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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> 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

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LELEN HILL THE R	ACCIDENT STATEMENT
Date Of Report	26/04/2019 19:03
Date Of Accident	16/04/2019 10:00
Exact Location Of Accident	ALONG BENDEMEER ROAD
Country/State of Loss	SINGAPORE
DESCRIPTION OF THE PARTY OF	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMK1863H
Insured/Policyholder	
Name Of Registered Owner	SRS AUTO HOLDINGS PTE. LTD.
Co Reg No	201709236H
Email Address	ROGERKTM525@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-87992590
Alternative Phone No	OFFICE-87992590
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	130
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5108703210
Cover Note Number	
Driver	
Name of Driver	LEE WEE JUN
NRIC No	S9718133J
D-1- 0(D) (2012/PG 2021

 Name of Driver
 LEE WEE J

 NRIC No
 \$9718133J

 Date Of Birth
 07/06/1997

 Occupation
 INDOOR

 Date Of Driving Pass
 18/09/2015

Driving Experience 3 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-87992590

Fax Number

Contact Number OTHERS-87992590

EMail Address ROGERKTM525@YAHOO.COM.SG

Address

BLK 148 BEDOK RESEVOIR ROAD

#9-1687

Postcode

470148

OTHER - HIRER

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

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)

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

SLT3760Y

Vehicle Make/Model/Colour

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

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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 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:
 - 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:

10

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.

ALONE	BANDAMHER ROAD	Ī
A No. 100	A1D (80) B3 A3D	
A) SMK 1863H		
B) SLT 3760Y		

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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DECLARATION

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

Policyholder's soortine Date & Tinte

Lec 24 26/04/19 Driver's Signature

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

GIARDAC SAFEETERANE BURN, SER.

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Uploaded By/Date

Claim Handling(Claim Task)

G 🐔	NAC_BURTT_HERAM_BUSKTS; NATIONAL ASSESSMENT CENTRE SERVICE 5 (BURLT MERAH)) or 26 Apr 2019 39:01	Photos	Normal	Photos 2019-4-26
10	NAC_BUXIT_MERAH_800676; NATIONAL ASSESSMENT CENTRE SERVICE S (BUXIT MERAH)) on 26 Apr 2019 19:01	Photos	homat	Photos 2019-4-26
	NAC_BURGT_MERAN_BOXK74(NATIONAL ASSESSMENT CENTRE SERVICE S (BURGT MERAN)) on 26 Apr 2019 13:01	Photos	Normal.	Photos 2019-4-26
	NAC_BURIT_MERAH_BURITES NATIONAL ASSESSMENT CENTRE SERVICE 5 (BURIT MERAH)) on 26 Apr 2019 19:01	Photos	Normal	Photos 2019-4-25
	NAC_BURTY_MENAH_BURGTSL NATIONAL ASSESSMENT CENTRE SERVICE S (BURTY MERAH)) on 26 Apr 2019 19:01	Photos	Normal	Photos 2019-4-26
V	NAC_BLACT_MERAH_BIOG76(NATIONAL ASSESSMENT CENTRE SERVICE S (BURLT MERAH)) do 26 Apr 2010 19:01	Photos	Normal	Photos, 2019-4-26
G	NAC_BURIT_MERAH_BOSE/NE NATIONAL ASSESSMENT CENTRE SERVICE 5 (BURIT MERAH)) on 36 Air 2019 19:01	Photos	Normal	Protes 25:5-4-26
1	NAC_BURZY_MERAH_BOSG/VEC NATIONAL ASSESSMENT CENTRE SERVICE S (BURLY MERAH)) on 26 Apr 2019 19:01	Photos	Normal	Photos 2019-4-26
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ACCIDENT STATEMENT

