

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	10/01/2019 17:10
Date Of Accident	10/01/2019 14:00
Exact Location Of Accident	84 SERANGOON GARDEN WAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFS8717S
Insured/Policyholder	
Name Of Registered Owner	CHHOI FEROZE ADI
NRIC No	S6863536E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97850609
Alternative Phone No	OFFICE-97850609

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	C180
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	13105180
Cover Note Number	

Driver

Name of Driver	CHHOI FEROZE ADI
NRIC No	S6863536E
Date Of Birth	09/11/1968
Occupation	INDOOR
Date Of Driving Pass	08/09/2004
Driving Experience	14 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97850609
Fax Number	
Contact Number	OFFICE-97850609
EEmail Address	NOEMAIL

Address	80 BAYSHORE RD #17-27
Postcode	
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	COLLISION - HEAD TO REAR
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 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)	0

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

CAR WAS PARKED AT 84 SERANGOON GARDEN WAY. UPON RETURN TO CAR, FOUND A NOTE TO SAY THAT THE CAR WAS HIT AND THE PERSON LEFT HIS NAME AND NUMBER. UPON INSPECTION FOUND DAMAGED (SCRATCHED) ON THE FRONT RIGHT SIDE.

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	SFY829Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	PAN ZHANKUN
NRIC/Passport Number	S8409578H
Contact Number	96614190
Address	
Postcode	
Insurance Company Name	AXA INSURANCE PTE LTD
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

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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 10/01/19

Driver's Signature

(If driver is not the policyholder)

Date & Time 16:20 PM

Reporting Centre

Name:

NRIC/FIN No.:

Vincent Seah
Cycle & Carriage Insurance Centre
Body Care & Repair Centre
DID: 6771 4401
Email: vincent.seah@cyclecarriage.com.sg
Fax: 6872 1272

Sketch Plan #2

SKETCH PLAN

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

CAR WAS PARKED AT 84 SERAGORN GARDEN WAY. UPON RETURN TO CAR, FOUND A NOTE TO SAY THAT ~~THE~~ THE CAR WAS HIT AND THE PERSON LEFT HIS NAME AND NUMBER. UPON INSPECTION FOUND DAMAGE (SCRATCH) ON THE FRONT RIGHT SIDE.

DECLARATION

We declare the foregoing particulars are true in every respect.

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)

Policyholder's Signature

Date & Time

10/2/19

16:20 PM

Driver's Signature

(If driver is not the policyholder)

Date & Time

Reporting Centre Person's

Name:

NRIC/FIN No.:

Vincent Seah
Cycle & Carriage Industries Pte Ltd
Body Care & Repair Center
Tel: 6771 4401, 11P: 5332 0062, Fax: 6772 1272
Email: vincent.seah@cyclecarriage.com.sg

Sketch Plan #3

MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way #21-01 SGX Centre 2 Singapore 068807
Tel: (65) 6827 7855 Fax: (65) 6827 7800
Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

MOTOR INSURANCE COVER NOTE

Cover Note No. 13105180

The Insured named in the Schedule below having proposed for insurance in respect of the Motor Vehicle described in the Schedule below the risk is hereby HELD COVERED in the terms of the Company's usual form of Policy applicable thereto for the period as stated below unless the cover be terminated by the Company by notice in writing in which case the insurance will thereupon cease and a proportionate part of the annual premium otherwise payable for such insurance will be charged for the time the Company has been on risk.

SCHEDULE

Agent No. : 211903
Name of Insured : CHHOI FEROZE ADI
Make and Description of Vehicle : MERCEDES BENZ C180 AVANTGARDE
Vehicle Registration No. : SFS8717S
Year of Manufacture : 2014
Engine No. : 27491030295067
Chassis No. : WDD2050402R032010
Capacity : 1,595 Cubic Capacity
Cover Type : Comprehensive
Sum Insured (SGD) : Market Value
Period of Insurance : 19/01/2019 to 18/01/2020
Excess (SGD) : 500

I/We hereby certify that this Cover Note is issued in accordance with the Provisions of the Motor Vehicles (Third Party Risks & Compensation) Act (Cap. 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.

Not valid unless countersigned by the
Company's Authorised Representative



Sime Darby Insurance Brokers (Singapore) Pte. Ltd.

Date of Issue : 19/12/2018

MSIG Insurance (Singapore) Pte. Ltd.
Authorised Insurers

Katherine Yeo
Senior Vice President, Brokers

This Cover Note is valid for 30 days from the date of issue.

XSIBWTT2018121917211503

Sketch Plan #4

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

	EFFECTIVE DATE
Class 2B Motorcycles <= 200 cc	08 Sep 2004
Class 3 Motor cars with unladen weight <= 3000kg with <= 7 passengers, exclusive of driver; and other motor vehicles with unladen weight <= 2500kg	08 Sep 2004

FOR C&C USE ONLY



Licence No. S6863536E

NP 428A

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S 6 8 6 3 5 3 6 E
Name:

CHHOI FEROZE ADI

Birth Date: 09 Nov 1968
Issue Date: 20 Aug 2018

FOR C&C USE ONLY



002836759B

Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo

