## SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Contact Number 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 <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	23/11/2018 13:29
Date Of Accident	21/11/2018 18:00
Exact Location Of Accident	TRAFFIC JUNCTION AT CHANGI AIRFREIGHT CENTRE
Country/State of Loss	SINGAPORE
[	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJV7316J
Insured/Policyholder	
Name Of Registered Owner	PETER LEE TZE LIANG
NRIC No	S7313311D
Email Address	PETERLEETL@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96854328
Alternative Phone No	OFFICE-81986883
Vehicle Particulars	
Manufacturer	VOLKSWAGEN
Model	TOURAN 1.6 TDI AT 1T332Z
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/00423979
Cover Note Number	17/10/2017-05/12/2018
Driver	
Name of Driver	GWENDA NG TIN QI
NRIC No	S8337522A
Date Of Birth	24/11/1983
Occupation	INDOOR
Date Of Driving Pass	04/11/2013
Driving Experience	5 YEARS AND 0 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-81986883
Fax Number	

**NOEMAIL** 

Address BLK 157 TAMPINES STREET 12

#12-35

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle Registration Number of Driver's Own

enicie

Insurance Company of Driver's Own Vehicle

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**General Information of the Accident** 

Type Of Accident COLLISION - CHANGE/CROSS LANE

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?

Was any other material or property damaged? YES 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? NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

**Circumstances of Accident** 

REFER TO ATTACHMENT

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 YL7912M

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category COMMERCIAL VEHICLE

Name of Driver AZLAN BIN ZAINOL

NRIC/Passport Number S6912708H
Contact Number 92327821

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## Sketch Plan Pg. 1

## SKETCH PLAN

## **IMPORTANT NOTICE**

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- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- 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)
  - (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")
- 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
- 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.
- 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:

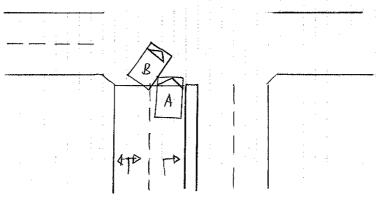
Driver's Signature (If driver is not the policyholder)

Date & Time:

entre Personnel's Signature Reporti Name:

NRIC/FIN NO

SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

WHEN I WAS TURNOM REAMS THE COMMY
ON MY LAND VANAS END MY LANG.
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DRIVEN OR YL 7912 m CLAIMEN HE WAS AVOIDEN
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<u></u>
You had been advised by workshop that in the event that you wish to claim
against your own policy (OD claim), there is a Fourteen (14) days clause Claim OD
whereby the claim must be made within the stipulated timeframe from the day of occurance.
the day of occurance.

# DECLARATION

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

Policyholder's Signature Date & Time:

GRAND St. Laboration 93, 93

Driver's Signature

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

Reporting Centre Personnel's Signature Name NRIC/F

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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/00423979

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

1) Vehicle Registration No. : SJV73163

Chassis No. WVGZZZ1TZEW087721

2) Name of Policy Holder : Lee, Tze Liang Peter

3) Effective Date / Time of Commencement

of Insurance for the Purpose of the Act : 17/10/2017 13:01

4) Date/Time of Expiry of Insurance : 05/12/2018 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\$ 800.00 (before any applicable GST)Windscreen Excess:S\$ 100.00 (before any applicable GST)Choice of workshop:DirectAsia approved workshops

Finance company / Hire Purchase : Hong Leong Finance Limited

Main driver : Lee, Tze Liang Peter

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.

incende of less than 2 years with the exception of the hames divers above.

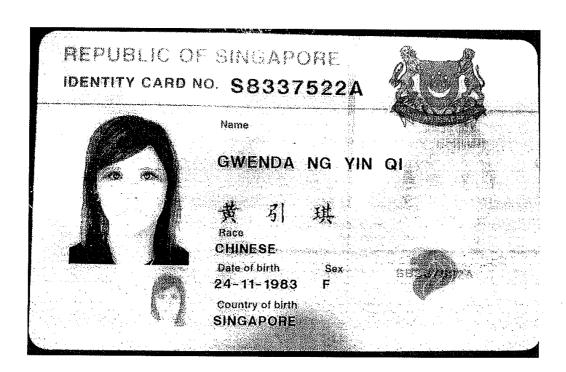
I/We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia).

