## 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 <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

aforesaid.	stepy consent to the archiving of this report at the centre and to copies of the report being made available		
	ACCIDENT STATEMENT		
Date Of Report	17/01/2019 16:13		
Date Of Accident	16/01/2019 19:40		
Exact Location Of Accident	JUNCTION OF HENDERSON & TIONG BAHRU RD		
Country/State of Loss	SINGAPORE		
	DETAILS OF OWN VEHICLE		
Vehicle Registration Number	SGH3433P		
Insured/Policyholder			
Name Of Registered Owner	YIP PEK KHUAN		
NRIC No	S1435358E		
Email Address	NOEMAIL		

(LOCAL) +65-96389136

OFFICE-96389136

Alternative Phone No Vehicle Particulars

Mobile Phone No

Manufacturer MITSUBISHI
Model LANCER-1.6 (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 ERGO INSURANCE PTE. LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number DMPC18S004841

Cover Note Number

Driver

Name of Driver

YIP PEK KHUAN

NRIC No

S1435358E

Date Of Birth

Occupation

Date Of Driving Pass

YIP PEK KHUAN

S1435358E

D7/08/1960

INDOOR

07/04/1979

Driving Experience 39 YEARS AND 9 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-96389136

Fax Number

Contact Number OFFICE-96389136

EMail Address NOEMAIL

**BLK 91 DAWNSON RD #17-24** Address

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

NO

Was any injured conveyed to hospital by

ambulance? Was any other material or property damaged?

YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance. Number of Passengers (Including Driver)

NO 1

# **Details of Police Action**

NO 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**

ON 16/01/2019 AT ABOUT 7.40PM, I WAS DRIVING ON TIONG BAHRU ROAD ON THE FIRST LANE. (FBD1202H) WHICH WAS IN FRONT OF ME CAME TO A SUDDEN STOP AND I COULD NOT STOP IN TIME AND HIT THE REAR OF (FBD1202H).

### Attachment(s)

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

## **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number FBD1202H

Vehicle Make/Model/Colour

**Details Of Properties VEHICLE B MOTORCYCLE** Vehicle Category

Name of Driver **FAIZAL** 

NRIC/Passport Number

**Contact Number** 97996530

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## SKETCH PLAN

## IMPORTANT NOTICE

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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
- 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)

l understand, 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) of:
  - 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")
- 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.
- the information so collected under (d) above may be shared / disclosed:
  - 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

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No .:

QME

# Sketch Plan #2 Pg. 1

SKETCH PLAN FBD 1303 H	
SGM 3H3BP	
Bahru Rd	
THE TOTAL PROPERTY OF THE PROP	
	100 100 100 to 100 100 100 100 100 100 100 100 100 10
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	
On 16/119 a-labor - 740pm, I was driving on	
Time Bahry Road on the first lane FBD 1202 H	
which was introp of no come to a sudden stop on	7
	1
I could not stop in time and lift the rear of FBD120	12H
	***************************************
	NE PODE URANIZATANA PROFES
	TOTAL COLUMN ROTE (S. C.
	STREET STREET
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DECE AND STROOM	eromento la composición de la composición della
DECLARATION  I/We declare the foregoing particulars are true in every respect.	
The state of the s	
Policyholder's Signature Driver's Signature Reporting Centre Personnel's Signature	3
Policyholder's Signature Driver's Signature Name:	'

GIARMC SketchPlanForm\_V3

Page 4 of 15

# Sketch Plan #3 Pg. 1

## REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1435358E





YIP PEK KHUAN

葉碧雲

CHINESE Date of Birth

05-08-1960 F SINGAPORE

S1435358E

# DENMAGRICANCE Licence Number: \$ 1 4 3 5 3 5 8 E YIP PEK KHUAN Birth Date: 05 Aug 1960 Issue Date: 25 Feb 2004

NRIC No. S1435358E



Date of issue

04-11-1993

APT BLK 91 DAWSON ROAD #17-24 SINGAPORE 144091 NRIC No: \$1435358E Date:

Date: 07/06/2015 (R)

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

Motor Cars and Wotor Tractors the weight of which unladen does not exceed 2500 kilograms

07 Apr 1979

NP 428A

Licence No: S1435358E

## Sketch Plan #4 Pg. 1

ERGO

PRIVATE CAR

PC1 R SB A000500 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)

CERT	ΓIFΙ	CAT	E.	NO.

DMPC18S004841

1) Index Mark and Registration No. of Vehicle:

SGH3433F

2) Name of Policyholder:

YIP PEK KHUAN

3) Commencement Date of Insurance:

08 June 2018

EXCESS: (SECTION I). SGD500.00

ADD XS:UNNAMED DRS-I SGD500.00

YNG&INEXP DRV(SEC I) SGD3,000.00

4) Expiry Date of Insurance:

07 June 2019

ADD XS:NON-AUTH WKSH SGD300.00

EXCESS: WINDSCREEN SGD100.00

5) Persons or Classes of Persons entitled to drive

1) YIP PEK KHUAN

2) SAITO GOSHI

3) Any other person who is driving on the Policyholder's order or permission

6) 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.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

- 7) Limitations as to Use
  - (1) Use only for social domestic and pleasure purposes
  - (2) Use for Policyholder's business

This Policy does not cover

- (1) Use for hire or reward, racing, pace-making, reliability trial or speed-testing
- (2) Use for the carriage of goods other than samples in connection with any trade or business
- (3) 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 (for Items 6 & 7)

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)

Legend Cov Type:

C - Comprehensive

F - Third Party, Fire & Theft

T - Third Party

For and on behalf of ERGO Insurance Pte. Ltd. Approved Insurer

Authorized Sighature

















