

## 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	23/03/2019 11:49
Date Of Accident	20/03/2019 07:00
Exact Location Of Accident	BKE TOWARDS SINGAPORE CUSTOM
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDF8896A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LEE HAN SIANG JOSEPH
NRIC No	S7318896B
Email Address	JOSPEH.LEE@AUTOGERMANY.SG
Mobile Phone No	(LOCAL) +65-90606866
Alternative Phone No	OFFICE-90606866

### Vehicle Particulars

Manufacturer	CHEVROLET
Model	ORLANDO-1.4 (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	ECICS LIMITED
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MPC18A00141000
Cover Note Number	

### Driver

Name of Driver	LEE HAN SIANG JOSEPH
NRIC No	S7318896B
Date Of Birth	04/06/1973
Occupation	INDOOR
Date Of Driving Pass	25/11/1994
Driving Experience	24 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90606866
Fax Number	
Contact Number	OFFICE-90606866
Email Address	JOSPEH.LEE@AUTOGERMANY.SG

Address	65 KALLANG BARU #07-345
Postcode	330065
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)	3
Passenger 1	NAME: : LE THI MY GENDER: : FEMALE
Passenger 2	NAME: : LEE SHENG FATT 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 REPORT 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	SJN9380B
Vehicle Make/Model/Colour	TOYOTA
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)

# Sketch Plan

## SKETCH PLAN

BKE Towards Custom

(A) SDF 8896A  
(B) SJN 9380B

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling on BKE towards Singapore Customs traffic was slow. The car in front of me stop. I also stop and the car behind me, bump into my car rear bumper.

## DECLARATION

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

X   
Policyholder's Signature  
Date & Time

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

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

## Sketch Plan #2

### SKETCH PLAN

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#### B. 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 the 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.:



“欧洲红魔”  
斯科世界杯

的是，比牙  
中，惨遭瓦  
本地时间明  
主场迎战  
重拾信心。  
最后一仗马  
遭瑞士连克  
rtinez)领军

盛，包括  
巴特舒瓦  
托特纳姆后  
onghen)和  
巴塞罗纳  
皇家马德里

NOV 2018

10

MALAYSIA IMMIGRATION  
BANGUNAN SULTAN ISKANDAR  
VISIT PASS  
Reg. 11, Imm. Regs., 63  
**20 MAR 2019**  
Permitted to enter and remain  
in West Malaysia and Sabah  
for thirty (30) days  
on social visit only from  
the date shown above.

22 MAR 2019

10 VISAS





Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



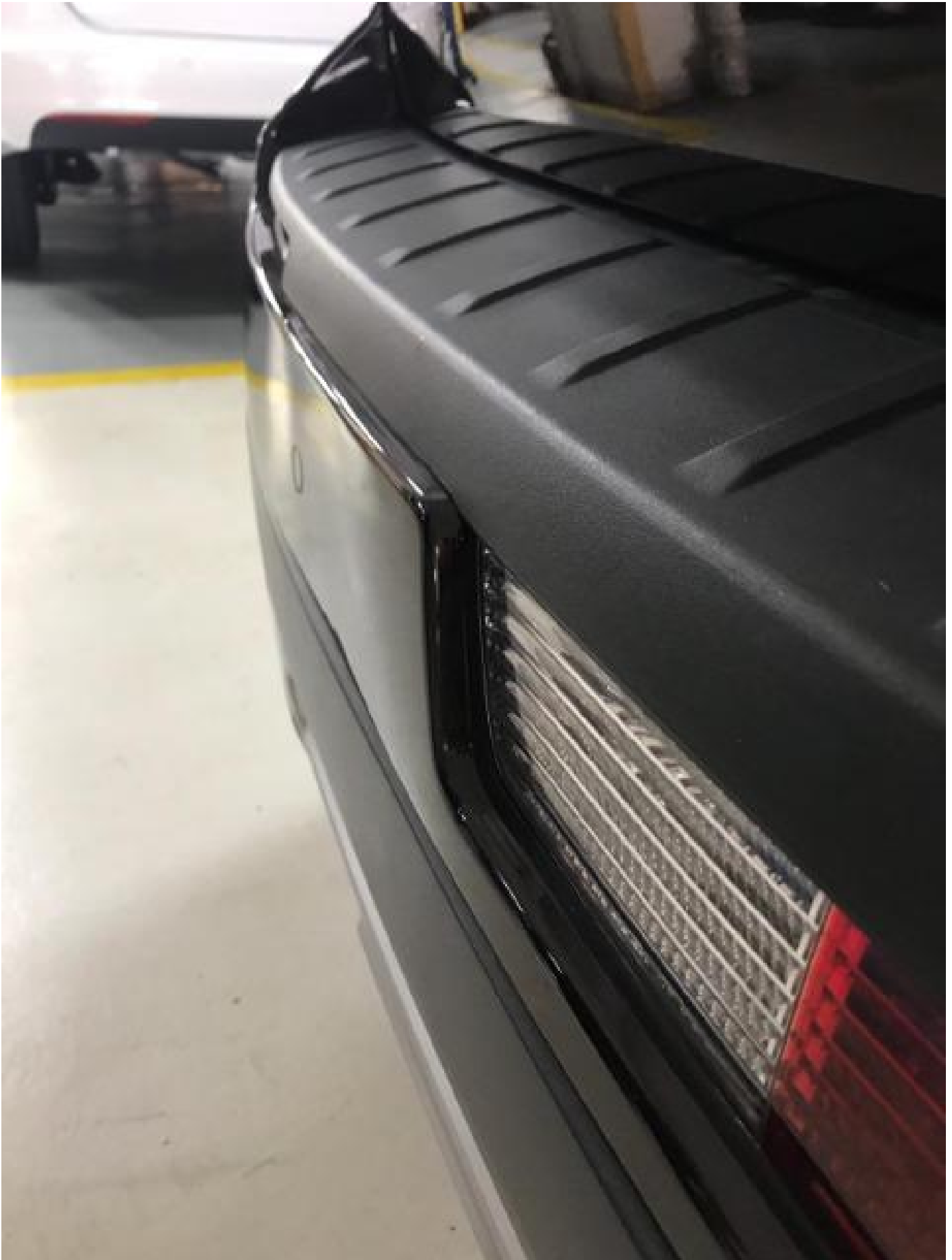
Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Driving License