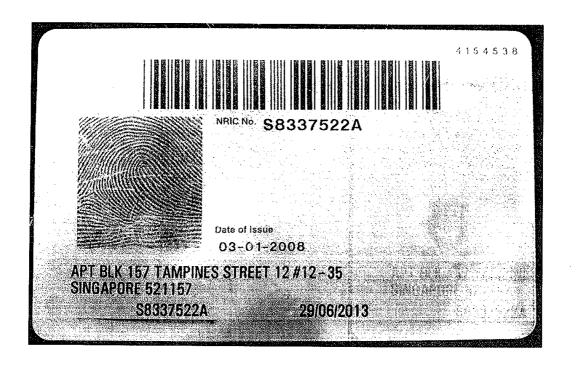
Direct Asia Insurance (Singapore) Pte. Ltd.

Issued on:

17/05/2018

Edip Okur Chief Underwriting Officer Company Registration: 200822611G







SERIAL NO: 65998

26/11/2018

## EXTRACT OF DRIVING LICENCE RECORDS

This is to certify that GWENDA NG YIN QI (ID No: S8337522A, Date of Birth: 24/11/1983) of APT BLK 157 TAMPINES STREET 12 #12-35 SINGAPORE 521157 was granted a Singapore Driving Licence No: S8337522A.

CLASS FIRST ISSUE DATE EXPIRY DATE

3A 04/11/2013 -

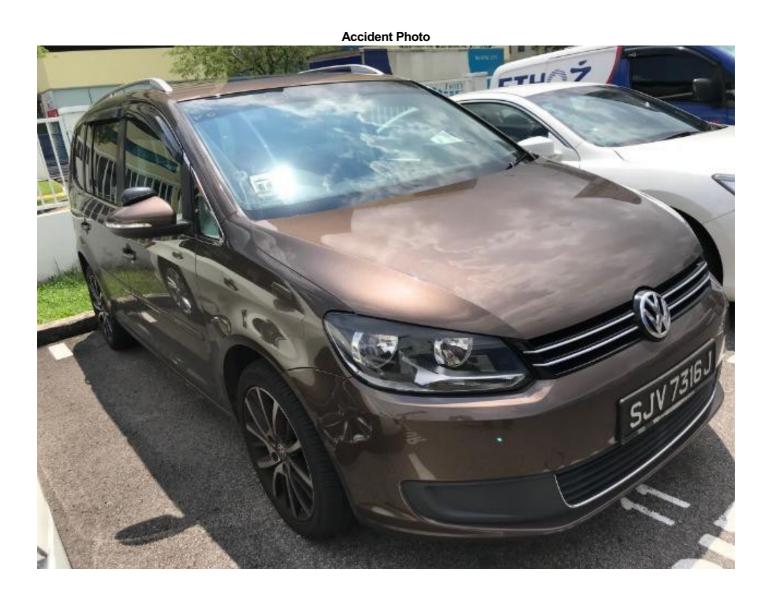
The driving licence is valid for life unless revoked, disqualified or suspended for a period of one year.

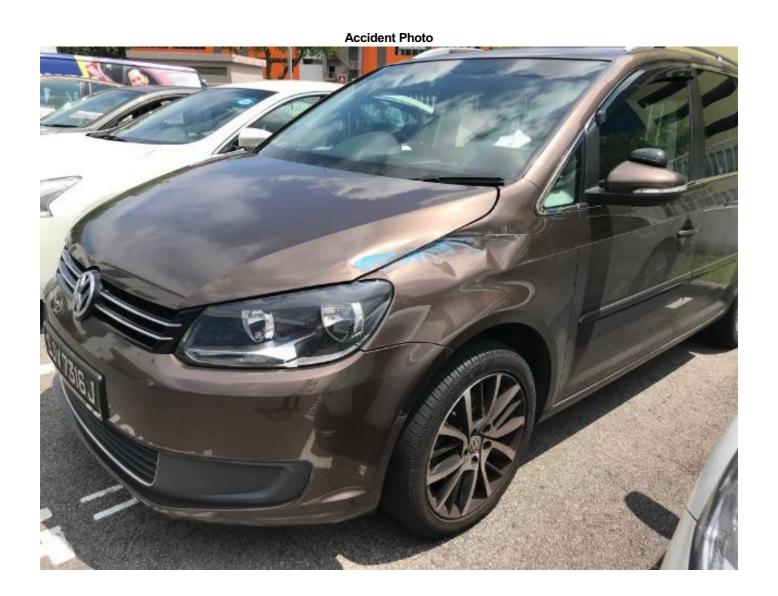
Me/She has maintained dement point free record and have not committed any non-compoundable traffic offence for last \$ years.

Ne Commander Traffic Police

## **Accident Photo**









## **Accident Photo**



# **Accident Photo**



