

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 17:46
Date Of Accident	01/04/2019 20:25
Exact Location Of Accident	ALONG NEW UPPER CHANGI ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGK5653S
Insured/Policyholder	
Name Of Registered Owner	LEE BEE HONG
NRIC No	S6845254F
Email Address	CLARAAMK@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97726007
Alternative Phone No	OTHERS-97726007

Vehicle Particulars

Manufacturer	TOYOTA
Model	YARIS
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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	MT105222
Cover Note Number	

Driver

Name of Driver	LEE BEE HONG
NRIC No	S6845254F
Date Of Birth	28/12/1968
Occupation	INDOOR
Date Of Driving Pass	25/03/1998
Driving Experience	21 YEARS AND 0 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97726007
Fax Number	
Contact Number	OTHERS-97726007
Email Address	CLARAAMK@GMAIL.COM

Address	BLK 424B YISHUN AVENUE 11 #13-272
Postcode	762424
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?	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: : FRIEND 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

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	SMA6241Y
Vehicle Make/Model/Colour	MERCEDES BENZ
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SEO EUN JUNG
NRIC/Passport Number	S6985848A
Contact Number	97969020
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

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:

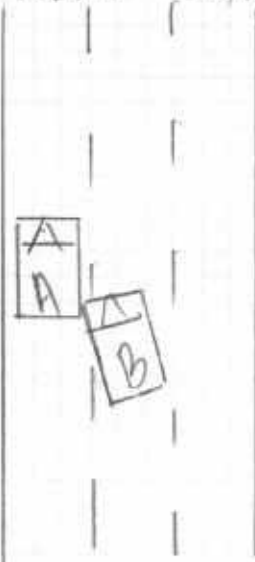
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

Along New Upper Changi Road

A) SGK 5653S

B) SMA 6241Y



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along New Upper Changi Road on the left most lane and the car filter into my lane without seeing and hit my car on the driver side

DECLARATION

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

Policyholder's Signature
Date & Time: 02/04/19

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

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

ACCIDENT STATEMENT

ACCIDENT DATE: (01/04/2019) (DD/MM/YYYY), TIME: (20:25) (HH:MM)

LOCATION: New Upper Changi Road

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SG1C 5653 S
 b) INSURANCE COMPANY: Tokio Marine
 c) POLICY NUMBER:
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: Toyota Yaris
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: Private use
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: LEE BAE HONG (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S6846254F CONTACT: 97726007
 c) ADDRESS: Blk 424B Yishun Ave 11 # 13-272 Singapore 762484

* CONTINUE TO 3. IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: As above (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: CONTACT:
 c) ADDRESS:

* d) DATE OF BIRTH: (28/12/1968) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 25-03-1998

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Owner

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION:

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SMA 6241 Y MODEL: Mercedes
 b) DRIVER'S NAME: Leo Sun King
 c) NRIC/FIN/PASSPORT: S6985848A CONTACT: 97969020

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: MODEL:
 e) DRIVER'S NAME:
 f) NRIC/FIN/PASSPORT: CONTACT:

Email = claracmk@gmail.com
 VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S6845254F



LEE BEE HONG

李美凤

CHINESE

Date of Birth

28-12-1968

Country of Birth

SINGAPORE

Sex

F

S6845254F

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S6845254F

Name

LEE BEE HONG

Birth Date 28 Dec 1968

Issue Date 29 Jul 2003



1000712573K



NRIC No. S6845254F



Weight Group

A+

Date of issue

16-02-1992

APT BLK 424B YISHUN AVENUE 11 #13-272
SINGAPORE 762424
NRIC No: S6845254F

Date: 03/10/2017

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

Class 3

Motor Cars and Motor Tractors of weight of which unladen does not exceed 2500 kilograms

PAS

25 Mar 1998



Licence No. S6845254F

NP 425A



TOKIO MARINE
INSURANCE GROUP

A member of the
Tokio Marine Group

Certificate of Insurance

FORM MX1

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)

Policy No.: MT105222 (Private Car)

- | | | |
|--|-----------------------|--------------------------------|
| 1. Index Mark and Registration Number of Vehicle | SGK5653S | Chassis No.: MR054HY9104017244 |
| 2. Name of Policyholder | LEE BEE HONG | |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 17/08/2018 (00:00:00) | |
| 4. Date of Expiry of Insurance | 16/08/2019 | |
| 5. Persons or Class 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 to that effect 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.

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 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.

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

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost/destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Account No: 0774DDA

Insurance Plan:	Third Party Fire & Theft
Limit for total loss or theft:	Prevailing Market Value
Financial Interest:	NIL

TOKIO MARINE INSURANCE SINGAPORE LTD.

Authorised Signature

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: MIA119042994 Vehicle Registration No: SGK 5653S
Name (as shown in NRIC): LEE BEE HONG NRIC/FIN/Passport No: S6845254F
(*Vehicle Driver / Vehicle Owner) (* Please delete as appropriate)
Address: _____ Singapore ()
Contact (Tel): _____ Mobile No.: 97726007
Email Address: _____
Date of Accident: 01/04/2019 Time of Accident: 20:20
Place of Accident: ALONG NEW UPPER CHONGI ROAD
Insurance Company: TOKIO MARINE

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

TYPE OF COVERAGE IS THIRD PARTY FIRE & THEFT

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name: Lee Bee Hong
NRIC/FIN No.: S6845254F
Date: 03/04/2019