

## 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	11/03/2019 21:23
Date Of Accident	08/03/2019 18:45
Exact Location Of Accident	AYE TOWARDS CTE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJW14X
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#### Insured/Policyholder

Name Of Registered Owner	JOANNE NICOLE WEE GEOK BAY
NRIC No	S8407661I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91013479
Alternative Phone No	OFFICE-91013479

#### Vehicle Particulars

Manufacturer	HONDA
Model	HR-V-1.5 (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 THIRD PARTY

Vehicle Category PRIVATE CAR

#### Insurance Company

Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

#### Driver

Name of Driver	JOANNE NICOLE WEE GEOK BAY
NRIC No	S8407661I
Date Of Birth	14/03/1984
Occupation	INDOOR
Date Of Driving Pass	18/02/2008
Driving Experience	11 YEARS AND 0 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-91013479
Fax Number	
Contact Number	OFFICE-91013479
Email Address	NOEMAIL

Address	SIN
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
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

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGT3266S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	AXA INSURANCE PTE LTD
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Sketch Plan

Vehicle Number: \_\_\_\_\_

### 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.

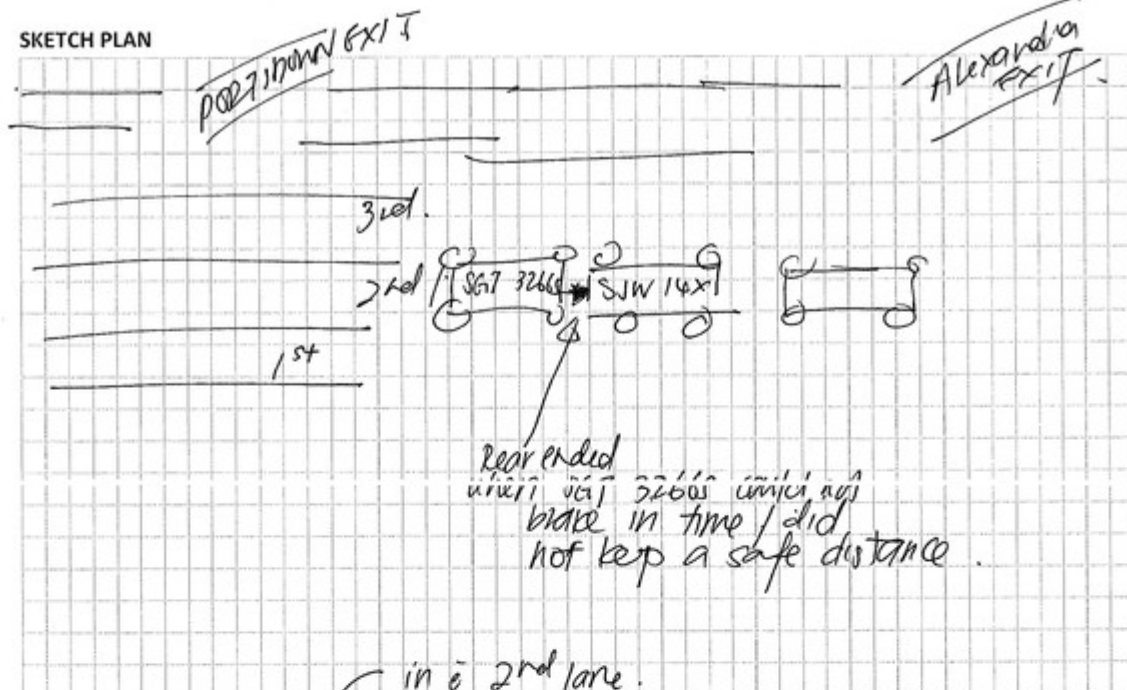
Policyholder's Signature  
Date & Time: 09/03/19

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

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

Vehicle Number: 5JW 14X

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

DRIVING along AYE, traffic was heavy due to peak hour (08/03/19 G (407pm). Noticed SGT 3265 driving quite closely to me & had to ~~break~~ brake & came close to my car rear end. Thought to myself that I would have to switch lane if once traffic cleared as he was ~~staying~~ not keeping a safe distance. However, as shown in ~~the~~ in car camera, traffic was heavy & ~~he~~ there was another need to brake & come to a stop, the driver of SGT 3265 was unable to brake & rear ended me. Again if you look at the video, I was not changing lanes, did not cut in abruptly or did not brake suddenly.

Got out of my vehicle, took photos, exchange contact numbers, he gave me his NRIC, I took ~~the~~ photos. In return, I pass him my driving licence. Then he left the scene. He did ask if I ~~retreat~~ intended to settle privately & I informed him that my vehicle is still under warranty & hence I will be going to report directly to fair motor.

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:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

# Accident Photo



**Tokio Marine Insurance Singapore Ltd.**  
 Company Reg. No. 10230051461 (SST Reg. No. M2-0000023-0)  
 20 Maritime Square #02-01 14601 Marine Centre Singapore 090415  
 T: 654 8225 6131 F: 654 8421 4367 E: info@tokiomarine.com.sg info@tokio.asia.com

A member of the  
 Tokio Marine Group

FORM M-1

## Certificate of Insurance

**MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 180)**

**MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960**

**ROAD TRANSPORT ACT, 1987 (MALAYSIA)**

**MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)**

Policy No.: JEMR111100220-000

Indos Mark and Registration Number of Vehicle

5-07-02

NAME OF POLICYHOLDER

JAYAN MOOLE VIT CHECK BNY

Effective date of the Commencement of Insurance for the purposes of the Act

02/11/2018 09:00:00

Date of Expiry of Insurance

01/11/2019

Persons or Class of Persons entitled to drive\*

(a) Two (2) persons only.

(b) Any other person who is entitled to the Policyholder's consent or with the permission.

\*This is a condition of the policy and is subject to the provisions of the Act and the Rules.

Limitations as to use\*

This policy covers the use of the vehicle for the purpose of the business of the insured.

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### ADDITIONAL INFORMATION

Insurance Plan:

Limit for total loss or theft:

Policy Excess:

Financial Interest:

Comprehensive Approved Workshop Plan

Provisioning Market Value

Own Damage Claims

Additional Excess for Unnamed

Driver's

Additional Excess for Young or

Inexperienced Driver's

Windscreen Excess

DOS BANK LTD

Original Excess: SGD 800.00

SGD 800.00

SGD 500.00

SGD 3,800.00

SGD 100.00

Account No. 241700A

TOKIO MARINE INSURANCE SINGAPORE LTD.

*[Signature]*

Authorized Signature

The image displays four official identification cards from Singapore:

- Driving License:** Issued by the Republic of Singapore, Driving License. Holder: JOANNE NICOLE WEE JERCK EAY. License No: S84076611. Validity: 13 Jan 1964 to 24 Jan 2017. Includes a photo and a barcode.
- National Identity Card (NRIC):** Issued by the Republic of Singapore. Holder: JOANNE NICOLE WEE JERCK EAY. NRIC No: S84076611. Validity: 13 Jan 1964 to 24 Jan 2017. Includes a photo and a barcode.
- National Service (NS) Card:** Issued by the Republic of Singapore. Holder: JOANNE NICOLE WEE JERCK EAY. NS No: S84076611. Validity: 13 Jan 1964 to 24 Jan 2017. Includes a photo and a barcode.
- National Service (NS) Card for a woman:** Issued by the Republic of Singapore. Holder: JOANNE NICOLE WEE JERCK EAY. NS No: S84076611. Validity: 13 Jan 1964 to 24 Jan 2017. Includes a photo and a barcode.

