

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	14/03/2019 11:43
Date Of Accident	13/03/2019 17:45
Exact Location Of Accident	RAFFLES LINK TOWARDS RAFFLES BOULEVARD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFT8818D
Insured/Policyholder	
Name Of Registered Owner	CHUA MAY POH MABEL
NRIC No	S7440619Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98234900
Alternative Phone No	OTHERS-97635611

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E250-2.0 SEDAN (R18) (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE - ON THE WAY HOME
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	THIRD PARTY
Fleet Policy	NO
Policy Number	MS000766
Cover Note Number	

Driver

Name of Driver	CHUA MAY POH MABEL
NRIC No	S7440619Z
Date Of Birth	02/04/1974
Occupation	INDOOR
Date Of Driving Pass	07/02/1996
Driving Experience	23 YEARS AND 1 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-98234900
Fax Number	
Contact Number	OTHERS-97635611
Email Address	NOEMAIL

Address	29 THIRD STREET
Postcode	455507
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

ON 13/MAR/2019 @ 5.47 PM, I WAS TRAVELLING ALONG RAFFLES LINK HEADING TOWARDS RAFFLES BOULEVARD. WHILE I WAS WAITING FOR THE TRAFFIC TO CLEAR ON RAFFLES BOULEVARD, I FELT A HUGE IMPACT TO THE REAR OF MY CAR (VEHICLE A). I GOT DOWN TO CHECK AND FOUND OUT A CAR (VEHICLE B) HAD COLLIDED INTO THE REAR OF MY CAR (VEHICLE A)

Attachment(s)

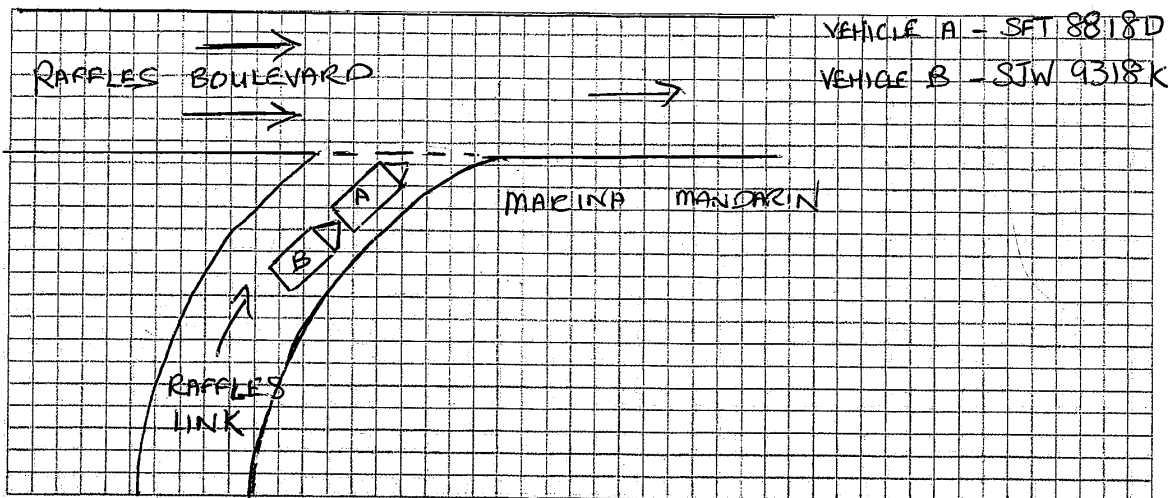
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJW9318K
Vehicle Make/Model/Colour	AUDI A4 1.4 TFSI S TRONIC
Details Of Properties	FRONT PORTION OF HIS CAR & BACK PORTION OF MY CAR
Vehicle Category	PRIVATE CAR
Name of Driver	WONG CHEONG KEEN JEREMY
NRIC/Passport Number	S0231267J
Contact Number	
Address	30 JAMBOL PLACE
Postcode	119357
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

SUNTEC CITY

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 13/MAR/2019 @ 5.47PM, I WAS TRAVELLING ALONG RAFFLES LINK HEADING TOWARDS RAFFLES BOULEVARD. WHILE I WAS WAITING FOR THE TRAFFIC TO CLEAR ON RAFFLES BOULEVARD, I FELT A HUGE IMPACT TO THE REAR OF MY CAR (VEHICLE A). I GOT DOWN TO CHECK AND FOUND OUT A CAR (VEHICLE B) HAD COLLIDED INTO THE REAR OF MY CAR (VEHICLE A).

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time: 13 MAR 2019 @ 1905 HRS

Driver's Signature
(If driver is not the policyholder)
Date & Time: 13 MAR 2019 @ 1905 HRS

Reporting Centre Personnel's Signature
Name: TAN BENG HWEE
NRIC/FIN No.: S700H2904



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.

Policyholder's Signature
Date & Time:

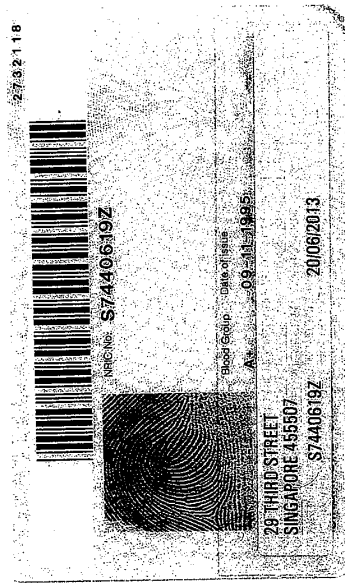
13 MAR 2019
@ 1905 HRS

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

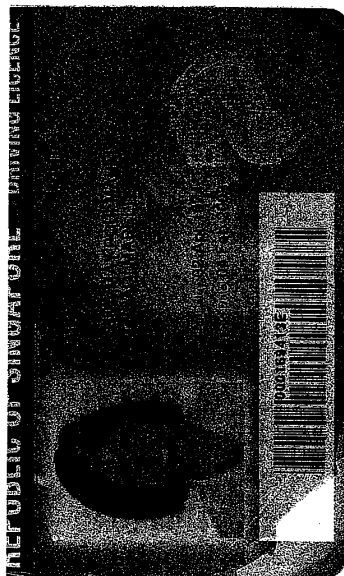
13 MAR 2019
@ 1905 HRS

Reporting Centre Personnel's Signature
Name: TAN BENIG HUWEE
NRIC/FIN No.: S70042910/H





HP. 98234900



Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No.: M2-0000023-4)
 20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046
 T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com

A member of the
Tokio Marine Group



TOKIO MARINE
INSURANCE GROUP

Certificate of Insurance

FORM MX1

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)

Policy No.: MS000766 (Private Car)

- | | | |
|---|-----------------------|--------------------------------|
| 1. Index Mark and Registration Number of Vehicle | SFT8818D | Chassis No.: WDD2120362A893934 |
| 2. Name of Policyholder | CHUA MAY POH MABEL | |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 21/01/2019 (00:00:00) | |
| 4. Date of Expiry of Insurance | 20/01/2020 | |
| 5. Persons or Class of Persons entitled to drive* | | |
| (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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitations as to use*

Use only for social domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed-testing or 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.

* 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Account No: 2417DDA

Insurance Plan:	Comprehensive Approved Workshop Plan		
Limit for total loss or theft:	Prevailing Market Value		
Policy Excess:	Own Damage Claims	SGD 1,500.00	(Original Excess : SGD 1,500.00)
	Additional Excess for Unnamed Driver(s)	SGD 500.00	
	Additional Excess for Young or Inexperience Driver(s)	SGD 3,500.00	
	WindScreen Excess	SGD 100.00	
Financial Interest:	MERCEDES-BENZ FINANCIAL SERVICES SINGAPORE		

TOKIO MARINE INSURANCE SINGAPORE LTD.

Authorised Signature

SFT 8818D - Photo1



SFT 8818D - Photo2





SFT 8818D - Photo4



SFT 8818D - Photo5



SFT 8818D - Photo6



SFT 8818D - Photo7



SFT 8818D - Photo8



SFT 8818D - Photo9





SFT 8818D - Photo11



SFT 8818D - Photo12



SFT 8818D - Photo13



SFT 8818D - Photo14



SFT 8818D - Photo15







