950Z
Insured/Policyholder	
Name Of Registered Owner	CHEW KEE HUAT
NRIC No	S1352352E
Email Address	KHCHEW888@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98626773
Alternative Phone No	OTHERS-98626773
Vehicle Particulars	
Manufacturer	HONDA
Model	FIT HYBRID
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?	YES
If No, Please state action to be taken	
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	5102056221
Cover Note Number	
Driver	
Name of Driver	CHEW KEE HUAT
NRIC No	\$1352352E
Date Of Birth	24/05/1959
Occupation	INDOOR
Date Of Driving Pass	13/06/1982
Driving Experience	36 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98626773
Fax Number	
Contact Number	OTHERS-98626773

KHCHEW888@GMAIL.COM

BLK 173B PUNGGOL FIELD Address

#13-603 822173

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

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

YES

NO

2

NO

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)

Passenger 1

NAME: : UNKNOWN

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?

If Yes, against whom?

### Circumstances of Accident

I WAS TRAVELLING STRAIGHT ALONG PUNGGOL EAST ON THE EXTREME LEFT LANE.I PROCEED TO MOVED OFF MY VEH AT THE JUNC OF PUNGGGOL FIELD AND MY VEH HIT ONTO THE REAR PORTION OF VEH B.I DIDN'T REALIZED THAT THE FRT VEH WAS NOT MOVING DUE TO THE HEAVY TRAFFIC FLOW.

### 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 SJL7465P

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver TAN KIA CHUN, ANDY

NRIC/Passport Number S7907541H Contact Number 96892479

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

### SKETCH PLAN

# IMPORTANT NOTICE

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- 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:
  - (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.:

PUNGGOL PIELD SKETCH PLAN A- SMC 6950Z PUNGGOL EASI B- SJL7665P DESCRIBE CIRCUMSTANCES OF THE ACCIDENT Statement

## 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.:









eBaoTech GeneralClaim Hello, NAC\_PAYA\_UBI\_800601 · Change Language · Change Password · Log Out My Desktop **Policy Query** Notice of Loss Policy No. Date of Accident 24/11/2018 11:10 Vehicle No.(Far Mator) SMC6950Z Certificate Number Search Policyholder NRIC Certificate Policyholder Vehicle No. Insured Object Select Policy No. Commence Date Product Cover Type Expiry Date Number CHEW KEE HUAT drivo 5102056221 SMC6950Z SMC6950Z 17/07/2018 16/07/2019 S1352352E GPC PREMIUM Continue



# 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)

Cover : drivo PREMIUM Certificate Number: 5102056221

: SMC6950Z Index mark and Registration Number of Vehicle

: GP53415294 Chassis Number

: CHEW KEE HUAT 2. Name of Policyholder : 17 Jul 2018

3. Effective Date of Insurance : 16 Jul 2019 4. Expiry Date of Insurance

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.

: \$\$600 EXCESS (SECTION 1) : N/A EXCESS (SECTION 2) : \$\$100 WINDSCREEN EXCESS : N/A ADDITIONAL EXCESS

: PLEASE REFER OVERLEAF LINNAMED DRIVER EXCESS

YES REPAIR AT OWNER'S PREFERRED WORKSHOP : YES INSURE WITH COE . YES NCD PROTECTION : NO TRANSPORT ALLOWANCE : NO EXCESS WAIVER

: CHEW KEE HUAT PRIMARY DRIVER

+ N/A NAMED DRIVER (1) : N/A NAMED DRIVER (2)

: OCBC BANK LTD HIRE PURCHASE COMPANY : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS SUM INSURED

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)

: VENTURE CARS PTE. LTD. (00000573058)

: 16 Jul 2018 18:24 hrs Date of Issue

Countersigned By:

