SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Mobile Number

Fax Number
Contact Number

EMail Address

- 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.

atoresaid.		
	ACCIDENT STATEMENT	
Date Of Report	22/01/2019 10:34	
Date Of Accident	08/01/2019 12:40	
Exact Location Of Accident	SLIP ROAD OF WOODLANDS AVE 5 TO WOODLANDS AVE 12	
Country/State of Loss	SINGAPORE	
DETAILS OF OWN VEHICLE		
Vehicle Registration Number	SKH2584X	
Insured/Policyholder		
Name Of Registered Owner	SU DAN	
NRIC No	S8172880A	
Email Address	SUDAN.SERINA@GMAIL.COM	
Mobile Phone No	(LOCAL) +65-94509473	
Alternative Phone No	OTHERS-94509473	
Vehicle Particulars		
Manufacturer	VOLKSWAGEN	
Model	JETTA	
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	DMPCSN3027051803	
Cover Note Number		
Driver		
Name of Driver	SU DAN	
NRIC No	S8172880A	
Date Of Birth	17/10/1981	
Occupation	INDOOR	
Date Of Driving Pass	27/12/2010	
Driving Experience	8 YEARS AND 0 MONTHS	
Gender	FEMALE	

(LOCAL) +65-94509473

SUDAN.SERINA@GMAIL.COM

OTHERS-94509473

BLK 174 LOMPANG ROAD Address

#03-59

Postcode 670174

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

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

2

NO

NO

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) 4

Passenger 1

NAME: : CLEMENT TAN

> GENDER: : MALE

Passenger 2 NAME: : WEIWEI DONG

> GENDER: : FEMALE

Passenger 3 NAME: : THUAN YEN CHOW

> **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? NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SDY8278J

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Page 2 of 13

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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- 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 interested parties.
- 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 2 2 JAN 2019

10-34An

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: Poh Kwee Choo NRIC/FIN No.: S6840583A

Sketch Plan Pg. 2

SKETCH PLAN	woodlands Ave	12 .
Spy87783 SMH2584 Woodlands Ave 5	15	
DESCRIBE CIRCUMSTANCES OF T	•	
on 8 Jan, at Lef	if turn, the car infront	has started to move out,
then I turn to r	my right to see other	side, but he suddenly the car infront
Stopped, so	my oar bang into	the car infront
DECLARATION I/We declare the foregoing particulars	are true in every respect.	
	,	√
Policyholder's Signature Date & Time JAN 2019	Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centry Personnel's Signature Name: Poh Kwee Choo NRIC/FIN No.: S6840583A

CERTIFICATE OF INSURANCE Pg. 1



中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD

MX1ER SN 43000MA Cov.Type: C

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)

Engine No :CAXC23675 CERTIFICATE No. DMPCSN3027051803 Chassis No:WVWZZZ16ZDM017520 1. Ind ex Mark and Registration SKH2584X Number of Vehicle 2. Narme of Policy Holder MDM SIL DAN 3. Effective date of the Commencement of Insurance for 20 MAY 2018 the purposes of the Regulations, Ordinance or Enactment ADDITIONAL EX OTHER THAN NAMED DRIVERS: 4. Date of Expiry of Insurance 19 MAY 2019 5. Persons or Classes of Persons entitled to drive * EX ON WINDSCREEN\$\$100.00

(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: 1

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 PACE-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 \$\$1,000 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. : DBS BANK LTD AS HP OWNER

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.

Countersigned By:

Authorised Officer

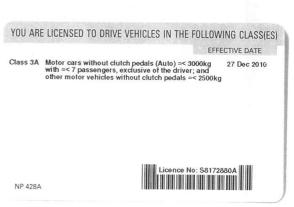
Authorised Signatory

DRIVER'S NRIC +DRIVING LICENCE Pg. 1









E-TICKET - PASSENGER ITINERARY/RECEIPT Pg. 1



ELECTRONIC TICKET PASSENGER ITINERARY/RECEIPT

P REPARED FOR S W/DANMS

TI CKET NUMBER 6 1 82969699786

RESERVATION CODE: KMSPSP

Safe2Travel Pte Ltd 10 TOH GUAN ROAD 08-01

SINGAPORE 608838 AFTER-OFC-HR EMERGENCY LINE 9823 4324

Opening Hrs: 0830-1830 Consultant: Nafflin Yap Office Hours Contact : After Office Hours Contact :

Facsimile: Email: Sapphire@safe2travel.com

FREQUENT FLYER: SQ8095173405 **ISSUING AIRLINE: SINGAPORE AIRLINES** ISSUING AGENT: Safe2Travel Pte Ltd ISSUING LOCATION: SINGAPORE, SG **ISSUED DATE: 13DEC18**

