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Owner / Driver: (13 / 000-12	Tel:)
Policy No: () Per	riod: () Cover Type: (1
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Insured/Driver Liability: (%) [Note-Est Status (WO): N: 0)-20%; P: 21-79%.	P: 80-100%]	
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1) Apply for Transport Allowance ()/C	Courtesy Car ()			
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Mobile Number

EMail Address

Fax Number Contact Number

- 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 witholding 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.
- 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	01/04/2019 16:34	
Date Of Accident	30/03/2019 16:00	
Exact Location Of Accident	ALONG JURONG WEST STREET 51	
Country/State of Loss	SINGAPORE	
	ETAILS OF OWN VEHICLE	
Vehicle Registration Number	SMG4337L	
Insured/Policyholder		
Name Of Registered Owner	WOON JIA LI	
NRIC No	S8525129E	
Email Address	WOONJIALI@GMAIL.COM	
Mobile Phone No	(LOCAL) +65-88238944	
Alternative Phone No	OTHERS-88238944	
Vehicle Particulars		
Manufacturer	MERCEDES-BENZ	
Model	C180	
Exact Purpose for which vehicle was being used at time of accident	PRIVAYTE 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	LIBERTY INSURANCE PTE LTD	
Type Of Coverage	COMPREHENSIVE	
Fleet Policy	NO	
Policy Number	SI19V00575/VPE/R00	
Cover Note Number		
Driver		
Name of Driver	WOON JIA LI	
NRIC No:	\$8525129E	
Date Of Birth	14/08/1985	
Occupation	INDOOR	
Date Of Driving Pass	26/03/2009	
Driving Experience	10 YEARS AND 0 MONTHS	
Gender	FEMALE	

(LOCAL) +65-88238944

WOONJIALI@GMAIL.COM

OTHERS-88238944

Address

BLK 92 DAWSON ROAD

#41-30

Postcode

141092

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

4

Insurance Company of Driver's Own Vehicle

2

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?

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

NO

ambulance?

YES

Was any other material or property damaged?

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

PLEASE REFER TO SKETCH PLAN

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

SGV1362A

Vehicle Make/Model/Colour

HONDA JAZZ

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

Contact Number

MOK WAI YEE

NRIC/Passport Number

S7573293G 96669713

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- The 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.
- 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 parmitted 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:
 - 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:
 - 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 polityholder)

Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No.

SKETCH PLAN BLONG FURTH WHIT

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I were stationery at give way sign on litter law.
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the rear. We alighted with money our curs to
and took pictures and later we exchange purticipus
The driver the Mot worted to composate me and
later decline and repairs was to much for her
to shoulder.
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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:

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SINGAPORE ACCIDENT STATEMENT

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ACCIDENT STATEMENT 1 4 10 Tours 30/3/19 16-Wpm and Location Company Jury west 3+51

> DETAILS OF OWN VEHICLE SM 64337 L

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Name Of Registere: Corner (Contrayor)

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CONTRACTOR DE VENE

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$8525129E





Name

WOON JIA LI







Race

CHINESE

Sex

Date of birth

14-08-1985

F

Country of birth

SINGAPORE









NRIC No. S8525129E

Date of issue

22-10-2007

APT BLK 92 DAWSON ROAD #41-30 SINGAPORE 141092

NRIC No: S8525129E

Date: 15/10/2015

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S 8 5 2 5 1 2 9 E

Name:

WOON JIA LI

Birth Date: 14 Aug 1985

Issue Date: 26 Mar 2009



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIFS)

PASS DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive 26 Mar 2009 of the driver; and other motor vehicles =< 2500kg







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Certificate of Insurance

www.libertyinsurance.com.sq

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)

Name of Policyholder:

WOON JIA LI

Date of Issue:

Effective Date of Commencement:

08 Jan 2019

08 Jan 2019 15:25

Registration No.:

SMG4337L

Chassis No.:

WDD2040452A317550

Certificate No.:

SI19V00575/ VPE / R00

Date of Expiry:

07 Jan 2020 23:59

Type of Certificate:

MX1

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 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.

Limitations as to use:

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

The Policy does not cover:

A) Use for hire or reward.

B) Use for racing, pace-making, reliability trials or speed-testing.

C) Use for the carriage of goods (other than samples) in connection with any trade or business.

D) 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.

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

> For and on behalf of LIBERTY INSURANCE PTE LTD Approved Insurers

For Information Only:

Coverage(s):

Comprehensive, Unlimited Windscreen

Sum Insured:

MARKET VALUE AT THE TIME OF LOSS

Excess

Section I - Named Drivers S\$700, Section I - Unnamed Drivers S\$1200, Additional Excess for

Young, Elderly & Inexperienced Drivers S\$3000, Windscreen Excess S\$100

Name of Finance Company:

Name of Producer:

HAN CHI TENG (A7583-2)