

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	29/01/2019 18:48
Date Of Accident	28/01/2019 12:30
Exact Location Of Accident	SINGAPORE CAUSEWAY TOWARDS JB CHECK POINT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJP7263J
Insured/Policyholder	
Name Of Registered Owner	MCT AUTO
Co Reg No	53386796K
Email Address	WLEE3715@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91444169
Alternative Phone No	OFFICE-91444169

Vehicle Particulars

Manufacturer	HYUNDAI
Model	AVANTE
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5103791247
Cover Note Number	

Driver

Name of Driver	LEE WILLIAM
NRIC No	S1524926I
Date Of Birth	13/10/1962
Occupation	OUTDOOR
Date Of Driving Pass	08/12/1979
Driving Experience	39 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-91444169
Fax Number	
Contact Number	OTHERS-91444169
Email Address	WLEE3715@GMAIL.COM

Address	BLK 40 TELOK BLANGAH RISE #07-387
Postcode	090040
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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)	2
Passenger 1	NAME: : FRIEND GENDER: : MALE

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

PLEASE 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	SJW4151G
Vehicle Make/Model/Colour	CHEVROLET OPTRA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	NOR HISHAM BIN ABDULLAH
NRIC/Passport Number	S1359941F
Contact Number	92299783
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.



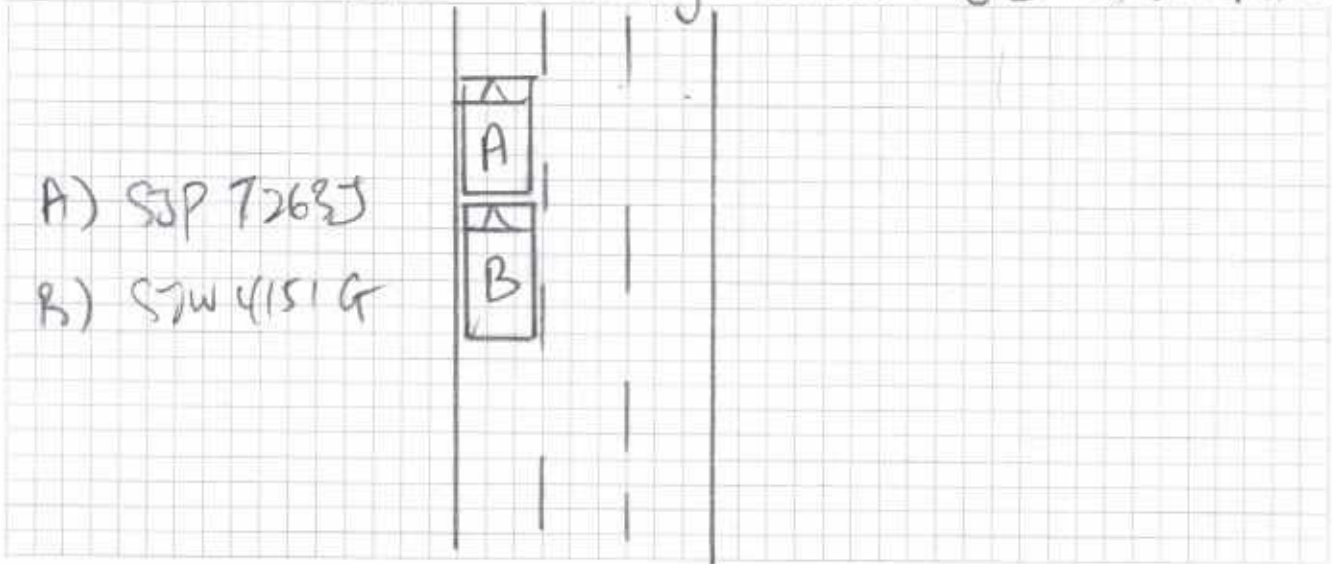
Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN

