

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	02/04/2019 16:03
Date Of Accident	17/03/2019 09:35
Exact Location Of Accident	BEDOK SOUTH AVE 1 TOWARDS NEW UPPER CHANGI RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGH8310C
Insured/Policyholder	
Name Of Registered Owner	TAN SEE LIN
NRIC No	S0061101H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97331101
Alternative Phone No	OTHERS-97331101

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5071975020-03
Cover Note Number	

Driver

Name of Driver	LOW KAM SENG
NRIC No	S0027282E
Date Of Birth	05/05/1953
Occupation	INDOOR
Date Of Driving Pass	06/01/2015
Driving Experience	4 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97331101
Fax Number	
Contact Number	OTHERS-97331101
Email Address	NOEMAIL

Address	BLK 28 ALEXANDRA ROAD #32-12
Postcode	158744
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	NO COLLISION
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)	2
Passenger 1	NAME: : WIFE GENDER: : FEMALE

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 18/03/2019 I RECEIVED A LETTER FROM NTUC SAYING THAT I HAVE BEEN INVOLVE IN AN ACCIDENT ON 17/03/2019 WHICH I REALLY DID NOT KNOW ABOUT ANY ACCIDENT THAT ALL

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	SHC3227H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

- Nature Of Damage
- No. Of Passenger (Including Driver)

SKETCH PLAN


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7. 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 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.:

SKETCH PLAN

UNKNOWN
XUV COLLISION

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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.:

08/10/2019
Rashid Umar

Claim Handling

Accident #17/1836423

Policy No.	SGT1870020-03	Vehicle No.	SGH8310C	GST Registration No.	
Certificate No.				Policyholder NRIC	SG081101H
Policyholder Name	TAN SEE LIN	Driver Type	Third Party, Fire & Theft	Locking	0
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)		Contact No.(Home)	
Contact No.(Mobile)	NA	Special Remarks		eCode	NA
Email Address		TCA	No Yes	eCode Reason	
43K	No Yes	NCD Settlement(%)	0%	Private Hire	Not available
NCD Protection	No				
Accident Details					
Report Date	18/02/2019 18:24	Accident Report Within 24 hrs	Yes	Accident Type	Unknown
Date of Accident	17/03/2019	Time of Accident Incident	00:45	Country of Accident	Singapore
Reporting Car's		Orange Form		ICH No.	
Accident Location	NA				
Excess					
Own damage Excess	0.00	Additional Excess	0	Windscreen Excess	0.00
Uninsured Driver Excess	0.00	Outside Singapore OD Excess	0.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		
Benefits					
GST Registered Information					
GST Registered	No	GST Registration Date		GST Status verified	No
GST Registration No.					
Modification History					

Policyholder Mailing Address

Address 1	304 JALAN EUNDO	Address 2	#05-40 21-HARITAT	Address 3	SINGAPORE 410348
Address 4		Address Type	Singapore address	Post Code	410348
Unit No.		Related Policy Number	SGT1870020-03		
GT Driver Info					
Driver Name		Driver Type		Driver DOB	
Uninsured Driver Name		Driver NRIC		Driving Experience	
Register Date of Driver License		Driver Age		Contact No.(Office)	
Contact No.(Mobile)		Contact No.(Office)		Address 3	
Address 1		Address 2		Post Code	
Address 4		Address Type	Foreign address		
Unit No.				Driver Insurer Company	
Does he own a Singapore registered car?	Yes No	Driver Vehicle No.			

Modification history

Claim 002 **NEW**

Claim Type *

Contact No.(Mobile)

Email Address

Claim Description

Preferred Workshop	Insured Liability	Not at Fault	GIA report	Received
Submittal No.	Referenced	Referenced Workshop, Name unknown		
Have Registered	Referenced			

Report Taken By

Press OK later

GD-NA	Insured Name	TAN SEE LIN	Insured NRIC	SG081101H
07522619	Contact No. (Home)	84482352	Contact No. (Office)	
01	Vehicle Number	SGH8310C	Vehicle Number	SHC3227H
01	Vehicle Number	SGH8310C	Vehicle Number	SHC3227H
01	Vehicle Number	SGH8310C	Vehicle Number	SHC3227H

02/04/2019 18:26	Claim Close Date		Date Received	02/04/2019 00:00
0000000000				

Save Submit

Attachment

Accident No.	17/1836423	Claim No.	002																																
Last Doc. Received	Yes No	Upload Date	02/04/2019 18:27																																
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Save Message

