

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	05/04/2019 13:50
Date Of Accident	04/04/2019 19:00
Exact Location Of Accident	AYE TWDS TUAS
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLD5177C
Insured/Policyholder	
Name Of Registered Owner	LEE PAK KEOW
NRIC No	S7733121B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96819836
Alternative Phone No	OFFICE-96819836
Vehicle Particulars	
Manufacturer	HONDA
Model	VEZEL
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3060831802
Cover Note Number	-
Driver	
Name of Driver	LEE PAK KEOW
NRIC No	S7733121B
Date Of Birth	24/11/1977
Occupation	INDOOR
Date Of Driving Pass	29/10/1998
Driving Experience	20 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96819836
Fax Number	
Contact Number	OFFICE-96819836
EMail Address	NOEMAIL

Address	7 LEW LIAN VALE #04-23
Postcode	537019
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	CLOUDY
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?	
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)	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 ATTACHED STATEMENT.

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	YM6507B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	SUBBUKKANNU KANNAN
NRIC/Passport Number	G5938730N
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	


SKETCH PLAN

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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.
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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.

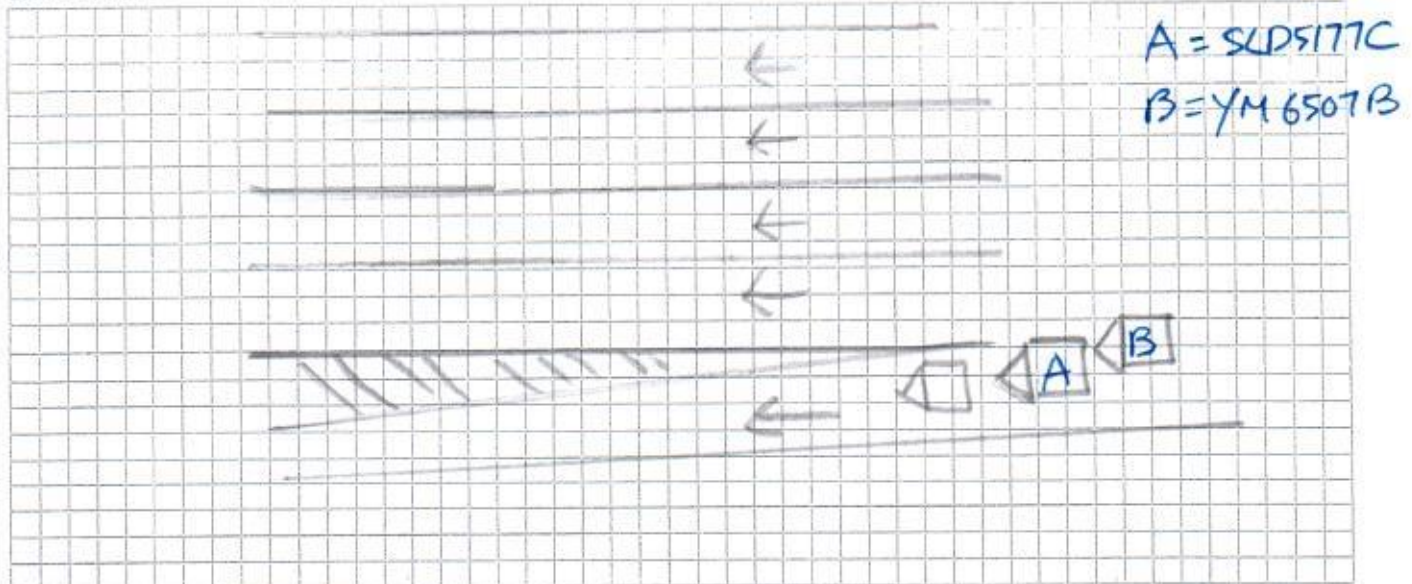

Policyholder's Signature

Date & Time: 5/4/19
1049

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


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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 4/4/19 at 19-00 HRS I was travelling at AYE toward Tuas (Slip Road). I was stopping at the Slip Road due to heavy traffic. Suddenly I feel an impact a m/lorry YM6507B hit onto my rear portion. I quickly came down and take the photo and exchange license. No one was injured

DECLARATION

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

VB

Policyholder's Signature

Date & Time: 5/4/19 1049

Driver's Signature

(If driver is not the policyholder)