IATA NUMBER: 32308006 CUSTOMER NO : SIN079 TOUR CODE : TMS FOID : NAME REF

Thursday 10 Jan - Please verify flight times prior to departure AIRLINE RES CODE : KTABXC STATUS / DURATION / MILEAGE FLIGHT/CLASS CITY/COUNTRY/AIRPORT NAME/TERMINAL TIME MEALS/EQUIPMENT/STOPS S INGAPORE AIRLINES CONFIRMED / 5HR45MIN / 2437MILES / 18:55 SINGAPORE CHANGI SQ 424/ECONOMY/E MEALS / AIRBUS INDUSTRIE A380-800 **TERMINAL 3** JET 22:10 MUMBAI CHHATRAPATI SHIVAJI TERMINAL 2 DOM AND INTL

> FARE BASIS CODE: E11SGRT6 BAGGAGE: 35K NOT VALID BEFORE NOTES NOT VALID AFTER: 10JAN20 **SEAT: 49G**

SQ SINGAPORE AIRLINES Contact (SINGAPORE CHANGI)--(65) 62238888

Friiday 18 Jan - Please verify flight times prior to departure AIRLINE RES CODE : KTABXC STATUS / DURATION / MILEAGE FLIGHT/CLASS CITY/COUNTRY/AIRPORT NAME/TERMINAL TIME MEALS/EQUIPMENT/STOPS SINGAPORE AIRLINES 09:55 DELHI GANDHI CONFIRMED / 5HR50MIN / 2584MILES / SQ 401/ECONOMY/E TERMINAL 3 MEALS / 18:15 SINGAPORE CHANGI

> FARE BASIS CODE: E11SGRT6 BAGGAGE: 35K NOTES: SEAT:51G NOT VALID BEFORE: NOT VALID AFTER: 10JAN20

SQ SINGAPORE AIRLINES Contact (DELHI GANDHI)--011-23326373 / 011-23356286

FORM OF PAYMENT: INVAGT ENDORSEMENT / RESTRICTIONS: VALID SQ/MI.

NOTE - SGD6.10 OP (AVIATION LEVY) APPLIES TO DEPARTURES FROM SINGAPORE

POSITIVE IDENTIFICATION REQUIRED FOR AIRPORT CHECK-IN/NOTICE

STORED, USED, DISCLOSED AND TRANSFERRED.

THE CARRIAGE OF CERTAIN HAZARDOUS MATERIALS, LIKE AEROSOLS, FIREWORKS, AND FLAMMABLE LIQUIDS, ABOARD THE AIRCRAFT IS FORBIDDEN. IF YOU DO NOT UNDERSTAND THESE RESTRICTIONS, FURTHER INFORMATION MAY BE OBTAINED FROM YOUR AIRLINE. DATA PROTECTION NOTICE: YOUR PERSONAL DATA WILL BE PROCESSED IN ACCORDANCE WITH THE APPLICABLE CARRIERS PRIVACY POLICY AND, IF YOUR BOOKING IS MADE VIA A RESERVATION SYSTEM PROVIDER (GDS), WITH ITS PRIVACY POLICY. THESE ARE AVAILABLE AT http://www.iatatravelcenter.com/privacy OR FROM THE CARRIER OR GDS DIRECTLY. YOU SHOULD READ THIS DOCUMENTATION, WHICH APPLIES TO YOUR BOOKING AND SPECIFIES, FOR EXAMPLE, HOW YOUR PERSONAL DATA IS COLLECTED,

NOTICE

CARRIAGE AND OTHER SERVICES PROVIDED BY THE CARRIER ARE SUBJECT TO CONDITIONS OF CARRIAGE, WHICH AREHEREBY INCORPORATED BY REFERENCE. THESE CONDITIONS CAN BE OBTAINED FROM THE ISSUING CARRIER OR THROUGH ITS WEBSITE.PASSENGERS ON A JOURNEY INVOLVING AN ULTIMATE DESTINATION OR A STOP IN A COUNTRY OTHER THAN THECOUNTRY OF DEPARTURE ARE ADVISED THAT INTERNATIONAL TREATIES KNOWN AS THE MONTREAL CONVENTION, OP ITS PREDECESSOR, THE WARSAW CONVENTION, INCLUDING ITS AMENDMENTS (THE WARSAW CONVENTION SYSTEM), MAY APPLY TO THE ENTIRE JOURNEY, INCLUDING ANY PORTION THERE OF WITHIN A COUNTRY, FOR SUCH PASSENGERS, THE APPLICABLE TREATY, INCLUDING SPECIAL CONTRACTS OF CARRIAGE EMBODIED IN ANY APPLICABLE TARIFFS GOVERNS AND MAY LIMIT THE LIABILITY OF THE CARRIER. CHECK WITH YOUR CARRIER FOR MORE INFORMATION.

IATA TICKET NOTICE : http://www.iatatravelcentre.com/e-ticket-notice/General/English/ (Subject to change without prior notice)

PRINTED ON 04:32PM 13DEC18

Accident Photo



Accident Photo





Accident Photo



CHASSIS NUMBER

