

## 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	29/11/2018 15:28
Date Of Accident	29/11/2018 08:00
Exact Location Of Accident	ALEXANDRA RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKX785L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LEE SIEW FUN (LI XIUFANG)
NRIC No	S7435135B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97604495
Alternative Phone No	OTHERS-97604495

### Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	SHARAN
Exact Purpose for which vehicle was being used at time of accident	PERSONAL PURPOSE
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	ETIQA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	M0012138
Cover Note Number	25/11/2018-24/11/2019

### Driver

Name of Driver	LEE SIEW FUN (LI XIUFANG)
NRIC No	S7435135B
Date Of Birth	23/10/1974
Occupation	INDOOR
Date Of Driving Pass	25/08/1997
Driving Experience	21 YEARS AND 3 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97604495
Fax Number	
Contact Number	OTHERS-97604495
Email Address	NOEMAIL

Address	2C JALAN EMAS URAI
Postcode	678725
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

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
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?	YES
If Yes, Please state which Police Station	
Police Station Name	10 UBI AVENUE 3
Police Station Address	<b>ROAD:</b> 10 UBI AVENUE 3 , <b>POSTCODE:</b> 408865 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT T/20181129/7003 & 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	SLG9246U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SGP3389S  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SHC5448Z  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category TAXI  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

## Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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5. Any false reporting may be referred to the Police for investigation.
6. 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.
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: 29 Nov 2018  
1056am

Driver's Signature

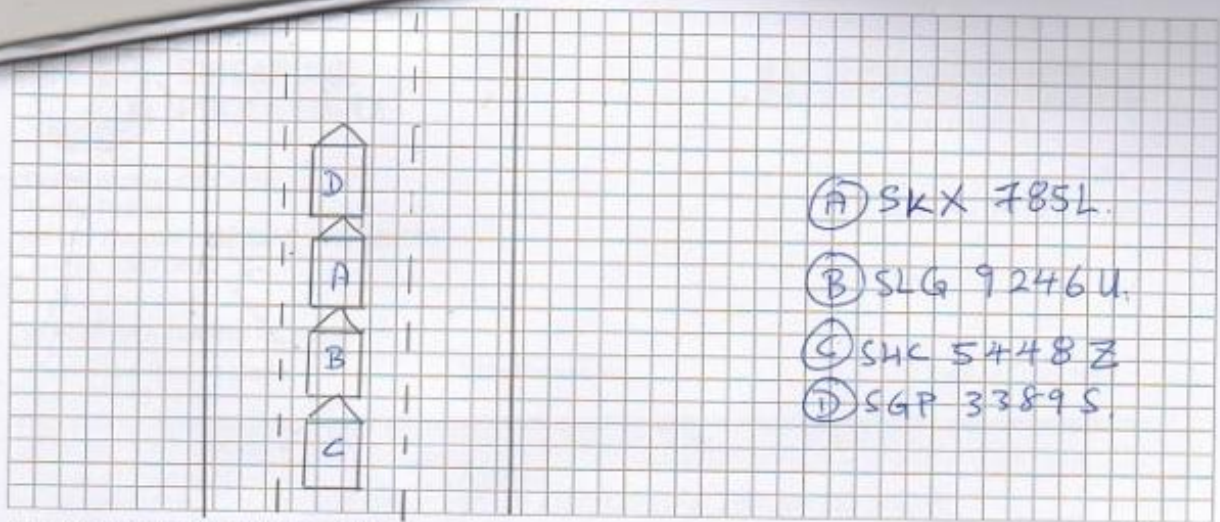
(If driver is not the policyholder)  
Date & Time: 29 Nov 2018  
1056am

HOCK WAH MOTOR WORKSHOP PTE LTD  
Blk 808 Tampines St. 83, #01-204  
Singapore 489552  
Tel: 6785 8933 (Line) Fax: 6785 3933

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



# Sketch Plan #2



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 29 NOV 2018 @ 0800 HRS I WAS DRIVING STRAIGHT ALONG ALEXANDRA RD WHEN THE FRONT VEHICLE STOPPED, I FOLLOW SUIT. SUDDENLY VEHICLE B COLLIDED INTO MY REAR AND PUSHED ME FWD AND COLLIDED INTO FRONT CAR.

## DECLARATION

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

Policyholder's Signature

Date & Time: 29 Nov 2018

GIARMC SketchPlanForm\_V3

Driver's Signature

(If driver is not the policyholder)

Date & Time: 29 Nov 2018

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

HOCK WAH MOTOR WORKSHOP PTE LTD  
Blk 5005 Tampines St. 93, #01-204  
Singapore 528840  
Tel: 6785 3933 Fax: 6785 3933

## Common Statement



**SINGAPORE  
POLICE FORCE**



T/20181129/7003

1 of 4

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20181129/7003

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 29/11/2018 11:38		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: LEE SIEW FUN			Address: 2C JALAN EMAS URAI SINGAPORE 678725		
ID Type / ID No.: NRIC NO / S7435135B			Contact No.: Home/Office: Mobile: 97604495		
Nationality: SINGAPORE CITIZEN			Email: siewfunlee@hotmail.com		
Sex: Female	Age: 44	Date of Birth: 23/10/1974	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Accountant			Driving Licence Information: Class:		Date of Expiry:

**General Information of the Accident**

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 29/10/2018 07:55	Type of Location: Straight Road
Location:  ALEXANDRA ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 60 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Chain Collision			Anyone conveyed by ambulance: Yes	

