### 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.				
	ACCIDENT STATEMENT			
Date Of Report	31/01/2019 16:20			
Date Of Accident	23/01/2019 11:00			
Exact Location Of Accident	503 WEST COAST DRIVE OPEN CARPAR			
Country/State of Loss	SINGAPORE			
DETAILS OF OWN VEHICLE				
Vehicle Registration Number	SJX7073Z			
Insured/Policyholder				
Name Of Registered Owner	EE KOK SENG			
NRIC No	S1485784B			
Email Address	NOEMAIL			
Mobile Phone No	(LOCAL) +65-91605206			
Alternative Phone No	OFFICE-NOPHONE			
Vehicle Particulars				
Manufacturer	LEXUS			
Model	IS250-2.5 (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?	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	DMCPSN3043471800			
Cover Note Number				
Driver				
Name of Driver	EE KOK SENG			

Name of Driver EE KOK SENG
NRIC No S1485784B
Date Of Birth 26/12/1961
Occupation INDOOR
Date Of Driving Pass 13/01/1982

Driving Experience 37 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91605206

Fax Number

Contact Number OFFICE-NOPHONE

EMail Address NOEMAIL

Address 337D TAH CHING RD #13-13

Postcode 614337

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 PARKED VEHICLE

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?

Was any injured conveyed to hospital by

Number of Passengers (Including Driver)

ambulance?

NO

NO

2

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Passenger 1

NAME: : ROY EE JIA HAO

GENDER: : MALE

#### **Details of Police Action**

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

NO

NO

#### **Circumstances of Accident**

ON 23/1/2019 AT AROUND 1100HRS, I PARKED MY VEHICLE NEAR 503 WEST COAST DRIVE OPEN CARPARK AND WHEN I GO COLLECT MY VEHICLE AND WAS ON MY WAY TO THE EXIT, SUDDENLY THERE IS ONE VEHICLE DROVE IN THE MIDDLE OF THE ROAD AND I TRIED TO KEEP TO LEFT TO ALLOW HIM TO PASS THROUGH BUT CAUSED ME ACCIDENTALLY STRETCHED ONTO VEHICLE B WHICH IS PARKED IN THE LOT. AFTER ACCIDENT I LEFT A NOTE ON THE WINDSCREEN TO INFORM HIM THAT MY VEHICLE HAD SMALL ACCIDENT ON HIS VEHICLE. ON NEXT DAY I RECEIVED A WORKSHOP SAYING THAT VEHICLE B IS UNDER A RENTAL COMPANY AND THEY ASSIGNED THEM TO GET IN TOUCH WITH ME. THE WORKSHOP QUOTE ME TOO HIGH AND I WANTED TO NEGOTIATE FOR BEST PRICE AND ENDED LOST IN TOUCH.

## 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 SJQ8264U

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

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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- 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:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

I AM AWARED THAT MY IN SURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.

# Sketch Plan Pg. 2

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DESCRIBE CIRCUMSTANCES O	OF THE ACCIDENT	
DESCRIBE CIRCOMSTARGES C	7 111 10000	
Refer to the Con	cumstances,	
		☐ Claim own policy
		Claim third party Claim-OD / TP at other works hop
DECLARATION		For record purpose
DECLARATION  I/We declare the foregoing particu	Ilars are true in every respect.	Policy No. Without Veh.No.SX 70752
, Jacob Land to Legonia particu	are true in every respecti	
(AAY).		
Policyholder's Signature	Driver's Signature	Reporting Centre-Personnel's Signature
Date & Time:	(If driver is not the policyholder)	Name:

Graffiat SketchPtanForm\_V3

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#### 中国太平保险(新加坡)有限公司 CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

MXIE N SN ANO214A COMPREHENSIVE AUTOSAFE

#### 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.	DMPCSN3043471800	Engine No : 4GR0561896 Chassis No: JTHBK262105122469
Index Mark and Registration     Number of Vehicle	SJX7073Z	
2. Name of Policy Holder	MR EE KOH SENG	
<ol> <li>Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment</li> </ol>	IN ADD	ORIVERS EX SECT. I
4. Date of Expiry of Insurance	01 JULY 2019 EX SECT	I I - AGE >= 26
5. Persons or Classes of Persons entitled to drive *	EX ON I	NINDSCREEN

- (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: \*

Countersigned By:

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.

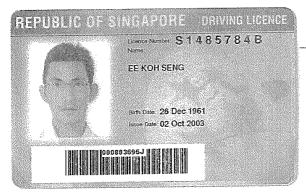
HIRE PURCHASE CO. : TOKYO CENTURY LEASING (S) FTE LTD AS HP OWNER

\*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Perty 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.



3 Anson Road #16-00 Springleaf Tower Singapore 079909 Tel: 6389 6111 Fax: 6225 3592 Website: www.sg.cntaiping.com



REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1485784B



EE KOH SENG







814857843

26-12-1961 Country/Place of birth SINGAPORE

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

PASS DATE

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

13 Jan 1982

NP 428A



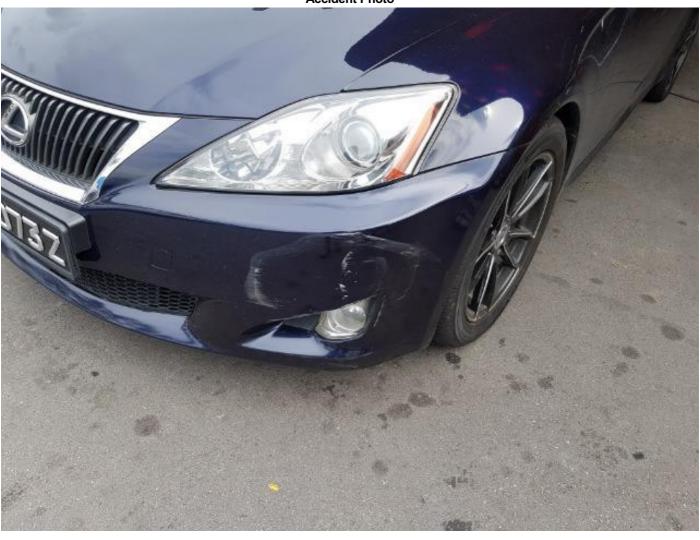
5531703 13-11-2015

APT BLK 337D TAH CHING ROAD #13-13 SINGAPORE 614337











### **Addendum Sheet**

