

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	10/12/2018 15:40
Date Of Accident	10/12/2018 12:50
Exact Location Of Accident	ALONG CAVENAGH ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLD1431U
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Insured/Policyholder

Name Of Registered Owner	HITACHI CAPITAL ASIA PACIFIC PTE LTD
Co Reg No	-
Email Address	JANEYGER@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92978770
Alternative Phone No	OFFICE-92978770

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL
Exact Purpose for which vehicle was being used at time of accident	ON THE WAY HOME
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	G 300037966 MCY
Cover Note Number	

Driver

Name of Driver	LI SHUJUAN
NRIC No	S8331385D
Date Of Birth	29/09/1983
Occupation	INDOOR
Date Of Driving Pass	16/02/2009
Driving Experience	9 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-92978770
Fax Number	
Contact Number	OTHERS-92978770
EMail Address	JANEYGER@GMAIL.COM

Address	BLK 897C WOODLANDS DRIVE 50 #08-196
Postcode	732897
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	FRIEND
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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)	1

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?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLN6098M
Vehicle Make/Model/Colour	MAZDA 3
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHNG ENG CHIA, ZHUANG YONG JIA
NRIC/Passport Number	S8607988G
Contact Number	93694995
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

SKETCH PLAN

IMPORTANT NOTICE

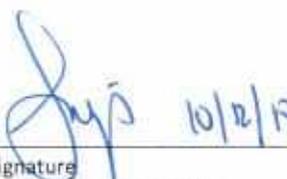
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8. Consent under the Personal Data Protection Act (PDPA)

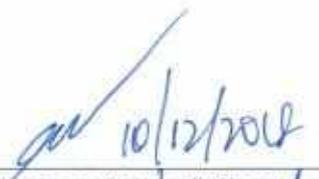
I understand, acknowledge, agree and consent that:

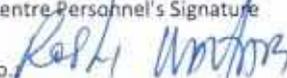
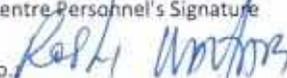
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "**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:



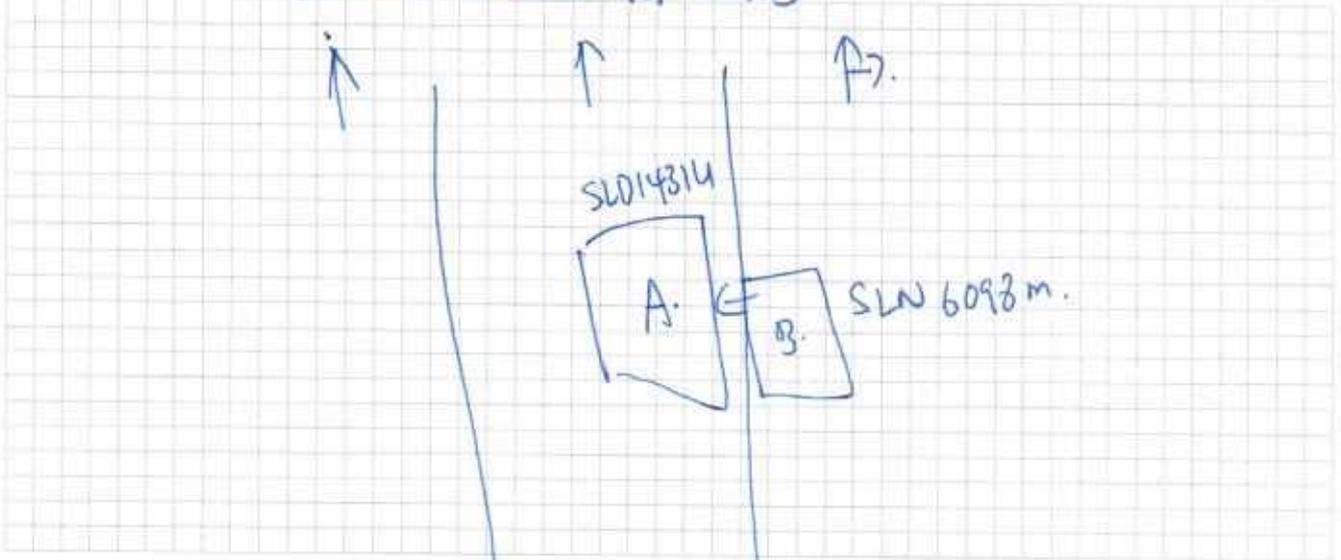
Driver's Signature
(If driver is not the policyholder)
Date & Time: 10/12/19



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

SKETCH PLAN

Along CAVENAGH ROAD



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Going straight and car B suddenly came out from my right & hit my vehicle.