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGP3389S	Car	HONDA	ODSSEY	White	Seriously Damaged	1
SHC5448Z	Car			Red		0
SKX785L	Car	VOLKSWAGO N	SHARAN 2.0 TSI AT 7N14H3 W/O SR	Grey		0
SLG9246U	Car	HONDA	SHUTTLE	Black	Seriously Damaged	2



## Common Statement



**SINGAPORE  
POLICE FORCE**



T/20181129/7003

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20181129/7003

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKX785L	ETIQA INSURANCE BERHAD	M0012138	25/11/2018	24/11/2019

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	LOK SIOW LING		ID No.	S7975083B
Related Vehicle	SGP3389S (Car)		Contact No.	97995947
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL
Driver				
Name	LEE SIEW FUN		ID No.	S7435135B
Related Vehicle	SKX785L (Car)		Contact No.	97604495
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL
Passenger				
Name	Unknown Passenger		ID No.	NIL
Related Vehicle	SLG9246U (Car)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	Slight

Common Statement



SINGAPORE  
POLICE FORCE



T/20181129/7003

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20181129/7003

CONTINUATION OF REPORT

Brief Details.

I was driving on lane 2 of Alexander Road, the front vehicle in front of me slowed down and stopped the vehicle, noticing that I followed suit and slowed down and stopped behind. Out of a sudden, I felt an great impact from the rear, the impact was so great that it pushed me in front and collided onto the rear of the front vehicle. I alighted and realised that it was a chain collision involving 4 vehicles.

Signature of Officer Recording the Report  
Not applicable

Signature of Reporter  
Not applicable

Officer in Charge of Case  
Not applicable  
SINGAPORE POLICE  
Contact No: 65470000

Investigation Group  
Not applicable

Signature of Reporter  
This identity of the reporter reporting the accident has  
been verified and is correct. No signature is required.

Signature of Reporter  
T/20181129/7003

Officer in Charge of Case



Common Statement



SINGAPORE  
POLICE FORCE



T/20181129/7003

4 of 4

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20181129/7003

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPIB /  
SUFIYAN BIN KHAIRI  
Contact No.: 65476390

Authentication Stamp  
NP168

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by SingPass. No signature is  
required.

Date/Time:  
29/11/2018 11:38

Classification Of Case:

# INSURANCE CERT



MX1  
21300123  
Cov. Type: CO

## 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 No.** M0012138

1. Index Mark and Registration Number of Vehicle SKX785L

2. Name of Policyholder Lee Siew Fun

3. Effective Date of Commencement of Insurance for the purposes of the Act 25/11/2018  
Excess: Named Drivers S\$800  
Excess: Unnamed Drivers S\$1,300

4. Date of Expiry of Insurance 24/11/2019

5. Persons or Classes of Persons entitled to drive

(A) THE POLICYHOLDER.  
THE POLICYHOLDER MAY ALSO DRIVE A MOTOR CAR NOT BELONGING TO HIM OR HIRED (UNDER A HIRE PURCHASE AGREEMENT OR OTHERWISE) TO HIM OR HIS EMPLOYER OR HIS PARTNER.  
(B) ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HIS PERMISSION.

Lee Siew Fun

Ho Eng Soon

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 permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle.

6. Limitations as to Use

USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS OR PROFESSION.  
THE POLICY DOES NOT COVER:  
( i ) USE FOR HIRE OR REWARD.  
( ii ) USE FOR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING.  
( iii ) USE FOR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS.  
( iv ) USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

\* Limitations rendered Inoperative by Section 8 of the Motor Vehicles (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 bindings.

### Policy Owner's Protection Scheme

This policy is protected under the Policy Owner's Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact your insurer or visit the GIA / LIA or SDIC websites ([www.gia.org.sg](http://www.gia.org.sg) or [www.lia.org.sg](http://www.lia.org.sg) or [www.sdic.org.sg](http://www.sdic.org.sg)).

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).

For and on behalf of Etiqa Insurance Pte. Ltd.

Approved Insurer

Authorised Signature

GOPCJER 21/11/2018 16:12:43





# INTERVIEW FORM



## INTERVIEW FORM

Name (Driver) : Lee Siew Fun (Li Xiufang)  
Policy No : M0612138  
Vehicle No : SKX 785L  
Place of Accident : Alexandra Road

Insured Driver's relationship with Insured : Owner

Drink Driving of Insured and/or Insured Driver : -

No of passenger(s) in Insured vehicle : Driver only

Injury to Insured and/or Insured driver, please indicate which hospital:

-

Third Party Vehicle No (if any) : SL6 92464

No of passenger(s) in Third Party Vehicle : 2pax

Injury to Third Party driver and/or passenger(s), please indicate which hospital:

-

Type of collision and the extensiveness of the damages to all vehicles/Third Party property involved:

Chain Collision

Any witness to the accident (if yes, please indicate Name, Contact No and a copy of the statement):

-

Traffic Police report (enclosed) : ☒ Yes / No

Please obtain a copy of the driving licence of Insured driver and/or work permit (where foreign worker is involved)

[Signature]

Driver (Name & Signature) / Date  
I, affirmed the above information is given to  
my best knowledge

Attended by (Name & Signature) / Date

Workshop Name: \_\_\_\_\_

eTiQa Insurance Pte Ltd  
One Raffles Quay  
#22-01 North Tower  
Singapore 048583

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F +65 63392109

www.etiqa.com.sg  
Company Reg. No. 20131921K

A Member of Maybank Group



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo

