

## 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	26/01/2019 12:44
Date Of Accident	26/01/2019 10:55
Exact Location Of Accident	DUNMAN ROAD TURNING RIGHT TO CRESCENT ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKM380D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	HO JENNY (HE QIANYING)
NRIC No	S7901516D
Email Address	DOMSHARPE@YAHOO.COM
Mobile Phone No	(LOCAL) +65-83390380
Alternative Phone No	OFFICE-83390380

### Vehicle Particulars

Manufacturer	BMW
Model	X3-2.0 (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5100148780
Cover Note Number	

### Driver

Name of Driver	PE CHEE HIANG (PENG ZHIXIAN)
NRIC No	S7523824Z
Date Of Birth	15/08/1975
Occupation	INDOOR
Date Of Driving Pass	01/12/1993
Driving Experience	25 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-83390380
Fax Number	
Contact Number	OFFICE-83390380
Email Address	DOMSHARPE@YAHOO.COM

Address	191 MEYER ROAD #12-02 SINGAPORE
Postcode	437980
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)	3
Passenger 1	NAME: : HO JENNY (HE QIANYING) GENDER: : FEMALE
Passenger 2	NAME: : JUSTEN PE ZI WEI GENDER: : MALE

#### 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 ATTACHED

#### 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	SKN8728C
Vehicle Make/Model/Colour	BMW 730
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SYED AHMAD BIN SYED IBRAHIM ALTAHIR
NRIC/Passport Number	S6806925D
Contact Number	97888845
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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### ACCIDENT STATEMENT

Date Of Report	28/01/2019 09:16
Date Of Accident	26/01/2019 11:30
Exact Location Of Accident	MOUNTBATTEN ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKN8728C
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SYED AHMAD BIN SYED IBRAHIM ALTAHIR
NRIC No	S6806925D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97888845
Alternative Phone No	OTHERS-97888845

### Vehicle Particulars

Manufacturer	BMW
Model	730LI AT D/AB 4DR SR LED DSC NAV HUD
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	LONPAC INSURANCE BHD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z18VP05018828
Cover Note Number	02/06/2018 TO 01/06/2019

### Driver

Name of Driver	SYED AHMAD BIN SYED IBRAHIM ALTAHIR
NRIC No	S6806925D
Date Of Birth	03/03/1968
Occupation	INDOOR
Date Of Driving Pass	17/06/1985
Driving Experience	33 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97888845
Fax Number	
Contact Number	OTHERS-97888845
Email Address	NOEMAIL

Address 2 JALAN HUSSEIN SINGAPORE 419394

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?

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 with attach.

#### 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 SKM380D

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)

## Accident Sketch Plan Pg. 1

### 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:

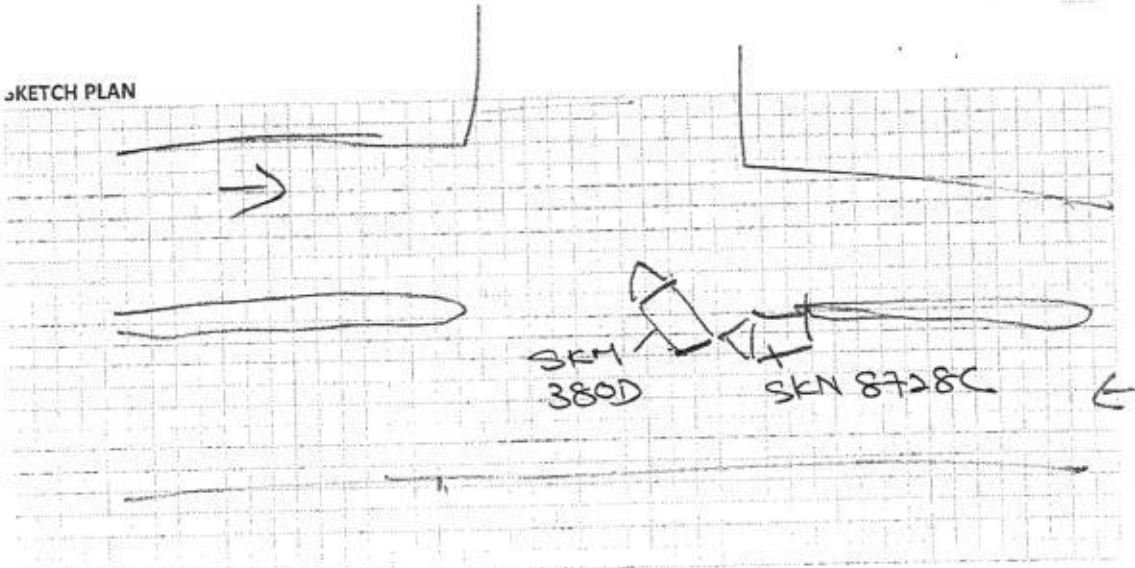
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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



# Accident Sketch Plan Pg. 1

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The vehicle in front suddenly made a right turn abruptly. I tried to brake but was too late to avoid a collision.

INSURER:

VEHICLE:

DOA:

CLAIM TYPE:

WORKSHOP:

## DECLARATION

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

Policyholder's Signature

Date & Time:

26/01/2019 5:15pm

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S6806925D



SYED AHMAD BIN SYED  
IBRAHIM ALTAHIR

سید احمد بن سید ابراهيم - صابر

Race

ARAB

Date of Birth

03-03-1968 M

Country of Birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: S6806925D

Holder: SYED AHMAD BIN SYED IBRAHIM ALTAHIR

Issue Date: 03 Mar 1968

Valid Date: 11 Feb 2004

001116185C



2789076

NRIC No. S6806925D



Blood Group

O+

Date of issue

01-02-1986

2 JALAN HUSSEIN  
SINGAPORE 419394

NRIC No. S6806925D

Date: 09/04/2016

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

PASS DATE

Class 2B	Motorcycles not exceeding 200 cc	17 Feb 1992
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	17 Jun 1985
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	31 Jul 1989

NP 428A






**LONPAC INSURANCE BHD** (S98FC5635C)

(Incorporated in Malaysia)

 Singapore Office: 300, Beach Road #17-04/07, The Concourse, Singapore 189555.  
 Tel: (65) 6250 7388 Fax: (65) 6296 3767 Website: www.lonpac.com.sg

GST Reg No.: F0-0005635-C

MDI

## CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CAP 189) REPUBLIC OF SINGAPORE.  
 MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES 1960 (REPUBLIC OF SINGAPORE).  
 ROAD TRANSPORT ACT 1987 (MALAYSIA).  
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA).

Certificate No. : Z18VP05018828

Type of Cover : COMPREHENSIVE

1. Index Mark and Vehicle Registration Number BMW 730 3.0  
- SKN8728C
2. Name of Policy Holder SYED AHMAD BIN SYED IBRAHIM ALTAHIR
3. Effective Date of the Commencement of Insurance for the purpose of the Act 02/06/2018
4. Date of Expiry of the Insurance 01/06/2019
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  
 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 USED FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

Excess : S\$ 500.00 (SECTION 1) INSURED / NAMED DRIVERS  
 S\$ 3,500.00 (SECTION 1) UNNAMED DRIVERS  
 S\$ 3,000.00 (SECTION 1) ADDITIONAL EXCESS FOR ELDERLY OR YOUNG AND/OR INEXPERIENCED DRIVERS  
 S\$ 100.00 WINDSCREEN EXCESS

LONPAC'S AUTHORISED WORKSHOPS

Condition : ACCIDENT REPAIRS AT LONPAC'S AUTHORISED WORKSHOPS

\* Limitations rendered inoperative by Section 95 of the Road Transport Act 1987 (Malaysia) or Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap 189) Republic of Singapore are not included under heading.

I/WE hereby certify that this covering Note is issued in accordance with the provisions of Part IV of the Road Transport Act 1987 (Malaysia) and Motor Vehicles (Third-Party Risks and Compensation) Act (Cap 189) Republic of Singapore.

H.P. Owner : TOKYO CENTURY LEASING (SINGAPORE) PTE LTD

 CHIEF EXECUTIVE  
 (Singapore Branch)

 User ID: MRMLP0014  
 Date Issued: 01/06/2018

Accident Photo



Accident Photo



Accident Photo



Accident Photo



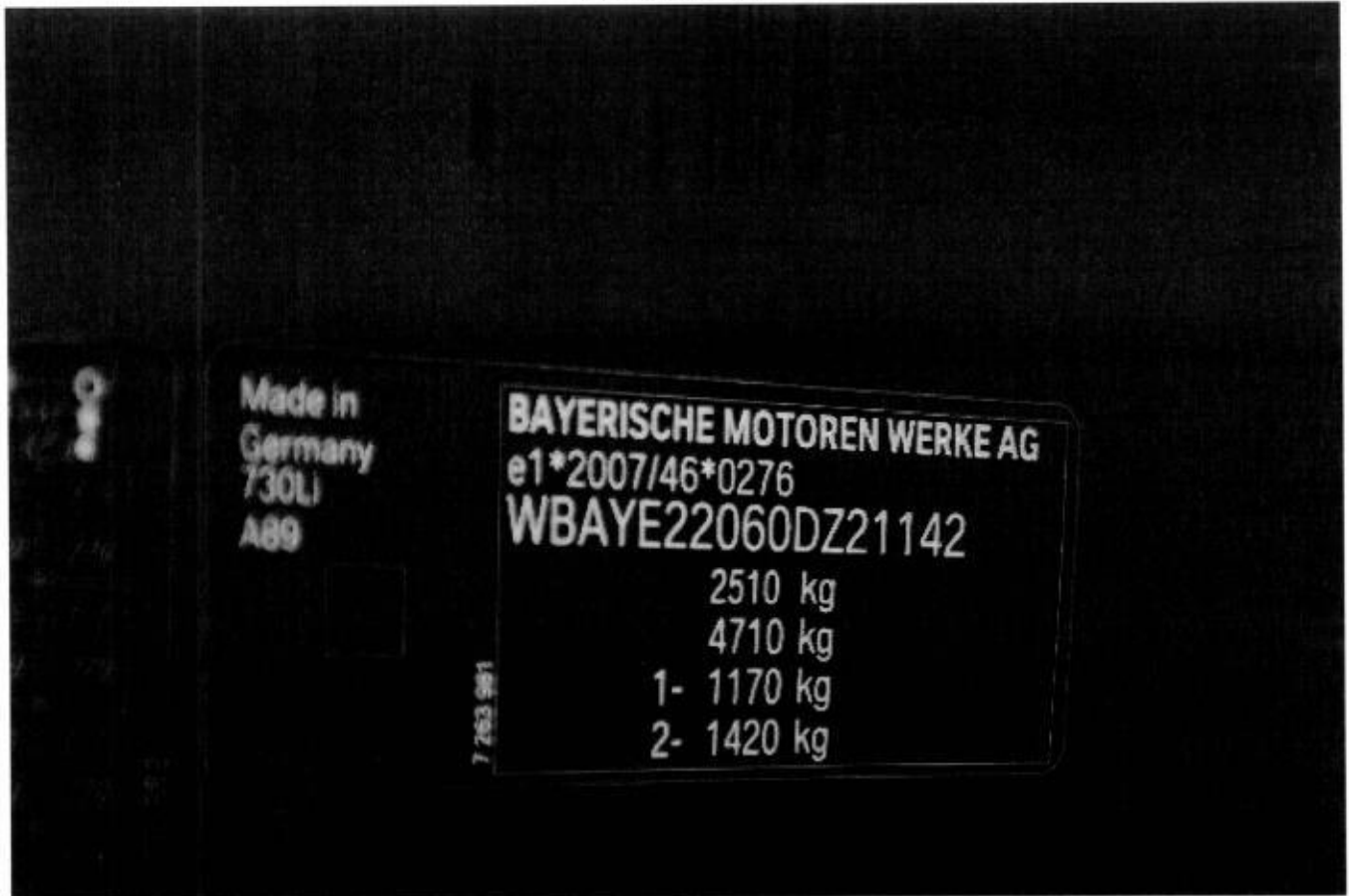
Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo