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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 02 Apr 2019 16:26	NRIC/ Driving License	Normal	NRIC/ Driving license 2019-4-2
Video List				
Uploaded By/Date	Folder Date	File Name	Source	Action
Display in New Window Scan and uploading				



**SINGAPORE
POLICE FORCE**

Traffic Police
10 Ubi Avenue 3
Singapore 408865
Tel +65 6547 0000
www.police.gov.sg

Date: 25 MAR 2019



RX111722625SG

00006

LOW KAM SENG
BLK 28 ALEXANDRA VIEW UNIT 32-12
SINGAPORE 158744

Our Ref: S0027282E



Dear Sir / Madam

**RESULT OF DIPS 1 RETRAINING COURSE AND
SUSPENSION OF DRIVING LICENCE**

We are pleased to inform you that you have passed your DIPS 1 retraining course on 22 Mar 2019. Your suspension period has been reduced from 12 weeks to 01 weeks.

2 Please surrender your driving licence to the Licensing Branch at Traffic Police on weekdays from 8.30am to 1.00pm and from 2.00pm to 5.00pm within 14 days from the date of this letter.

3 You are reminded that driving under suspension is a serious offence that carries a fine not exceeding \$5,000 or an imprisonment for a term of 12 months or both.

Yours faithfully

**HEAD TESTING AND LICENSING BRANCH
TRAFFIC POLICE**

This is computer generated and does not require a signature.

Bedok St. Ave 1 Road
New Upp Chang Rd.

Our Ref: MT/CA/TP/059/1036423-001/CY/VU

18 Mar 2019

TAN SEE LIN
204 JALAN EUNOS
#05-49 EUHABITAT
SINGAPORE 419546

Ms Khim

Dear Policyholder

CLAIM NUMBER: MT/1036423-001

ACCIDENT INVOLVING SGH8310C / SHC3227H on 17 Mar 2019

0945400 EDC

We would like to inform you that a claim for S\$1,206.48 has been made against your motor policy.

We need to respond to this claim within seven days. We would appreciate it if you could provide us:

- additional evidence, if any, such as accident photographs, video clips or witnesses' statement
- information on whether you are making a claim against the other party

We wish to remind you that under this motor insurance policy, you are required to report the accident, whether there is damage or not, within 24 hours or the next working day after the accident at any of our reporting centres. If you have not done so, please report this accident to us immediately. Otherwise, we regret to inform you that we may not be able to handle the claim on your behalf.

You need not respond to us if you have already reported the accident and do not have any further information.

We wish to remind you not to admit liability, make offer or payment without informing us and getting our approval. If you are making a claim against another party or have instructed your workshop or lawyers to act on your behalf, please update us on the developments. This is important as any liability undertaken by you may have serious implication on the third party claim against you, and may result in us not being able to handle the claim for you.

If you have any queries, please contact our Customer Service Officers at 6788 6616 or email us at motor@income.com.sg.

Yours sincerely



Goh Peng Hong
Manager
Motor Insurance

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0027282E



Name

LOW KAM SENG

刘金成

Race

CHINESE

Date of birth

05-05-1953

Sex

M

Country/Place of birth

SINGAPORE

Land Transport Authority

PDVL/TDVL
33 BBB 88888
253904

VOCATIONAL LICENCE
Licence No: S0027282E
Name: LOW KAM SENG

Please visit www.lta.gov.sg to check the status of this vocational licence

5525552



NRIC No: S0027282E



21-08-2015

BLK 28 ALEXANDRA VIEW #32-12
SINGAPORE 158744

NRIC No: S0027282E

Date: 12/04/2018

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
12	TAXI VL	11/10/2018



Certificate of Insurance

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)

Certificate Number: 5071975020-03

Cover : Third Party, Fire & Theft

- | | |
|---|---------------------|
| 1. Index mark and Registration Number of Vehicle | : SGH8310C |
| Chassis Number | : MR053ZEC107122456 |
| 2. Name of Policyholder | : TAN SEE LIN |
| 3. Effective Date of Insurance | : 23 Jun 2018 |
| 4. Expiry Date of Insurance | : 22 Jun 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#

- (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
(b) Use for racing, pace-making, reliability trial 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 Vehicle (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.

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: N/A
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
PRIMARY DRIVER	: TAN SEE LIN
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: LIEN CHONG ENTERPRISES PTE LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : HUANG GUOQING TERRY (00000573375)

Date of Issue : 20 Jun 2018 18:38 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive