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TP Particulars: Veh No:	P6414	. INC(	.)/Non-INC	( ).		
Owner / Driver: (			Tel:		)	
Policy No: ( ) Per	iod: (	)	Cover Type:			
Confirmed by : (	,	Dater.	Tim		)	
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#### 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 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.
- 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

ACCIDENT STA	TEMENT
04/01/2019 10:3	20

Date Of Report

Date Of Accident

03/01/2019 18:45

Exact Location Of Accident

CARPARK BESIDE BLK 3 JALAN BUKIT MERAH

Country/State of Loss SINGAPORE

# DETAILS OF OWN VEHICLE

Vehicle Registration Number

SGN2599U

## Insured/Policyholder

Name Of Registered Owner

NG AIK BENG (HUANG YIMING)

NRIC No S7415918D

Email Address

RON.NG@LIVE.COM

OTHERS-84444181

Mobile Phone No (LOCAL) +65-84444181

Alternative Phone No

Vehicle Particulars

TOYOTA

Manufacturer Model

VIOS-1.5 E (A)

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?

NO

If No. Please state action to be taken

THIRD PARTY

Vehicle Category

PRIVATE CAR

### Insurance Company

Name of Insurance Company

TOKIO MARINE INSURANCE SINGAPORE LTD

Type Of Coverage

THIRD PARTY FIRE AND/OR THEFT

Fleet Policy

NO

Policy Number

18-MU011908-R01

Cover Note Number

#### Driver

Name of Driver

NG AIK BENG (HUANG YIMING)

NRIC No S7415918D Date Of Birth 26/05/1974 Occupation INDOOR Date Of Driving Pass 31/05/1993

**Driving Experience** 25 YEARS AND 7 MONTHS

Gender

MALE

Mobile Number

(LOCAL) +65-84444181

Fax Number

Contact Number EMail Address

OTHERS-84444181

RON,NG@LIVE.COM

Address

BLK 34 TANGLIN HALT ROAD

#05-27

Postcode

142034

OWNER

Was driver an employee of the Insured's Company

If No, Relationship of the Driver with the Insured

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 (including own vehicle) involved in the accident

2

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO

ambulance?

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)

3

Passenger 1

NAME:

: WIFE

GENDER:

: FEMALE

Passenger 2

NAME:

: SON

GENDER:

: MALE

**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

SJP641Y

Vehicle Make/Model/Colour

HYUNDAI ACCENT

**Details Of Properties** 

Vehicle Category

PRIVATE HIRE

Name of Driver

MUHAMMAD FAREEZ BIN IDRIS

NRIC/Passport Number

S8919564J

Contact Number

87493662

Address

Postcode

Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

#### SKETCH PLAN

#### 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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: 4/1/9

1020 am

Driver's Signature

(If driver is not the policyholder)

Date & Time: 411/19 1020000

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

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# ACCIDENT STATEMENT

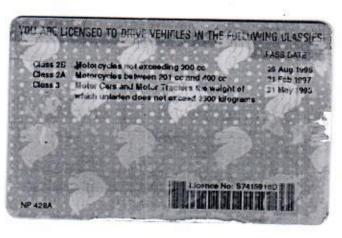
83	ÁCC	IDENT DATE:	03,01,0	WINDON (DD/MM/Y	YYY), TIME:( 18.	: 45)(HH:MM)
	LOC	ATION:	Carpate 1	sure le 3	Tolan Butert	Neals.
99		DETAILS -		100	, ,	
	1	. DETAILS OF		SGN 2589U		
			NUMBER:			
			ICE COMPAN'			
		CIPOLICY	NUMBER: 18	- MUD11908 -	Ral	
		a)POLICY I	YPE: (COMPR	HENSIVE / THIRD	PARD / THIRD PA	RTY FIRE &THEFT)
		DIMAKE &	MODEL:	CCIV ALOPO	1.56 A	
		T)TYPE: (SAL	OON / COUPE	/MPV/VAN/LO	RRY / MOTORCY	CLE / OTHERS)
		.9/ VEHICLE	CATEGORY:	RIVATE / COMME	RCIAL / MOTORC	YCLE) .
		ULANGOSE	OF USING AT	ACCIDENT TIME:	TANOHOLT	
		I) ARE YOU	CLAIMING UNI	DER YOUR OWN IN	ISURANCE (YES/N	10)
A WI	00	IF NO, FLE	ASE STATE (THI	RD PARTY CLAIM	REPORTING ON	Y) .
0 41	2.		OLICY HOLDE	AIR BENG	2.00	
BAR	BY BOV	A)NAME:		4	MA.	LE / FEMALE
		b) NRIC/FIN/		574159120	CONTACT:	
	As an an	c) ADDRESS:	BUL	34 TANGLIN	HAUT RUMP	#05-27
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	in the passanger		13	S A 200.		
	(Including driver)	b) NRIC/FIN/		1) 300.		LE / FEMALE)
	(3)	C)ADDRESS:			CONTACT:	
£8		CINDDRESS:				
80		"d)DATE OF	RIPTH: / DL /	05/ 1974100		
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		IF NO, RELA	TIONSHIP OF	THE DRIVER W	THE INCLUDED	AS (AER NO)
	5.	CIMEATHER (	CONDITION: 18	CLEAR / RAINING	OTHERS	
. A		b)ROAD SUR	FACE: (DRY )	VET / OTHERS	· · ·	
	6.	WAS ANYBOD	DY INJURED IY	ES / NO)		
	7.	a)REPORTED	TO POLICE (YE	SUNDI		63 78
		IF YES, PLEA	SE STATE WHIC	H POLICE STATIO	N.	
62	8,	TILIDE BARNER	VEHICLE	ATT OLIOL STATIO		<del></del>
-	4 No of passenger	a) VEHICLE	NUMBER:	STP6+14	MODEL:H	YUNDAH ACOON
	(Including driver)	b) DRIVER'S	NAME: Mu	hommod Forees	Bin Idea's	
	( )	C) NRIC/FIN	/PASSPORT:	287195647	CONTACT:_	87493662
11.	9.	THIRD PARTY			100	Paralle Alexander
2	No of passenger				MODEL:	
1	(Including driver)	e) DRIVER'S	NAME:		CHI - DE COMBINION NO - H - L - D	
	( Contract)	f) NRIC/FIN,	/PASSPORT:		CONTACT	
	()		28			
			38		-	

email = roning @live.com









## Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No.: M2-0000023-4) 20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com

A member of the Tokio Marine Group



#### 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)

Policy No.: 18-MU011908-R01 (Private Motor Car)

1. Index Mark and Registration Number of Vehicle

SGN2599U

Chassis No.: MR053HY4204209908

2. Name of Policyholder

MR NG AIK BENG

3. Effective date of the Commencement of Insurance for the purposes of the Act

01/12/2018

4. Date of Expiry of Insurance

30/11/2019

- 5. Persons or Class of Persons entitled to drive\*
  - (a) The Policyholder.
  - (b) Any other person who is driving on the Policyholder's order or with his 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.
- 6. Limitations as to use\*

Use only for social domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or reward, racing, pace- making, reliability trial, speed-testing or the carriage of goods (other than samples) in connection with any trade or business or 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 headings.

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

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

#### IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Account: 2518DDA

Insurance Plan:

Third Party, Fire & Theft Limit for total loss or theft: Prevailing Market Value

Tokio Marine Insurance Singapore Ltd.

Authorised Signature

User Name: Intermediaries from TM O

Printed 12/11/2018