Date & Time:

[Signature]

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

AK

Singapore Accident Statement

Date of Accident 4/4/19
Time of Accident 7-00pm (24hr format)
Exact Location Of Accident AYE toward Tuas
Country/State of Loss _____

Details Of Own Vehicle

Vehicle No SLD 5177C
Insured/Policyholder _____
☒ Individual / ☐ Company
Name of Registered Owner Lee Pak Keow
Co Reg No _____
Email Address pakmay@yahoo.com / yvonne.wong@abwin19.com
Mobile No 96819836

Alternative Phone No _____

Vehicle Particulars

Manufacturer Honda Vezel
Model _____

Are you claiming under your own insurance Yes / ☒ No
policy for repair to your vehicle?

If No, Please state action to be taken ☒ TP Claims / ☐ Own Damages / ☐ Reporting Only

Vehicle Category _____

Insurance Company

Name of Insurance Company China Taiping Insurance
Type Of Coverage Comp
Fleet Policy Yes / ☒ No
Policy Number DMPCSN3060831802

Cover Note Number _____

Driver

Name of Driver Lee Pak Keow
NRIC No 57733121B
Date of Birth 24/11/1977
Occupation ☒ Indoor / ☐ Outdoor
Date of Driving Pass 29/10/1998
Gender Female / ☒ Male

Mobile Number 9687 9836
Fax Number —
Contact Number —
Email Address _____
Address _____
Postcode _____

Was driver an employee of the Insured's Company

Yes / ☒ No

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own Vehicle

Nil

Insurance Company of Driver's Own Vehicle

Nil

General Information of the Accident

Type of Accident _____

Weather Conditions _____

Road Surface _____

Other Information

Was any foreign vehicle involved in this accident? Yes / ☒ No

Was any body injured in the Accident? Yes / ☒ No

Was any other material or property damaged? ☒ Yes / No

Was there any video captured by Car Camera? Yes / ☒ No

Number of Passengers (including Driver) 1

Details of Police Action _____

Was the accident reported to the police? Yes / ☒ No

If Yes, Please state which Police Station _____

Was notice of intended Prosecution given? Yes / ☒ No

If Yes, against whom? _____

Details of Other Vehicle Property 1

Vehicle Registration Number YM6507B

Vehicle Make/Model/Colour _____

Details Of Properties _____

Name of Driver Subbukannu Kannan

NRIC/Passport Number G5938730N

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S77333121B



Name

LEE PAK KEOW
(LI BOCHAO)



Race

李 博 超

CHINESE

Date of birth

24-11-1977

Sex

M

Country/Place of birth

SINGAPORE



5319288



NRIC No. S7733121B



Date of Issue

19-06-2014

7 LEW LIAN VALE #04-23
SINGAPORE 537019

NRIC No: S7733121B

Date: 20/07/2017

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: S7733121B



LEE LIAN VALE
(LI JOCHAO)

Birth Date: 23 Nov 1977

Valid Date: 27 Sep 2007



7 Lee Lian Vale

#04-23 S 537019

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE

29 Oct 1998

NP428A



License No: S7733121B



中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Co. Reg. No. 200208384E

MX1F
R SN
AN0571A
Cov.Type: C

MOTOR PRIVATE CAR

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)

ORIGINAL

CERTIFICATE No	DMPCSN3060831802	Engine No :L15B4036308
		Chano:RU11116301
1. Index Mark and Registration Number of Vehicle	SLD5177C	
2. Name of Policy Holder	LEE PAK KEOW	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	20 June 2018	Named Drivers Ex Sect. I S\$500.00 Additional Ex Other than Named Drivers: Ex Sect. I - Age <= 25..... S\$3,000.00 Ex Sect. I - Age >= 26..... S\$500.00 * Age as at date of accident EX ON WINDSCREEN S\$100.00
4. Date of Expiry of Insurance	19 June 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 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:

Use for social, domestic and pleasure purposes and for the Policyholder's business.
The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, 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.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled.

One time waiver of Excess for the first S\$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

HIRE PURCHASE CO. : HL BANK AS HP OWNER

* 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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: M9 AUTOMOBILE PTE LTD.
Authorised Officer

Authorised Signatory