

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	26/03/2019 14:15
Date Of Accident	23/03/2019 06:15
Exact Location Of Accident	KUALA LUMPUR TWDS PULAU REDANG AT KM395.1 LPT2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDM43K
Insured/Policyholder	
Name Of Registered Owner	MR LIM WOON CHENG ANTHONY
NRIC No	S0016386D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96215355
Alternative Phone No	OFFICE-96215355

Vehicle Particulars

Manufacturer	BMW
Model	135I
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?	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	DMPCSN3007391900
Cover Note Number	-

Driver

Name of Driver	MR LIM WOON CHENG ANTHONY
NRIC No	S0016386D
Date Of Birth	30/04/1952
Occupation	INDOOR
Date Of Driving Pass	11/05/1972
Driving Experience	46 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96215355
Fax Number	
Contact Number	OFFICE-96215355
Email Address	NOEMAIL

Address	6 GEYLANG EAST AVE 2 #04-01
Postcode	389756
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	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	BLR1256 (PRIVATE CAR)
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	YES
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: : PANG YOOT LIN GENDER: : FEMALE
Passenger 2	NAME: : TAN JIE YEE GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	TRAFIK H/TERENGGANU
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

I WAS TRAVELLING ALONG KUALA LUMPUR TWDS PULAU REDANG AT KM395.1 LPT 2, THE ROAD HAS NO STREET LAMP. WHEN I SAW A VEH STOP ON MY LANE TO AVOID COLLISION I SWERVED TO THE LEFT, BUT MY VEH RIGHT SIDE STILL GRAZED ONTO THE VEH RIGHT FRONT PORTION. AFTER THE INCIDENT, I REALIZED THE VEH WAS LOST CONTROL HIT THE ROAD BARRIER AND SPIN ONTO MY LANE.

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	BLR1256
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)

DETAILS OF INJURED PERSON 1	
Name	MR LIM WOON CHENG ANTHONY
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SDM43K
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Accident Sketch Plan

SKETCH PLAN


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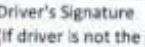
8. Consent under the Personal Data Protection Act (PDPA)

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

SKETCH PLAN

A = SDM 43 K
B = BLR 1256

Kuala Lumpur tuds Pulau Redang
at KM 395.1 LPT 2

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to Statement

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.:

POLICE REPORT

Salinan Repot Polis

Page 1 of 1



POLIS DIRAJA MALAYSIA REPOT POLIS

Balai : TRAFIK H/TERENGGANU Pegawai Penyiasat : R128379
Daerah : HULU TERENGGANU
Kontinjen : TERENGGANU
No Repot : TRAFIK H/TERENGGANU/000332/19
Tarikh : 23/03/2019
Waktu : 0904 AM
Bahasa Diterima : B. Malaysia

Butir-butir Penerima Repot

Nama : NURUL IZZATI BINTI MOHAMAD No Personel : R204892 Pangkat : KONST/P
Butir-butir Jurubahasa (Jika Ada)
Nama : --- No K/P (Baru) : --- No Polis/Tentera : ---
No Paspot : --- Bahasa Asal : ---
Alamat : ---

Butir-butir Pengadu

Nama : LIM WOON CHENG ANTHONY
No K/P (Baru) : --- No Polis/Tentera : --- No Paspot : E5231018L
No Sijil Beranak : ---
Jantina : Lelaki Tarikh Lahir : 30/04/1952 Umur : 66 tahun 10 bulan
Keturunan : Cina Warganegara : Malaysia
Pekerjaan : BERNIAGA
Alamat Tempat Tinggal : 6 GELANG EAST AVE 2 04.01 SIMSVILLE SINGAPORE , 389756
Alamat Ibu/Bapa : ---
Alamat Pejabat : ---
No Tel (Rumah) : 0162050539 No Tel (Pejabat) : --- No Tel (HP) : 0296215355
Emel : ---

Pengadu Menyatakan:-

PADA 23/03/2019 JAM LEBIH KURANG 0200 PAGI SAYA MEMANDU M/KAR NO PENDAFTARAN SDM 43K JENIS BMW 135i DARI KUALA LUMPUR MENUJU KE PULAU REDANG BERSAMA KELUARGA SAYA. PADA JAM LEBIH KURANG 0615 PAGI APABILA SAMPAI DI KM 395.1 LPT 2(BUKIT BESI-AJIL), KETIKA ITU KEADAN JALAN MASIH GELAP, TIBA-TIBA ADA SEBUAH M/KAR NO PENDAFTARAN BLR1256 JENIS PROTON SAGA 1.3 YANG TERBABAS DI KANAN JALAN, OLEH KERANA JARAK YANG DEKAT SAYA CUBA MENGELAK TETAPI M/KAR YANG SAYA PANDU BERGESEL JUGA DENGAN M/KAR TERSEBUT. DALAM KEJADIAN INI, SAYA DAN KELUARGA TIDAK MENGALAMI SEBARANG KECEDERAAN MANAKALA M/KAR YANG SAYA PANDU MENGALAMI KEROSAKAN TERUK PADA BAHAGIAN BODI SISI KIRI, TAYAR DAN RIM HADAPAN SEBELAH KANAN ROSAK, CERMIN SISI KANAN TERCABUT, FENDER SEBELAH KANAN KEMEK, MUDGUARD HADAPAN SEBELAH KANAN ROSAK, LAMPU HADAPAN SEBELAH KANAN ROSAK, BUMPER HADAPAN SEBELAH KANAN CALAR, BONET HADAPAN ROSAK, KESEMUA AIRBAG ROSAK, PINTU DEPAN DAN BELAKANG SEBELAH KANAN CALAR DAN LAIN-LAIN KEROSAKAN BELUM DAPAT DIPASTIKAN LAGI. SEKIAN LAPORAN SAYA.

Tandatangan Pengadu:

Tandatangan Jurubahasa(Jika ada) :

Tandatangan Penerima Repot:

Salinan Yang Disahkan

ID Pencetak | Tarikh @ Masa Cetak

: R204892 | 23/03/2019 09:26:15 AM

NOR SUZIELAWATI BT ARIFFIN (INSP)
PEG. PENYIASAT TRAFIK
IPD HULU TERENGGANU

DRIVING DOC

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0016386D



Name
LIM WOON CHENG ANTHONY
林文清

Race
CHINESE

Date of Birth
30-04-1952

Country/Place of Birth
SINGAPORE

Sex
M




REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number: **S0016386D**
Name: **LIM WOON CHENG ANTHONY**

Birth Date: **30 Apr 1952**
Issue Date: **05 Apr 2003**



5531776



NRIC No. **S0016386D**



Date of Issue
13-11-2015

Address
**6 GEYLANG EAST AVENUE 2
#04-01
SINGAPORE 389756**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

Class	Description	Valid Until
Class 2B	Motorcycles <= 200 CC	13 Dec 1973
Class 2A	Motorcycles between 201 CC and 400 CC	13 Dec 1973
Class 2	Motorcycles > 400 CC	13 Dec 1973
Class 3	Motor cars <= 2000 kg G.V.W. <= 7 passengers, exclusive of the driver; and motor tractoredrives <= 2500 kg	11 Mar 1972

S / No. 6000265353

NR 439A



Accident Photo



Accident Photo



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