

## 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	07/03/2019 11:01
Date Of Accident	06/03/2019 19:05
Exact Location Of Accident	FROM CHANGI AIRPORT TOWARDS CITY
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJT2261B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LO CHI CHUEN ANTHONY
NRIC No	S2585862Z
Email Address	ANTHONYLO0051@163.COM
Mobile Phone No	(LOCAL) +65-91059077
Alternative Phone No	OTHERS-91059077

### Vehicle Particulars

Manufacturer	HONDA
Model	FREED-1.5 G (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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3092111802
Cover Note Number	

### Driver

Name of Driver	IRIS WONG LAI LING
NRIC No	S2585863H
Date Of Birth	25/12/1961
Occupation	INDOOR
Date Of Driving Pass	21/07/1993
Driving Experience	25 YEARS AND 7 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90294246
Fax Number	
Contact Number	
EEmail Address	IRISWONG@SINGNET.COM.SG

Address	6 UPPER SERANGOON CRESCENT #13-14
Postcode	534033
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	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

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	SKX4433B
Vehicle Make/Model/Colour	BMW 520I
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ANG SOO SIANG (HONG SHUXIANG)
NRIC/Passport Number	S8327591Z
Contact Number	91993900
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

**SKETCH PLAN**

**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. 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.

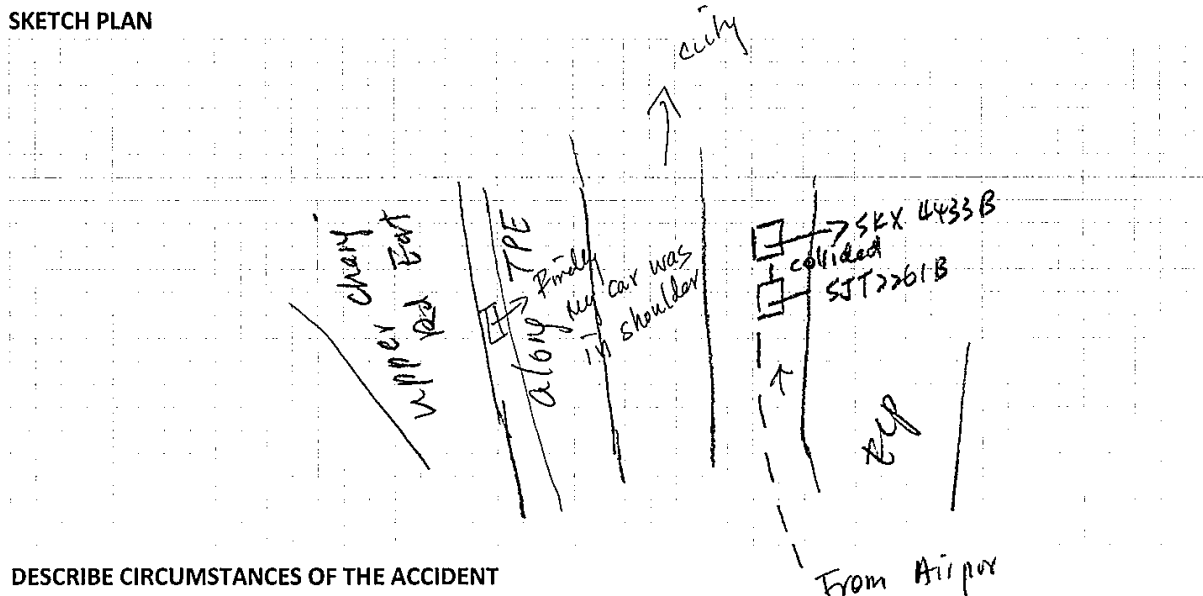
\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

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

\_\_\_\_\_  
Reporting Centre Personnel's Signature  
Name: Jenny Lim  
NRIC/FIN No.: S6927273H

- 7 MAR 2019

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My Vehicle No. SJT2261B has collided into the rear of SKX 4433B, BMW 520i on 6/MAR/2019 at 7:05 pm along TPE toward CTE/SLE, No injury. The traffic was very smooth and no raining. Suddenly, I drove along TPE, crescent at the front vehicles were slow down, I tried to step the brake but too late already.

After accident, I have gone to see doctor at Mt Alvernia (A+E) around 9:50 pm on 6/3/2019 as I felt chest + Muscle pain.

Remarks: Finally, he helps me to direct the traffic and I drove my car from the right fast Lane to the shoulder.

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: 7/3/19 10:50 am

Reporting Centre Personnel's Signature  
Name: Jenny Lim  
NRIC/FIN No.: S6927273H

Driver NRIC & Driving Licence Pg. 1

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S2585863H**

Name: **IRIS WONG LAI LING**

Birth Date: **25 Dec 1961**

Issue Date: **23 Jul 2003**

1000679420H



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S2585863H**

Name: **IRIS WONG LAI LING**

Race: **黄麗玲**

CHINESE

Date of Birth: **25-12-1961** Sex: **F**

Country of Birth: **HONG KONG**




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

Class	Description	PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	21 Jul 1993

NP 428A

Licence No: **S2585863H**



1503945

NRIC No: **S2585863H**

Blood Group: **A+** Date of issue: **15-12-1993**

**6 UPPER SERANGOON CRESCENT #13-14**  
**SINGAPORE 534033**

NRIC No: **S2585863H** Date: **27/10/2016**



# Certificate of Insurance Pg. 1



**中国太平保险(新加坡)有限公司**  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.  
Co. Reg. No. 200208384E

MX1F  
R SN  
AN0006A  
Cov.Type: C

MOTOR PRIVATE CAR

**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)

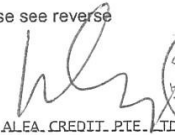

ORIGINAL

CERTIFICATE No.	DMPCSN3092111802	Engine No :L15A2340058 ChaNo:GB31039584
1. Index Mark and Registration Number of Vehicle	SJT2261B	AUTOSAFE =====
2. Name of Policy Holder	LO CHI CHUEN, ANTHONY	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	29 September 2018	Named Drivers Ex Sect. I ..... S\$500.00 Additional Ex Other than Named Drivers: Ex Sect. I - Age <= 25..... S\$3,000.00
4. Date of Expiry of Insurance	28 September 2019	Ex Sect. I - Age >= 26..... S\$500.00 * Age as at date of accident EX ON WINDSCREEN ..... S\$100.00
5. Persons or Classes of Persons entitled to drive*	<p>(a) The Policyholder.</p> <p>(b) Any other person who is driving on the Policyholder's order or with his permission.</p> <p>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.</p>	
6. Limitations as to use*	<p>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.</p> <p>Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled. One time Waiver of Excess for the first S\$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.</p>	

*\* 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).

Please see reverse

Issued By:    
ALEA CREDIT PTE. LTD.  
Authorised Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

  
Authorised Signatory

Accident Photo



Accident Photo





Accident Photo



Chassis Number