SLOPE CAUSEWAY TOWARDS JB CHECK POINT



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 28/01/2019 AT ABOUT 12:30HRS I WAS AT THE LEFT LANE AT SLOPE CAUSEWAY TOWARDS JB CHECK POINT. I WAS TRAVELLING AT 30KM/H & SUDDENLY I FELT A HUGE BASH FROM BEHIND. I CAME DOWN & SAW A CAR SJW 4151 G BASH ON TO THE REAR OF MY CAR SJP 7263J

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:

29/01/2019
Reporting Centre Personnel's Signature
Name: Roshan
NRIC/FIN No.:

Claim Handling

Accident MT/1830089

Policy No.	5103791247	Vehicle No.	51072631	GST Registration No.	
Certificate No.					
Policyholder Name	MCT AUTO			Policyholder NRIC	S3386796K
Product Code	FLEET INSURANCE	Cover Type	Third Party	Leading	0
Contact No.(Mobile)	91444169	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No *
KPI	+ No - Yes	TCA	+ No - Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	Yes

▼ Accident Details

Report Date	29/01/2019 19:03	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Road to Road
Date of Accident	29/01/2019	Time of Accident (Approx)	12:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICR No.	
Accident Location	SINGAPORE CAUSEWAY TOWARDS JO CHECK POINT				

▼ Excess

Own Damage Excess	0.00	Additional Excess	0	Windscreen Excess	0.00
Unnamed Driver Excess		Outside Singapore OD Excess	0.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		

▼ Benefits

▼ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

▼ Policyholder Mailing Address

Address 1	BLK 531A #04-113	Address 2	UPPER CROSS STREET	Address 3	HONG LIM COMPLEX
Address 4	SINGAPORE 051531	Address Type	Singapore address	Post Code	051531
Unit No.	04-113	Related Policy Number	5105687068		

▼ OT Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	13/10/1962
Unnamed driver Name	LEE WILLIAM	Driver NRIC	S1524926	Driving Experience	39
Register Date of Driver License	08/12/1979	Driver Age	58	Contact No.(Home)	
Certified No.(Mobile)	91444169	Contact No.(Office)		Address 1	SINGAPORE 090040
Address 1	BLK 40 #07-387	Address 2	TELUK BLANGAH ROSE	Post Code	090040
Address 4		Address Type	Foreign address		
Unit No.	07-387	Driver Vehicle No.	51072631	Driver Insurer Company	NTUC
Does he own a Singapore Registered car?	+ Yes - No				

Declaration

Breathalyzer or Blood Test Reading?	0 mg	Any Injury?	+ Yes - No
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Modification History

Claim 001 OD-MX [New](#)

Claim Type *	OD-MX *	Insured Name	MCT AUTO	Insured NRIC	S3386796K
Contact No.(Mobile)	88891085	Contact No.(Home)		Contact No.(Office)	
Email Address		OT Vehicle Number	51072631	TP Vehicle Number	5104151G
Claim Description	51072631 / 5104151G ON 29 Jan 2019				
Preferred Workshop		Insured Liability	Not at Fault *		
Report no. Finalisation	Yes *	Repair Option	Referred Workshop, Name unknown *	GIA report	Received *
Date Registered	29/01/2019 19:23	Claim Close Date		Date Received	29/01/2019 19:09
Report Taken By	ROSLI WAHAB	Workshop Repairer		Total Loss Not Reported	

Print AX letter

[Save](#) [Submit](#)






















Attachment

Accident No.	MT/1830089	Claim No.	001
Last Doc. Received	+ Yes - No	Upload Date	29/01/2019 19:24
Path *		Category *	Confidential
Choose File	No file chosen	Urgency *	Normal
Choose File	No file chosen	Description *	
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Messages Read			

▼ Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent (CD)
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE 5 (BUKIT MERAH)) on 29 Jan 2019 19:24	Photos	Normal	Photos 2019-1-29	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE 5 (BUKIT MERAH)) on 29 Jan 2019 19:24	Photos	Normal	Photos 2019-1-29	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE 5 (BUKIT MERAH)) on 29 Jan 2019 19:24	Photos	Normal	Photos 2019-1-29	

[Send Message](#)