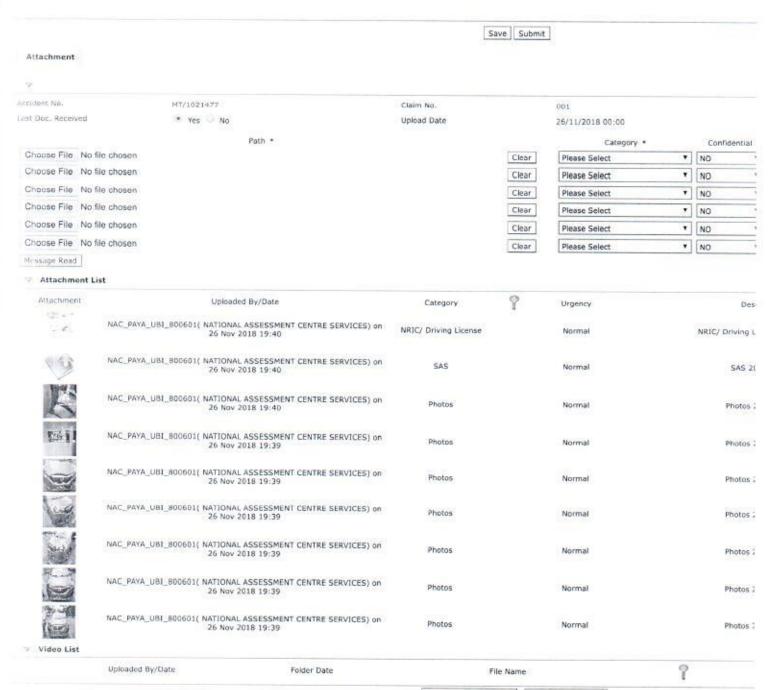
For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

**Authorised Officer** 

Chief Executive

# Claim Handling

Accident MT/1021477						
Policy No.	5102056221	Vehicle No.	SMC6950Z		GST Regist	ration
Certificate No.					OD I Neglac	a delicis
Policyholder Name	CHEW KEE HUAT				Policyhoide	e MOTO
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo PREMIUM		Loading	140.20
Contact No.(Mobile)	98626773	Contact No.(Office)	0		Contact No	./Hom
Email Address		Special Remark			eCode	alle and
KEK	No Yes	TCA	. No Yes		eCode Reas	son
NCD Protection	Yes	NCD Entitlement(%)	50		Private Hire	
Accident Details		0.0500.0000.0000.000000.00500	22.0		THOUSE THE	9.0
Report Date	26/11/2018 19:35	Accident Report Within 24 hrs	Yes		Accident Ty	10.0
Date of Accident	24/11/2018	Time of Accident hh:mm	11:10			
Reporting Centre		Orange Force	11.10		Country of ICM No.	Accide
Accident Location	JUNC OF PUNGGOL EAST & PUNGGOL FIELD				IGH NO.	
Excess						
Own damage Excess	600.00	Additional Excess	D		Windscreen	Evene
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	70700	600.00	Williastreen	1 EXCHS
Third Party Excess	0.00	Outside Singapore TP Excess		0.00		
7 Benefits						
GST Registered Informat	tion					
GST Registered	No		GST Ren	stration Date		
GST Registration No.			7,575,000	us Verified	v	les .
Modification History					11/2	
Policyholder Mailing Add	ress					
Address 1	BLK 173B #13-603	Address 2	PUNGGOL FIELD		Address 3	
Address 4		Address Type	Singapore address	i.	Post Code	
Unit No.		Related Policy Number	5102056221			
OI Driver Info						
Driver Name	CHEW KEE HUAT	Driver Type	Main Driver			
Unnamed driver Name		Driver NRIC	S1352352E		Driver DOB	
Register Date of Driver License	13/09/1982	Driver Age	59		Driving Exp	erience
Contact No.(Mobile)	98626773	Contact No.(Office)	0		Contact No.	(Home
Address 1	BLK 173B	Address 2	PUNGGOL FIELD		Address 3	
Address 4		Address Type	Singapore address	Ř	Post Code	
Unit No.	#13-603					
Does he own a Singapore Registered car?	Yes = No	Driver Vehicle No.			Driver Insur	rer Con
Declaration						
Breathalyser or Blood Test	0 mg	Any injury?	Yes a No			
Reading?						
Modification History						
Claim 001 OD-MD New	1					
The state of the s						
Claim Type *				OD-MD	Insured Name	CHEW
Contact No.(Mobile)					Contact .	
condc wo (Pioble)				98626773	No. (Home)	63859
Email Address					01	
				khchew99@yahoo.com.sg	Vehicle Number	SMC69
Claim Description				SMC6950Z / SJL7465P ON 2	4 Nov 2018	
Preferred				E TOUR TOUR TOUR Z	. HOV EVIE	
Workshop	Preference Liability Fully at Fault	·				
Ensuight No. Yes	Repair Preferred Workshop (refer Option	below)   GIA report Received				
	Option			26/11/2010 10:40	Claim	
Date Registered				26/11/2018 19:40		
				20/11/2018 19:40	Date	
Date Registered Report Taken By				ROSLINDA		



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