

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	02/03/2019 17:04
Date Of Accident	01/03/2019 21:00
Exact Location Of Accident	ALONG BEACH ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLC2977K
Insured/Policyholder	
Name Of Registered Owner	VOULEZ CARS
Co Reg No	53350846X
Email Address	KOOLENGSOON@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92974470
Alternative Phone No	OFFICE-92974470

Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS
Exact Purpose for which vehicle was being used at time of accident	DRIVING GRAB
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5097296239-01
Cover Note Number	

Driver

Name of Driver	KOO LENG SOON
NRIC No	S7884690I
Date Of Birth	14/03/1978
Occupation	OUTDOOR
Date Of Driving Pass	28/02/2000
Driving Experience	19 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92974470
Fax Number	
Contact Number	OTHERS-92974470
Email Address	KOOLENGSOON@GMAIL.COM

Address	BLK 986A BUANGKOK CRESCENT #12-34
Postcode	531986
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)	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

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	SLN2046P
Vehicle Make/Model/Colour	TOYOTA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHONG BOON THONG
NRIC/Passport Number	S1354201E
Contact Number	96360335
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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.



Sm

Policyholder's Signature
Date & Time:

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

02/03/2019
Reporting Centre Personnel's Signature
Name: *Rashid Wathan*
NRIC/FIN No.:

SKETCH PLAN

Blower Branch Road

A) SLN 2977K

B) SLN 2046P



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on 01/03/2019 at 21:00hrs I was travelling Blower Branch Road and the car in front of me brake, I also brake but to late and hit the car in front of me SLN 2046P that all

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:

SM

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

03/03/2019

Rashid Hassan

Claim Handling

The premium on this policy has not been collected.

Accident MT/1034323

Policy No.	5097296239-01	Vehicle No.	SLC2977K	GST Registration No.
Certificate No.				
Policyholder Name	VOULEZ CARS			Policyholder NRIC
Product Code	FLEET INSURANCE	Cover Type	drive CLASSIC	Loading
Contact No.(Mobile)	92974470	Contact No.(Office)		Contact No.(Home)
Email Address		Special Remark		eCode
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	0	Private Hire

Accident Details

Report Date	02/03/2019 17:16	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	01/03/2019	Time of Accident hh:mm	21:00	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	ALONG BEACH ROAD			

Excess

Own damage Excess	1,500.00	Additional Excess	0	Windscreen Excess
Unnamed Driver Excess		Outside Singapore OD Excess	1,500.00	
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 102 #09-908	Address 2	SIMEI STREET 1	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	09-908	Related Policy Number	5097296239-01	

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB
Unnamed driver Name	KOO LENG BOON	Driver NRIC	S76896901	Driving Experience
Register Date of Driver License	26/02/2000	Driver Age	40	Contact No.(Home)
Contact No.(Mobile)	92974470	Contact No.(Office)		Address 3
Address 1	BLK 986A #12-34	Address 2	BUANGKOK CRESCENT	Post Code
Address 4	SINGAPORE 531986	Address Type	Foreign address	
Unit No.	12-34			
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.	SLC2977K	Driver Insurer Comp.

Declaration:

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No
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Modification History

Claim 001

New

Claim Type *	OD-MX	Insured Name	VOULEZ CARS
Contact No.(Mobile)	91449265	Contact No.(Home)	NIL
Email Address		Vehicle Number	SLC2977K
Claim Description	SLC2977K / SLN2046P ON 1 Mar 2019		
Preferred Workshop Finalisation	Yes	Insured Liability	Fully at Fault
Date Registered	02/03/2019 17:20	Preferred Workshop, Name unknown	GIA report
Report Taken By	ROSLI WAHAB	Received	
<input checked="" type="checkbox"/> Print AK letter			

Save Submit

Attachment

Accident No. MT/1034323 Claim No. 001
 Last Doc. Received Yes No Upload Date 02/03/2019 17:20

Path *	Category *	Confidential
Choose File No file chosen	Clear Please Select ▼	NO ▼
Choose File No file chosen	Clear Please Select ▼	NO ▼
Choose File No file chosen	Clear Please Select ▼	NO ▼
Choose File No file chosen	Clear Please Select ▼	NO ▼
Choose File No file chosen	Clear Please Select ▼	NO ▼
Choose File No file chosen	Clear Please Select ▼	NO ▼
Message Read	Clear Please Select ▼	NO ▼

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 02 Mar 2019 17:20	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 02 Mar 2019 17:20	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 02 Mar 2019 17:20	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 02 Mar 2019 17:20	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 02 Mar 2019 17:20	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 02 Mar 2019 17:20	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 02 Mar 2019 17:20	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 02 Mar 2019 17:20	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 02 Mar 2019 17:20	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 02 Mar 2019 17:20	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 02 Mar 2019 17:20	NRIC/ Driving License	Normal	NRIC/ Driving L
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 02 Mar 2019 17:20	SAS	Normal	SAS 20

Video List

Uploaded By/Date	Folder Date	File Name	
			Display in New Window Scan and uploading

ACCIDENT STATEMENT

ACCIDENT DATE: 01/03/2019 (DD/MM/YYYY), TIME: 09:00 (HH:MM)

LOCATION: Beach Rd.

