MPA219013367 / Progressive Car Care Pte Ltd - HQ ENTRY DATE & TIME: 28/01/2019 17:20 SUBMITTED BY: Ng Pei Wen

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 28/01/2019 17:29

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.
- 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 28/01/2019 17:20 Date Of Accident 02/01/2019 21:00

Exact Location Of Accident JUNCTION OF ELITE PARK AVENUE & SIGLAP ROAD

SINGAPORE Country/State of Loss

DETAILS OF OWN VEHICLE

SGY3268K Vehicle Registration Number

Insured/Policyholder

Name Of Registered Owner TAN TECK BOON

NRIC No S1749813D

Email Address FREDERICKTANTB@YAHOO.COM

Mobile Phone No (LOCAL) +65-82826603

Alternative Phone No. Others-82826603

Vehicle Particulars

LEXUS Manufacturer

Model ES250-2.5 (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 REPORTING ONLY Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company FWD SINGAPORE PTE. LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

PNPV2018-00010341 Policy Number

Cover Note Number

Driver

Name of Driver TAN TECK BOON

NRIC No S1749813D Date Of Birth 19/10/1966 **INDOOR** Occupation Date Of Driving Pass 24/01/1985

Driving Experience 33 YEARS AND 11 MONTHS

Gender **MALE**

Mobile Number (LOCAL) +65-82826603

Fax Number

Contact Number OTHERS-82826603

EMail Address FREDERICKTANTB@YAHOO.COM

543 EAST COAST ROAD #05-10 Address

SINGAPORE

Postcode 429071

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 NO COLLISION

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

NO Was any body injured in the Accident?

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) 2

Passenger 1 : WIFE Name:

> Gender: : Female

Details of Police Action

Was the accident reported to the police?

YES

If Yes. Please state which Police Station

Police Station Name MARINE PARADE NEIGHBOURHOOD POLICE CENTRE

ROAD: 300 MARINE PARADE ROAD, POSTCODE: 449296, COUNTRY: Police Station Address

SINGAPORE

Police Station Contact TEL NO: 1800-4428999 - FAX NO: 62447678

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO THE ATTACH STATEMENT RECORDED BY PEI WEN - PROGRESSIVE CAR CARE PTE LTD TEL 6741 5336

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

SLZ3665H Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category

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

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- 4. The issue and acceptance of this Form by Insurance companies is not an admission of policy liability on the part of the insurance
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- 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
- 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:

- 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/lew 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 distingure 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
- 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/haw 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 daims.
- the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in avaluating, investigating, controlling or managing frauci. 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 & Times

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Perso Name:

NRIC/FIN No.:

		Vehicle
		A -
		B -
		Legend
		A
		Vehicle Motorcycle
SCRIBE CIRCUMSTANCES OF	THE ACCIDENT	
refer	to police report.	
1446	to pointe report.	
		10.00
10.0		
ECLARATION		
We declare the foregoing partic	ulars are true in every respect. have a fourteen (14) days clause whereby the claim again:	est own policy must be made within the stipulated timefra
om the day of occurrence. Kindly chec	your paicy for more desains	XNIM.
(N/ freder		Reporting Centre Versonnel's Signature
ollcyholder's Signature	Oriver's Signature (If driver is not the policyholder)	Name:
28/11/9	Date & Time:	NRIC/FIN No.: DUSTWOOD

POLICE REPORT PAGE 1





Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296

Tel No: 1800-4428999

28/01/2019 11:04

REPORT OF A TRAFFIC ACCIDENT Date/Time Report Made:

1 of 3

Report No. T/20190128/2018

Vide Report No.: Station Diary No.: Address:

Informant's Particulars Name of Informant: TAN TECK BOON 543 EAST COAST ROAD #05-10 SINGAPORE 429071 ID Type / ID No.: Contact No.: NRIC NO / S1749813D Home/Office: Mobile: 82826603 Nationality: Email: SINGAPORE CITIZEN Sex: Age: Type of Informant: Date of Birth: Male 52 19/10/1966 Driver Race: Language: Institution / School Name: Chinese English Occupation: Driving Licence Information: MANAGING DIRECTOR Class: 2B,3 Date of Expiry:

General Infor	mation of the Accide	ent	76.0		
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 02/01/2019 21:0	Type of Location: T-Junction	
Location: Junction of Re ELITE PARK SIGLAP ROA					
Weather: Clear		Road Surface: Dry			
Traffic Flow: One Way		Traffic Control: Pedestrian Cross	ing	Traffic Volume: Light	
Type of Collis NO CONTAC	ion: T BETWEEN VEHICL	E		Anyone conveyed by ambulance: No	

Details of V	ehicle Invo	lved				Year of the second
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SGY3268K	Car	TOYOTA	LEXUS ES250 AUTO	White	No Damage	1
SLZ3665H	Car	HONDA			Slightly Damaged	3

Details of V	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGY3268K	FWD Singapore Pte. Ltd	PNPV2018- 00010341	10/09/2018	09/09/2019

POLICE REPORT PAGE 2





Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296

2 of 3 Report No. T/20190128/2018

Tel No: 1800-4428999

CONTINUATION OF REPORT

E-FILE

Any Pedestrian I	nvolved: No					
No. of Pedestria			Use of Pe	dectria	Croce	ing: MA
Driver			030 011 0	uestria	Closs	sing. NA
Name	TAN TECK BOON		ID No),	S1749813D	
Related Vehicle	SGY3268K (Car)			Contact No.		82826603
Hospital/Clinic	NIL			Class Drivin Licend	g	Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc		NIL	
		NIL	Degree of		NIL	

Brief Details.