# Identification Card







## CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risk Compensation) Act (Chapter 199)  
Motor Vehicles (Third-Party Risk and Compensation) Rules, 1962  
Road Transport Act, 1987 (Malaysia)  
Motor Vehicles (Third-Party Risk) Rules, 1995 (Malaysia)

**CHEVROLET  
WORKSHOPS**

MOTOR  
COMPREHENSIVE  
ORIGINAL

CERTIFICATE NO	MPC1806010001	Chassis No	KLJFA598M1K02400
Agency Name	ALPINE INSURANCE AGENCY PTE LTD	Engine No	A14NCT14020023
Agency Code	9000062		
1. Make, Make and Registration Number of Vehicle <b>SEPRIMA</b>			
2. Name of Policyholder <b>LEE HAN AUNG JOSEPH</b>			
3. Period of Insurance (both from inclusive) <b>16 April 2018     to 16 April 2019</b>			
4. Nature of Classes of Risks covered under:			
(a) The Policyholder and all named drivers included under the policy; (b) Any other person who is driving on the Policyholder's vehicle with his permission.			
PROVIDED THAT THE POLICYHOLDING IS PROVIDED 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 ORDER OF ANY DEPARTMENT OR REGULATION IN THAT RESPECT FROM DRIVING THE MOTOR VEHICLE.			
5. Exclusions/Conditions			
The Insured, driver(s) and named persons are for the Policyholder's business. The policy does not cover use for hire or reward, tuition, driving test, race, parking, reliability trial, speed-testing, and savings or goods other than samples in connection with any trade or business at the first use purpose in connection with the Motor Vehicle.			
6. EXCESS APPLICABLE			
SECTION 1 - FIRE AND THEFT		RM 100.00	
SECTION 2 - THEFT OF PARTS		RM 1,000.00	
ADDITIONAL EXCESS OTHER THAN WAGES DRIVER:			
SECTION 3 - AGE 40-49, AGE 50 OR DRIVING EXP < 3 YEARS		RM 5,000.00	
7. How Purchase Consideration <b>CASH</b>			
Signed and sealed off EC/CS Limited  Chief Executive Officer			

### Important Notice:

- (i) Policyholders are hereby warned that it shall be unlawful for any person to use or cause or permit any other person to use a motor vehicle without a valid licence under the Act.
- (ii) On the date of renewal of policy, Policyholders must surrender all insurance papers and valid policy for Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risk and Compensation) Act (Chapter 199).
- (iii) The Certificate of Insurance and the Policy will cease to be valid once the motor vehicle has been sold or transferred.
- (iv) The Statutory Declaration, Warranty or Premium Payment Warranty found in the Policy must be complied with otherwise there would be no liability under the Policy and Certificate of Insurance.