



### 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	11/01/2019 15:42
Date Of Accident	09/01/2019 23:00
Exact Location Of Accident	BUKIT PANJANG
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKW832P
Insured/Policyholder	
Name Of Registered Owner	NG YAN YEE ROSALIND
NRIC No	S7902293D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98778780
Alternative Phone No	OTHERS-98778780
Vehicle Particulars	
Manufacturer	TOYOTA
Model	COROLLA
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3031001801
Cover Note Number	
Driver	
Name of Driver	NG YAN YEE ROSALIND
NRIC No	S7902293D
Date Of Birth	21/01/1979
Occupation	INDOOR
Date Of Driving Pass	28/03/2006
Driving Experience	12 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98778780
Fax Number	
Contact Number	OTHERS-98778780
Email Address	NOEMAIL

Address	BLK 30 GHIM MOH LINK #09-332
Postcode	272030
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	COLLIDED INTO PEDESTRIAN
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	1
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)	2
Passenger 1	NAME: : TYSON AW YONG GENDER: : MALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CLEMENTI POLICE DIVISIONAL HQ (D DIVISION )
Police Station Address	<b>ROAD:</b> 20 CLEMENTI AVENUE 5 , <b>POSTCODE:</b> 129858 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-7740000 - <b>FAX NO:</b> 67741705
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLS REFER TO THE POLICE REPORT:D/20190111/7008

#### 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	
Vehicle Make/Model/Colour	
Details Of Properties	PEDESTRIAN
Vehicle Category	NA/UNKNOWN
Name of Driver	
NRIC/Passport Number	
Contact Number	

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## 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)**

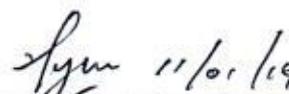
I understand, acknowledge, agree and consent that:

- (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.



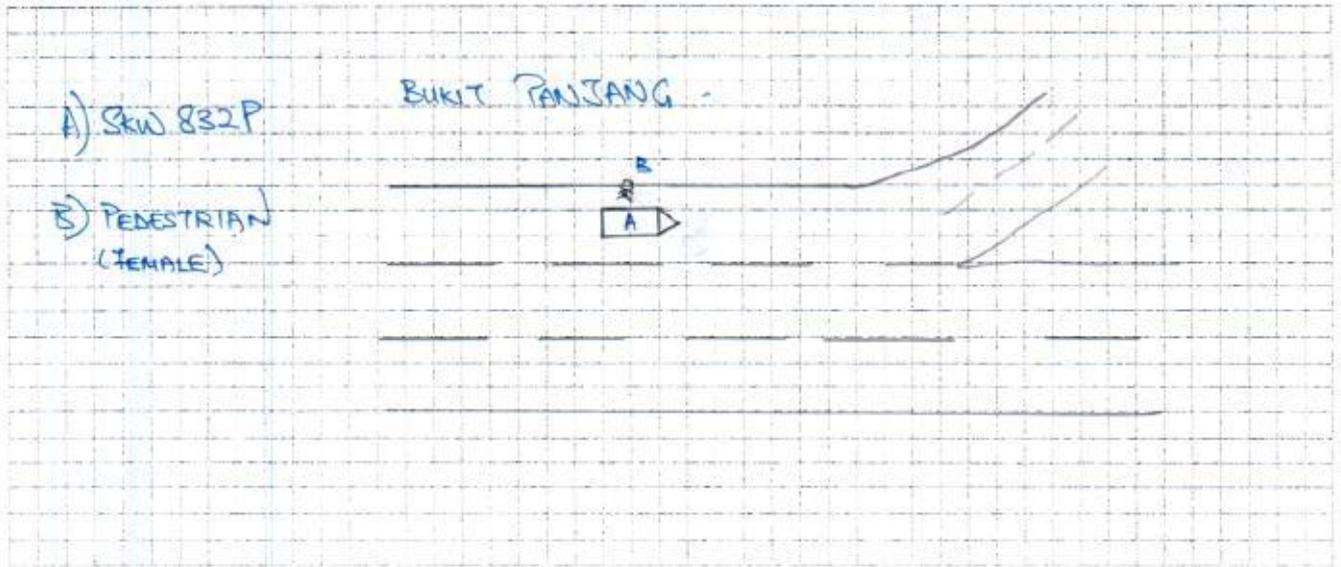
Policyholder's Signature  
Date & Time:

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



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

**SKETCH PLAN**



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

As per Police Report No : D/20190111 / 7008 .

**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.:





**POLICE REPORT (NP299)**

**CONTINUATION OF REPORT**

Report No. D/20190111/7008

<b>Subjects Involved</b>			
<b>Victim</b>			
Person Name	NG YAN YEE ROSALIND		
ID Type	NRIC NO	ID No	S7902293D
Gender	Female	Age	39
Race	Chinese	Language	English
Occupation	Manager	Address Type	
Address	APT BLK 30 GHIM MOH LINK #09-332 SINGAPORE 272030	Mobile No	98778780
Is Informant A Victim?	Yes		
Person Name	NG YAN YEE ROSALIND (Informant)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 11/01/2019 13:52
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp

Date of Accident : 09/01/19 Accident Time: 23:00 (24-HR-Format)

Accident Place : BUKIT PANJANG

Vehicle No. (Car Plate No.) : SKW 832P Make/Model: TOYOTA COROLLA

Insurance Company : CHINA TAI PING INS Policy No: DMPCSN303/00181  
(CHUANGLI YANYI)

Owner or Company Name /IC No. : NG YAN YEE ROSALIND / S7902293D

Owner or Company Contact No. : 9877 8780 Owner's Hp - Company Tel -

DRIVER'S Name / IC No. : AS ABOVE

DRIVER'S Date Of Birth : 21-01-1979 DRIVER'S License Pass Date 28-03-2006

Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: -

DRIVER'S Address : BLK 30 GAIH MOH LINK #09-332 S(272030)

DRIVER'S Contact No./ Alt No. : 1) - 2) -

DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)

Email Address : irenelok@vfixauto.com.sg

Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET

Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance

Number of Passengers (Including Driver): >

Was there any video Captured by car camera: YES \ NO

Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Any Injury (If YES, Pls state): RIGHT HAND - Pedestrian

**Other Party Driver's Particular (if any)**

Vehicle No: <u>PEDESTRIAN (FEMALE)</u>	Vehicle No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

\* **NEW - Passenger's name & gender:**  
1 pax male - Tyson Aw Yong.

**REPUBLIC OF SINGAPORE DRIVING LICENCE**

S7902293D



**NG YAN YEE ROSALIND**  
(HUANG YANYI ROSALIND)

Birth Date: 21 Jan 1979  
Issue Date: 28 Mar 2006

001408836E

**REPUBLIC OF SINGAPORE**

IDENTITY CARD NO. S7902293D




Name  
**NG YAN YEE ROSALIND**  
(HUANG YANYI)  
黄艳仪

Race  
**CHINESE**

Date of birth  
21-01-1979

Sex  
F

Country of birth  
**SINGAPORE**

S7902293D

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

Class	Description	PASS DATE
Class 3	Motor Cars=<3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =<2500kg	28 Mar 2006

NP 428A

Licence No: S7902293D

4376463



NRIC No. S7902293D



Date of issue  
26-03-2009

APT BLK 30 GHIM MOH LINK #09-332  
SINGAPORE 272030

NRIC No: S7902293D Date: 28/09/2018

**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)

CERTIFICATE No.	DMPCSN3031001801	Engine No :12RY229449 Chassis No:MR053RBH104541720
1. Index Mark and Registration Number of Vehicle	SKW832P	
2. Name of Policy Holder	NG YAN YEE ROSALIND	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	16 APRIL 2018	NAMED DRIVERS EX SECT. I .....S\$500.00 ADDITIONAL EX OTHER THAN NAMED DRIVERS:
4. Date of Expiry of Insurance	15 APRIL 2019	EX SECT. I - AGE <= 25.....S\$3,000.00 EX SECT. I - AGE >= 26.....S\$500.00 * AGE AS AT DATE OF ACCIDENT EX ON WINDSCREEN .....S\$100.00
5. Persons 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 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.	
6. Limitations as to use: *	USE FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS. THE POLICY DOES NOT COVER USE FOR HIRE OR REWARD TUITION DRIVING TEST RACING FACE-MAKING, RELIABILITY TRIAL, SPEED-TESTING, 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.  EXCESS WHICHEVER IS APPLICABLE FOR LOSSES OCCURRING OUTSIDE SINGAPORE (CONSTRUCTIVE TOTAL LOSS/THEFT) WILL BE DOUBLED. ONE TIME WAIVER OF EXCESS FOR THE FIRST S\$500 WILL APPLY TO THE INSURED AND NAMED DRIVERS IN THE EVENT OF OWN DAMAGE CLAIM AT OUR AUTHORISED WORKSHOPS FOR EACH POLICY YEAR.  HIRE PURCHASE CO. : TOKYO CENTURY LEASING (S) PTE LTD * 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).  
Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

*Terry's Office*  
38 Parbury Avenue #04-02 S467034  
Tel/WatsApp : 9127 8514



Countersigned By:

.....  
Authorised Officer

.....  
Authorised Signatory