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLC 2977 K
 b) INSURANCE COMPANY: NTUC
 c) POLICY NUMBER: 5097296239-01
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: Toyota Vios
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: grab
 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: VOULEZ CARS (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 578846901 CONTACT: 92974470
 c) ADDRESS: Blk 986A Buangkok Crescent
12 # 34 (531986)

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Koo Leng Soon (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 578846901 CONTACT: 92974470
 c) ADDRESS: Blk 986A Buangkok Crescent
12 - 34 (531986)

* d) DATE OF BIRTH: 14/03/1978 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 28022000

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: SLN2046P MODEL: Toyota
 b) DRIVER'S NAME: CHONG BOON THONG
 c) NRIC/FIN/PASSPORT: 51354201E CONTACT: 96360335

9. THIRD PARTY VEHICLE

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

* No. of passengers
 (Including driver)
 ()

* No. of passengers
 (Including driver)
 ()

* No. of passengers
 (Including driver)
 ()

email = koo leng soon @ gmail . com
 VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S78846901



Name
KOO LENG SOON
邱 龙 顺

Race
CHINESE

Date of birth
14-03-1978

Country/Place of birth
MALAYSIA

Sex
M




REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S78846901

Name: KOO LENG SOON

Birth Date: 14 Mar 1978

Issue Date: 21 May 2007




5531055



NRIC No. S78846901



Date of issue
11-11-2015

Address
APT BLK 986A BUANGKOK CRESCENT
#12-34
SINGAPORE 531986

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

Class	Description	Pass Date
Class 2B	Motorcycles <= 200 cc	28 Feb 2000
Class 3	Motor Cars <= 3500kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 3500kg	28 Feb 2000

Licence No: S78846901



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: 5097296239-01

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SLC2977K**
Chassis Number : MHFBT9F3306067053
2. Name of Policyholder : VOULEZ CARS
3. Effective Date of Insurance : 25 Sep 2018
4. Expiry Date of Insurance : 24 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)	: S\$1,500
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: TAI THONG LEE TRADING PTE LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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 : ANIKA INS BROKERS & CONSULTANTS P/L (00000690423)
Date of Issue : 30 Aug 2018 07:21 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Enquire Vehicle Information

Vehicle No.

Vehicle No. : SLC2977K

Vehicle Details

Vehicle Type : Private Hire (Chauffeur) Motor Car
 Vehicle Attachment 1 : No Attachment
 Make / Model : TOYOTA / VIOS E GRADE 1.5 A/T
 Primary Colour : Silver
 Year of Manufacture : 2015
 Maximum Laden Weight : 1500 kg
 Unladen Weight : 1045 kg
 No. Of Axles : 2
 Engine No. : 1NZZ335207
 Chassis No. : MHFBT9F3306067053
 Engine Capacity : 1497 cc
 Maximum Power Output : 80.0 kW (107 bhp)
 IU Label No. : 1127610011
 Propellant : Petrol
 Passenger Capacity : 4
 Original Registration Date : 09 May 2016
 First Registration Date : 09 May 2016
 Open Market Value : \$13,764.00
 Additional Registration Fee Rate : First \$13,764.00 (100%)
 :
 Actual ARF Paid : \$13,764.00
 PARF Eligibility : Yes
 Minimum PARF Benefit : \$6,882.00
 PARF Eligibility Expiry Date : 08 May 2026
 COE No. : 2016040101003675N
 COE Category : A - Car up to 1600cc & 97kW (130bhp)
 COE Expiry Date : 08 May 2026
 Quota Premium (QP) : \$45,504.00
 QP Paid : \$45,504.00
 OPC Cash Rebate Eligibility : No
 QP during COE Bidding Exercise : \$45,504.00
 :
 Private Hire Vehicle Decal No. : A010860 (Issued on 22 May 2017)
 CO2 Emission: 147.00 (g/km)
 CEV/VES Rebate Utilised :
 Amount:
 CO Emission: -
 HC Emission: -
 NOx Emission: -
 PM Emission: -

Previous

OK