DECLARATION

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

Policyholder's Signature
Date & Time:

10/12/19 *[Signature]*
Driver's Signature
(If driver is not the policyholder)
Date & Time:

10/12/2018 *[Signature]*
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

10th December 2018

To: Whom-It-May-Concern

Dear Sir/Madam,

Vehicle No. SLD1431U

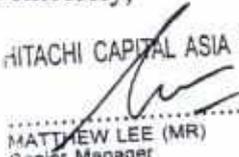
Hitachi Capital Asia Pacific Pte. Ltd., is the Registered Owner of the above mentioned vehicle. The vehicle is currently leased to Mr Edwin Yeo (Yao Ying), NRIC: S8318817J from 02nd June 2016.

Please do not hesitate to contact our Relationship Manager, Mr Daniel Lim at +65 6833 6271 should you need any further assistance.

Thank you.

Yours sincerely,

HITACHI CAPITAL ASIA PACIFIC PTE. LTD.


.....
MATTHEW LEE (MR)
Senior Manager
Vehicle Solutions
Total Vehicle Solutions Department

Total Vehicle Solutions
Hitachi Capital Asia Pacific Pte Ltd

ACCIDENT STATEMENT

ACCIDENT DATE: (10 / 12 / 2013) (DD/MM/YYYY). TIME: (12 : 50) (HH:MM)

LOCATION: Cavengh Rd.

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLD 1431 U
b) INSURANCE COMPANY: MSIA
c) POLICY NUMBER: G1300037966 MCV
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: Honda Vezel
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: On e way home.
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) (NO)
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: Hitachi Capital Asia Pacific Pte. Ltd. (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: LI SHUJIAN (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S2331385 D CONTACT: 92978770
c) ADDRESS: 297C WOODLANDS DR 50 #02-196 (C) 732897

*d) DATE OF BIRTH: (29 / 09 / 1983) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 16/2/2007

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Friend

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: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SLN 6098 M MODEL: mazda 3
b) DRIVER'S NAME: Chng Eng Chia, Zhuang Yong Jia
c) NRIC/FIN/PASSPORT: S2607988 G CONTACT: 93694995

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
e) DRIVER'S NAME: _____
f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

*No of passengers
(Including driver)
(1)

*No of passenger
(Including driver)
(1)

*No of passenger
(Including driver)
()

email = janejger@gmail.com

VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8331385D



Name
LI SHUJUAN

李淑娟

Race
CHINESE

Date of birth
29-09-1983

Sex
F

Country/Place of birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S8331385D

Name

LI SHUJUAN

Birth Date 29 Sep 1983

Issue Date 16 Feb 2009



001710299H

5254350



NRIC No. S8331385D



Date of issue

08-01-2014

Address

APT BLK 897C WOODLANDS DRIVE 50
#08-196
SINGAPORE 732897

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

CLASS DATE

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2000kg 16 Feb 2009

NP 428A



Licence No: S8331385D



MSIG

MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way, #21-01, SGX Centre 2, Singapore 068807
Tel +65 6827 7888, Fax +65 6827 7800
Co.Reg No. 200412212G - GST Reg. No. 20-0412212G
A Member of **MS&AD** INSURANCE GROUP

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

**MOTORMAX PLUS
Comprehensive**

Certificate No. G 300037966 MCY

Excess : SGD1,500

Windscreen Excess : SGD100

1. **Index Mark and Registration Number of Vehicle**
SLD1431U

2. **Name of Policyholder**
Hitachi Capital Asia Pacific Pte. Ltd.

3. **Effective Date of the Commencement of Insurance for the purposes of the Act**
02/06/2018

4. **Date of Expiry of Insurance**
01/06/2019

5. **Persons or Classes of Persons entitled to drive***
Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

*Provided that the person driving is permitted in accordance with the licensing or other laws or 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 ***
Use for the carriage of passengers or goods in connection with the Policyholder's business. Use for social domestic and pleasure purposes and business purposes of any person to whom the vehicle is hired.
The Policy does not cover
(1) Use for racing pace-making reliability trial or speed-testing.
(2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.
(3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risk and Compensation) Act (Chapter 189) and Chapter 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

PLEASE NOTE ALL CLAIMS RELATED REPAIR MUST BE CARRIED OUT AT ANY MSIG AUTHORISED WORKSHOP LISTED IN THE ATTACHED.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offense under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189).

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) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurers

Michael W Gourlay
Chief Executive Officer