ACCIDENT DATE: 16 04 2019 (DD/N	M/YYYY), TIME: (10 : 00) (HH:MM
LOCATION: Bendemeer Ray	
1. DETAILS OF VEHICLE	
alvehicle NUMBER: SMk 18634	*
DINSURANCE COMPANY: NTUC	5. 1
CIPOUCY NUMBER: SIGS 7033	
d)POLICY TYPE: (COMPREHENSIVE / TH	IRD PARTY / THIRD PARTY FIRE &THEFT)
FITYPE: (SALOON / COUPE / MPV /VAN	/IOPRY / MOTORCYCLE / OTHERS
g) VEHICLE CATEGORY: (PRIVATE / CON	AMERICIAL (MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIM	AE: PRIVATINE USE
I ARE YOU CLAIMING UNDER YOUR OW	AE: PELVIPTRE USE
I) ARE YOU CLAIMING UNDER YOUR OW	INSURANCE (YES (NO)
IF NO, PLEASE STATE (THIRD PARTY CLA 2. INSURED / POLICY HOLDER	AIM / REPORTING ONLY)
A)NAME: LEE WEE Jun	
	(MALE) FEMALE)
b)NRIC/FIN/PASSPORT: 597/8/335	CONTACT: 87000 FOR
CIADDRESS: BIK 148 Bedok Res Rd	09-1687
* CONTINUE TO 3.d IF DRIVER ALSO POL	ICY HOLDER
of passanage DRIVER	
(Including driver) alNAME: Lee Wee Ju	(NALE) FEMALE)
	CONTACT STORT FOR
CIADDRESS: BIK 143 BEJOK RES ROA	04-1687
*d)DATE OF BIDYIN	
*d)DATE OF BIRTH: (_07/ 06/ 1997	J(DD/MM/YYYY)
e) OCCUPATION: (INDOOR / OUTDOOR)	A
1) DATE OF DRIVING PASS 18/09	(2015
4. WAS DRIVER AN EMPLOYEE OF THE IN	NSURED'S COMPANY? (YES / NO)
I TO TELEVISION OF THE DRIVE	WITH INCLIDED. IMPER
WEATHER CONDITION: (CLEAR) RAININ	NG / OTHERS
DINUAD SURFACE: (DRY)/ WEST OTHER	* * *
6. WAS ANYBODY INJURED LYES (NO)	
/. a) REPORTED TO POLICE (YES / NO)	
IF YES, PLEASE STATE WHICH POLICE STA	TION
IHIRD PARTY VEHICLE	
NO OF PASSMARY OF VEHICLE NUMBER. BY COS SIT 27/	(n) V
Including driver) D) DRIVER'S NAME:	MODEL:
(3.) C) NRIC/FIN/PASSPORT:	
(3.) C) NRIC/FIN/PASSPORT: 9. THIRD PARTY VEHICLE	CONTACT:
	Webseles to
	MODEL:
Including John Son Text of Tex	34 (7)
NRIC/FIN/PASSPORT:	CONTACT:
N.	3

email = (ROCHE KAM)

REPUBLIC OF SINGAPORE IDENTITY CARD NO. S9718133J



LEE WEE JUN

浚

CHINESE Date of nirth 07-06-1997 Country of birth SINGAPORE





03-02-2012

APT BLK 148 BEDOK RESERVOIR ROAD SINGAPORE 470148

4820879

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

EFFECTIVE DATE

16 Sep 2015

Motor care with unladen weight =< 3000kg with =< 7
passengers, exclusive of driver; and other motor
vehicles with unladen weight =< 2500kg
Motor vehicles which are constructed to carry load
or passengers and the unladen weight > 2500kg
Motor vehicles which are not constructed to carry
load or passengers and the unladen weight =< 7250kg
Motor vehicles not constructed to carry
load or passengers and the unladen weight =< 7250kg
Motor vehicles not constructed to carry any load
and the unladen weight > 7250kg Class 4

Class 5

Ligence NaiS9718133J

NP 428A



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: 5108703210

Cover : Third Party

1. Index mark and Registration Number of Vehicle

: SMK1863H

Chassis Number

2. Name of Policyholder

: KMHDC51DR9U185760

3. Effective Date of Insurance

: SRS AUTO HOLDINGS PTE. LTD.

: 05 Apr 2019

4. Expiry Date of Insurance

: 11 Aug 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 or Hirer's business.

This Policy does not cover

(a) Use for racing, pace-making, reliability trial or speed-testing.

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

(c) 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.

The state of the s	
EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: 5\$1,500
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: N/A
NCD PROTECTION	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

I/We hareby 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)

: SININS AGENCY PTE. LTD. (00000615123)

Date of Issue

: 05 Apr 2019 15:42 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive