## 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 <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	04/01/2019 17:32
Date Of Accident	03/01/2019 18:55
Exact Location Of Accident	SLIP ROAD OF UPPER BUKIT TIMAH ROAD
Country/State of Loss	SINGAPORE
[	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJY2190X
Insured/Policyholder	
Name Of Registered Owner	TENG LI YING
NRIC No	S7927155A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90667155
Alternative Phone No	OFFICE-90667155
Vehicle Particulars	
Manufacturer	VOLKSWAGEN
Model	TOURAN-1.4 TSI (A)
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	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D18MTPV01003281
Cover Note Number	

## Driver

Name of Driver JASON TAN KOK WHEE

NRIC No S2192206D

Date Of Birth 21/08/1966

Occupation OUTDOOR

Date Of Driving Pass 24/07/1987

Driving Experience 31 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91019969

Fax Number
Contact Number

EMail Address JASON.TAN.KW@GMAIL.COM

2E HONG SAN WALK Address

#11-02 PALM GARDENS

Postcode 689051 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

Insurance Company of Driver's Own Vehicle

**General Information of the Accident** 

**COLLISION - HEAD TO REAR** Type Of Accident

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

YES 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:

2

NO

NO

2

NO

NO

: TENG YI LING

**GENDER:** : FEMALE

**Details of Police Action** 

Was the accident reported to the police?

If Yes.Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

**Circumstances of Accident** 

ON 03/01/2019 AROUND 6.55PM, I WAS STATIONARY AT SLIP ROAD OF UPPER BUKIT TIMAH ROAD TO LET PASSENGERS PASS ZEBRA CROSSING. SUDDENLY I FELT AN IMPACT FROM REAR PORTION, VEHICLE B (SKJ2142C) HIT ONTO REAR PORTION OF MY VEHICLE (SJY2190X).

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? NO Was there any audio recorded?

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number SKJ2142C

Vehicle Make/Model/Colour **VOLKSWAGEN TIGUAN** 

**Details Of Properties** 

Vehicle Category PRIVATE CAR NG WEI PENG Name of Driver NRIC/Passport Number S6935891H

**Contact Number** 

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Accident Sketch Plan

## SKETCH PLAN

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- 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:
  - 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: 04 01 | 2019

5:35 pm

Reporting Centre Personnel's Signature

Name: Jessy Soe

NRIC/FIN No.: G2031072W

# **Accident Sketch Plan**

KETCH PLAN	Vehicle A; 3	77 2190X	Vehicle B:	SKJ 2149 (		
c b	sa Chu hang R		1 /	J. Upp BK+Tmah Rd		
ESCRIBE CIRCUI	MSTANCES OF T	HE ACCIDENT				
Date of Accid	dent: 03 01	PIOE	Time o	f Accident:	6:55pm	
Timah Racimpact fr	ad to let	passenger tion, vehi	pars zebra	crossing to and a	Suddely I' fett ear portion of my vehi	an cle.
DECLARATION /We declare the form	oregoing particular	s are true in every	(A)		Reporting Centre Personnel's Sign	

Date & Time: 04 01 | 3019 5:359m



### Sompo Insurance Singapore Pte. Ltd.

50 Raffies Place, #05-01/06 Singapore Land Tower, Singapore 0-0623 Ter 6461 6555 I. Faix 6221 3302 I. Wabete: www.somps.com.ag Co. Reg. No.: 198005430E I. QST Pieg. No.: M000003166

#### 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)

Cert No./Policy No.

: D18MTPV01003281

Insured

: TENG YILING

Motor Car (Registration No.) : SJY2190X

: Comprehensive - ExcelDrive GOLD

Policy Commencement Date : 17 MARCH 2018 00:00

: 16 MARCH 2019 23:59

Policy Expiry Date

Maximum Liability (Section I) : Market value at time of loss

Excess\*

: \$300 - Section I

(Walved up to S\$1,000 if accident repair is done at ExcelDrive Workshops for the first claim

Voluntary Excess\*

per policy year) - NA

Windscreen Excess\*

: S\$100.00 - Waived if Repair at ExcelDrive Workshop

Loss of Use

: Per Policy Schedule

Persons or Classes of Persons entitled to drive\*

- The Insured.
- 2. Any other person who is driving on the Insured's order or with his permission.
- 3. In the event of the death of the insured.
  - a. any member of the insured's family, or a paid driver who has been driving the Motor Car during the life of the insured and permission to drive had not been withdrawn prior to the death of the insured; and
  - b. any other person who has been given permission to drive the Motor Car prior to the death and such permission had not been withdrawn by the Insured.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Car 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 Car. And provided further that the Motor Car is registered under the Road Traffic Act (Chapter 276) and its registration under the Road Traffic Act (Chapter 276) has not been cancelled at the time of the accident, loss or damage.

### Limitations As To Use

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

## ExcelDrive Workshops and Accident Reporting

It is a condition precedent to flability that the Insured shall call at the Company's Accident Reporting Center with the Motor Car within 24 hours of the accident or by the next working day thereof.

All accident repairs to the Motor Car must be carried out at ExcelDrive Workshops, otherwise the claim is not payable under the Policy. For ExcelDrive Prestige Plan, accident repairs to the Motor Car can be carried out at any workshop other than ExcelDrive Workshops.

For the list of Accident Reporting Centres and ExcelDrive Workshops, please visit our website at www.sompo.com.sg or call our Emergency Hotline: (65) 6226 3323.

IWe HEREBY CERTIFY that the policy to which this Certificate relates is issued in accordance with (1) the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia); and (2) the Policy terms, conditions and exceptions of the Private Cert Policy ref MTP-27

Sompo Insurance Singapore Pte. Ltd.

## **Authorised Signatory**

Date/Time of Issue: 06 FEBRUARY 2018 16:28

## IMPORTANT NOTICE

Keep the Certificate in your Motor Car;
Under the Motor Vehicles (Third-Party Risks and Congensation) Act (Chapter 189), it shall be unlawful for any person to use or cause to permit any other person to use a motor vehicle without a valid policy of insurance under the Act;
On the sale of the Motor Car or if for any reason the insurance is terminated during its currently. The insured must sumender the Certificate of featurence and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a statutory declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189);
This Policy will cease to be valid once the Motor Car has been sold to another person. The Policy is not transferable to the new owner of the Motor Car.

Intermediary Code & Name: 11A14006 & ACCORD INSURANCE AGENCY CI Code: 22A DQDPHB4K4RBDMSAJ

<sup>\*</sup> Subject to GST wherever applicable

## NRIC & DL





















