SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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

	ACCIDENT STATEMENT
Date Of Report	18/01/2019 13:23
Date Of Accident	17/01/2019 21:40
Exact Location Of Accident	PIE EXIT BKE (WOODLANDS)
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SLB997X
Insured/Policyholder	
Name Of Registered Owner	TAN ENG CHAI
NRIC No	S2612279A
Email Address	MOK_LAN.HONG@GIRAUDAN.COM
Mobile Phone No	(LOCAL) +65-97211266
Alternative Phone No	OFFICE-NOPHONE
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	HARRIER
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	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPPHQ18-001566
Cover Note Number	28/03/2018 TO 27/03/2019
Driver	
Name of Driver	HONG MOK LAN
NRIC No	S2615302F
Date Of Birth	07/09/1965
Occupation	INDOOR
Date Of Driving Pass	25/11/1993
Driving Experience	25 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-97211266
Fax Number	

MOK LAN.HONG@GIRAUDAN.COM

Address 89 CASHEW ROAD #05-02

Postcode 679660

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

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 DRIZZLE
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? NO
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLN3976Z

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver CHEE LEE ANN

NRIC/Passport Number S1777381Z

Contact Number 97764696

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SLP2710U

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

PRIVATE CAR

SHAHROM BIN MOHAMED AFIFF

S6835061A

93826656

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

Vehicle: -

- 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.
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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)

Lunderstand, 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/law 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 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
- 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.
- 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:

LAN ENG CHAI

Driver's Signature

(If driver is not the policyholder)

Date & Time: 18 Jan 19/11an

Name: NRIC/FIN No.

Sketch Plan Pg. 2

Vehicle A: SLB99	1 2019 Time: 9.40 PM Location: PIE EXH BKE (WOODLANDS)
ETCH PLAN	
	exit BKE (WL)
	A
	1 / 161 SLP 27 10 U
	A SLB 997X
	B SLN3976Z
SCRIBE CIRCUMSTANCES O	FTHE ACCIDENT SLP2710U
Jan drivi	fexit BKE(WL), Suddenly Crenicle
stopped his	
relide.	B reliale (SLN 39767) Collided
onto my	vehide.
-	
	,
Claim OD/TP at Ah Lim	n Motor ☐ Claim OD(TP)at other workshop ☐ Reporting Only
	copy of my efile accident report to :
	motor works
k myself	
Email address : mok_la	n. hong@givaudan.com
	your insurer have 14 days timeframe for you to submit own damage claim under
	k with your own insurer for more information.
CLARATION	ars are true in every respect. Vehicle: SCB
e deciate the loteroing particula	ars are true in every respect. VINICU: 3017
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	/h/l/2 4447 / (=()?)
TAN GM CHAI	1 / Millian () () () () ()
TAN ENGLIAN	/ Mille

EO Insurance Company Limited

3 Maxwell Road #17-00 rower Block MND Complex Singapore 068110 tel 65 6223 9433 | 1ex 85 6224 3903 | www.eqinaurance.com.ag reg.no. 1978-00496-N



\$\$600.00 £

5\$3,000,00

CERTIFICATE OF INSURANCE

. ROAD TRANSPORT ACT 1987 (MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1968 (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

Form; MX2 Excess: Insured/Named Driver:

YEID

med Drivers: Additional:

Certificate No.: DMPPHQ18-001566

Index Mark and Registration Number of Vehicles
 SLB997X

2. Name of Policyholder

TAN ENG CHA!

- 3. Effective Date of the Commencement of Insurance for the purpose of the Act 26/03/2018
- 4. Date of Expiry of Insurance 27/03/2019
- 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 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
- (a) use for the carriage of goods (other than samples) in connection with any frade 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

A000298/Tong Hin Insurance Agency Pie Ltd Date of Issue: 09/03/2018 16:26

Authorised Signatory EQ Insurance Company Limited

Exp No.: DMPPHQ17-001457

A Member of Citystate





































