

## 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	09/01/2019 09:56
Date Of Accident	08/01/2019 17:45
Exact Location Of Accident	SOUTH BUONA VISTA RD AFT SCIENCE PARK DRIVE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJX9682C
<b>Insured/Policyholder</b>	
Name Of Registered Owner	PETER CHEW YEOW KOON
NRIC No	S8016705I
Email Address	PETER.CHEW.YEOW.KOON@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96621636
Alternative Phone No	OFFICE-NOPHONE

### Vehicle Particulars

Manufacturer	NISSAN
Model	X-TRAIL-2.0 CVT (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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPPHQ18-003659
Cover Note Number	

### Driver

Name of Driver	PETER CHEW YEOW KOON
NRIC No	S8016705I
Date Of Birth	12/06/1980
Occupation	INDOOR
Date Of Driving Pass	25/06/1999
Driving Experience	19 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96621636
Fax Number	
Contact Number	OFFICE-NOPHONE
EEmail Address	PETER.CHEW.YEOW.KOON@GMAIL.COM

Address	30 SEGAR RD #17-08
Postcode	677721
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	WET

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	3
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

REFER TO SKETCH PLAN

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKK1591R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	STACY LEE
NRIC/Passport Number	
Contact Number	90075242
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	UNKNOWN
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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)

## Sketch Plan Pg. 1

### SKETCH PLAN

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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.

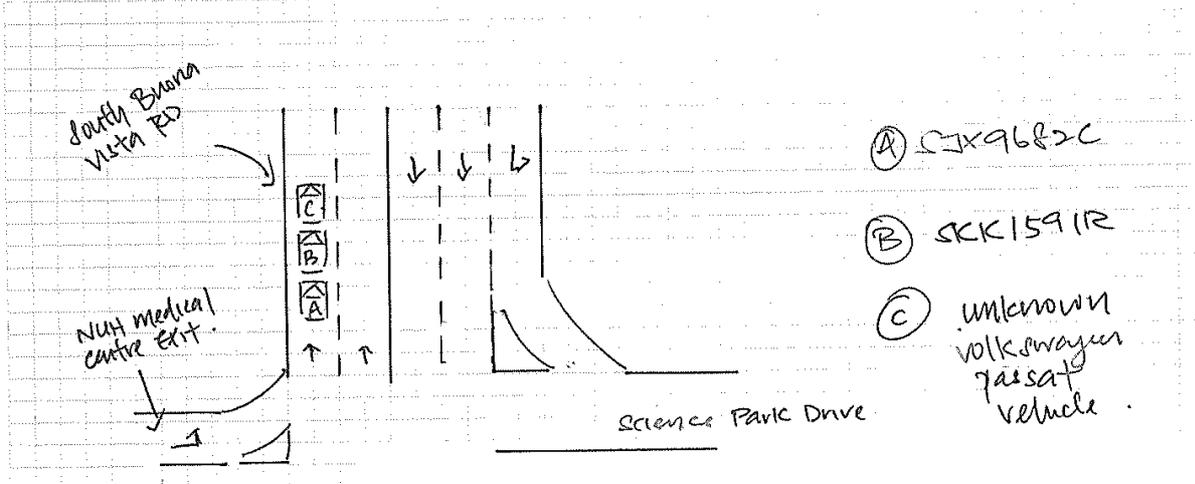
Policyholder's Signature  
Date & Time:

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

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

I AM AWARED THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 08/10/19 @ around 1745 hrs, I was travelling along Science Park Drive to South Buona Vista RD. On that time it after rain & the road surface is wet. While driving I did notices that vehicle 3 had stopped by his vehicle and the time I had noticed and applied my brake, it is already too late and caused my vehicle skid forwards & accidentally collided onto vehicle B rear portion. I went down to see & notices that this accident also involved with vehicle C & I did not take down the number plate only knew it was a Volkswagen Facsat model.

DECLARATION

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

Policyholder's Signature  
Date & Time:

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

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

Claim own policy  
 Claim third party  
 Claim OD / TP at other works hop  
 For record purpose  
 Policy No. PMPFATQ18-003659  
 Insurer EA Veh.No. SKX9682C

EQ Insurance Company Limited  
 5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110  
 tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg  
 reg no. 1978-00490-N



**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

**PRIVATE CAR  
 Comprehensive Premier**

**Certificate No. : DMPPHQ18-003659**

**1. Index Mark and Registration Number of Vehicles**

SJX9682C

**2. Name of Policyholder**

Peter Chew Yeow Koon

**3. Effective Date of the Commencement of Insurance for the purpose of the Act**

15/06/2018

**4. Date of Expiry of Insurance**

14/06/2019

**5. Person or Classes 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 regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of 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 has not been cancelled at the time of accident loss or damage.

**6. Limitation as to use\***

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover:

- (a) use for hire or reward
- (b) use for racing,pace-making, reliability trials or speed testing
- (c) use for the carriage of goods (other than samples) in connection with any trade or business
- (d) 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.

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 and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase : HL Bank

A000258/SGDrivers Pte Ltd  
 Date of Issue : 01/06/2018 17:55

\_\_\_\_\_  
 Authorised Signatory  
 EQ Insurance Company Limited

**Note**

Young, Elderly &/or Inexperience Driver (YEIDR) refers to any person authorized to drive who is below 26 years old or above 70 years old and/or the holder of a qualified driving licence of less than 2 years duration.

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number **S80167051**  
Name  
**PETER CHEW YEOW KOON  
(PETER ZHOU YAOKUN)**

Birth Date **12 Jun 1980**  
Issue Date **09 May 2003**

000471098B



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. **S80167051**



Name  
**PETER CHEW YEOW KOON  
(PETER ZHOU YAOKUN)**  
**周耀坤**

Race  
**CHINESE**

Date of birth **12-06-1980** Sex **M**

Country of birth  
**SINGAPORE**

S80167051

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

	PASS DATE
Class 2B Motorcycles not exceeding 200 cc.	20 Feb 2002
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	25 Jun 1999

NP 428A

Licence No. **S80167051**



4732134



NRIC No. **S80167051**



Date of Issue  
**08-06-2011**

**30 SEGAR ROAD #17-08  
SINGAPORE 677721**

NRIC No: **S80167051** Date: **07/03/2015**

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