On 02/01/2019, at around 1945hrs, I was driving along Elite Park Avenue when I came to a stop behind a Silver Honda vehicle (SLZ3665H) at the junction of Elite Park Avenue and Siglap Road. There is no traffic light at the junction, but there is a stop line at the junction. I would like to inform that the Silver Honda vehicle was seen to have stopped beyond the stop line, and then reversing back. After reversing, the driver of SLZ3665H came out of his exit and claimed that my vehicle had hit him, even though he was the one reversing his vehicle, and there was no contact between the vehicles. However, he had claimed that an existing damage on the right rear side of his vehicle was caused by the collision, even the vehicles did not come into contact. I would like to inform that the driver of SLZ3665H had also hit the bonnet of my vehicle with his palm twice. The driver had also called for Police, but I told him that I am rushing off for a meeting, and told him to take down my license plate number. As I had observed that the driver had started to get aggressive, I reversed my vehicle all the way back to the end of Elite Park Avenue to exit as the driver was blocking our exit in front. I then drove my wife to Marine Parade NPC to lodge a Police report.

I would like to inform that I have in-car camera installed, and I am able to provide the footage if required.

I would like to inform that I am lodging this report as my insurance company requested for me to lodge a report under myself as the other party had lodged a claim against me regarding the incident.

POLICE REPORT PAGE 3





Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296

3 of 3 Report No. T/20190128/2018

Tel No: 1800-4428999

CONTINUATION OF REPORT

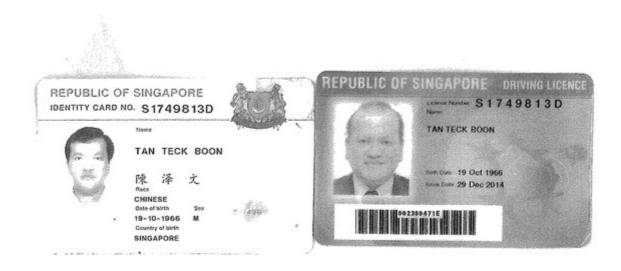
Sketch Plan

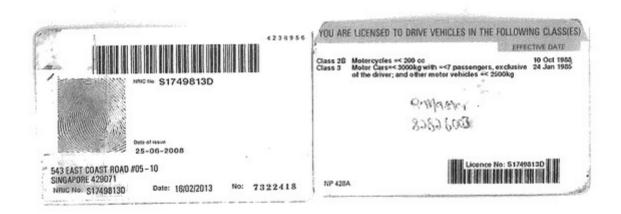
Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: G / Sgt 2 JEREMY GOH ZEN KIAT	Signature Of Informant: Fidery(
Signature Of Interpreter: Not applicable	Date/Time: 28/01/2019 11:04
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 654761 \$15INGAPORE POLICE FORCE	Classification Of Case:
Authentication Stamp NP168 SIGNATURE	

DRIVER NRIC & LICENSE







CERTIFICATE OF INSURANCE

Please call +65-6322-2072 for FWD Emergency Assistance if Your Car breaks down or is involved in an accident.

All accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

POLICY NUMBER: PNPV2018-00010341 (Comprehensive - Executive Plan)

Car plate number: SGY3268K

Your name (As the policyholder): Tan Teck Boon

Coverage start date: 10/09/2018 Coverage end date: 09/09/2019

Covered geographical area: Singapore, West Malaysia and Southern Thailand

Who is insured to drive:

(a) You; and

(b) Anyone with a valid driving license who You give permission to drive Your Car.

Important things to know:

Your Policy comprises this Certificate of Insurance, the Contract, the Car Insurance Summary and any Endorsements attached by Us. These documents should be read together as one. You must make sure that any person You give permission to drive Your Car understands Your duties under this Policy and complies with its conditions.

Your Policy is only valid if Your Car is being used for non-commercial activities in accordance with Your contract.

Finance company: UOB Limited

Election

We confirm that this Policy complies with the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189).

Issued on: 07/08/2018

Abhishek Bhatla

Chief Executive Officer

FWD Singapore Pte Ltd

Please immediately inform us at +65-6820-8888 or email us at contact.sg@fwd.com if any details in this Certificate of Insurance need to be changed.































E-FILE 2/21/2019