	NAC_BUKIT_MERAH_800675(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Jan 2019 19:24	Photos	Normal	Photos 2019-1-29
	NAC_BUKIT_MERAH_800675(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Jan 2019 19:24	Photos	Normal	Photos 2019-1-29
	NAC_BUKIT_MERAH_800675(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Jan 2019 19:24	Photos	Normal	Photos 2019-1-29
	NAC_BUKIT_MERAH_800675(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Jan 2019 19:24	Photos	Normal	Photos 2019-1-29
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	NAC_BUKIT_MERAH_800675(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Jan 2019 19:08	Photos	Normal	Photos 2019-1-29
	NAC_BUKIT_MERAH_800675(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Jan 2019 19:09	Photos	Normal	Photos 2019-1-29
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	NAC_BUKIT_MERAH_800675(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Jan 2019 19:08	Photos	Normal	Photos 2019-1-29
	NAC_BUKIT_MERAH_800675(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Jan 2019 19:08	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-1-29
	NAC_BUKIT_MERAH_800675(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 29 Jan 2019 19:08	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-1-29
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Video List

Uploaded By/Data	Folder Data	File Name	Source	Action
		Display in New Window	Scan and uploading	

ACCIDENT STATEMENT

ACCIDENT DATE: 28.1.19 (DD/MM/YYYY), TIME: 12.30 (HH:MM)

LOCATION: SIN CROSSING TO WARD TO CHECK POINT

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SP 7563 J
 b) INSURANCE COMPANY: NTUC
 c) POLICY NUMBER: 5105791847
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: HYUNDAI AVANTE
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE USE
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES / NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: MCT AUTO (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: LEE WILLIAM (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S1549061 CONTACT: 91441169
 c) ADDRESS: BLK 60 0737 TEBOK PLANGAH
RSE 5 (090000)

* d) DATE OF BIRTH: 13/10/62 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: HIRER

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)
 b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SIN 4151 G MODEL: CHEVROLET
 b) DRIVER'S NAME: NORTH SHAM BIN ABDULLAH
 c) NRIC/FIN/PASSPORT: S1557941 F CONTACT: 92299783

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
 e) DRIVER'S NAME: _____
 f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

* No of passenger
 (Including driver)
 ()

* No of passenger
 (Including driver)
 ()

* No of passenger
 (Including driver)
 ()

Email = Wlee 3715@gmail.com
 VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S15249261



Name

LEE WILLIAM

李 偉 亮

Race

CHINESE

Date of birth

13-10-1962

Sex

M

Country of birth

SINGAPORE

S15249261

REPUBLIC OF SINGAPORE

DRIVING LICENCE



Licence Number

Name

S15249261

LEE WILLIAM

Birth Date: 13 Oct 1962

Issue Date: 04 Jul 2015



002447346E



NRIC No. S15249261



Date of issue
19-06-2009

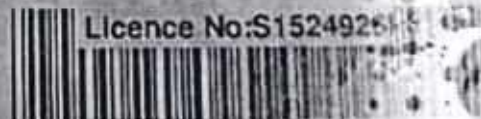
Address

APT BLK 40 TELOK BLANGAH RISE
#07-387
SINGAPORE 090040

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

EFFECTIVE DATE

- | | | |
|---------|---|-------------|
| Class 3 | Motor Cars =< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg | 08 Dec 1979 |
| Class 4 | *Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg | 01 Nov 1982 |



Licence No: S15249261

NP 428A

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 Number: 5103791247

Cover : Third Party

- | | |
|--|--------------------|
| 1. Index mark and Registration Number of Vehicle | : SJP7263J |
| Chassis Number | : KMHU41BR9U726019 |
| 2. Name of Policyholder | : MCT AUTO |
| 3. Effective Date of Insurance | : 28 Sep 2018 |
| 4. Expiry Date of Insurance | : 27 Sep 2019 |

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/her 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#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

(a) Use for racing, pace-making, reliability trial or speed-testing.

(b) Use for the carriage of goods (other than samples) in connection with any trade or business.

(c) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: S\$1,500
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: N/A
NCD PROTECTION	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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)

Agency : JG MOTOR AGENCY (00000613374)
Date of Issue : 11 Sep 2018 14:24 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive