

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	29/04/2019 13:01
Date Of Accident	28/04/2019 16:15
Exact Location Of Accident	ALONG NIM ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKC995H
Insured/Policyholder	
Name Of Registered Owner	LIM JEE MUAY
NRIC No	S0086346G
Email Address	MONICAKHONG@YAHOO.COM
Mobile Phone No	(LOCAL) +65-98164908
Alternative Phone No	OFFICE-98164908

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	GOLF COMFORTLINE 1.4 L TSI 92KW DSG
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 29115199 AVW
Cover Note Number	

Driver

Name of Driver	LIM JEE MUAY
NRIC No	S0086346G
Date Of Birth	22/02/1954
Occupation	INDOOR
Date Of Driving Pass	04/10/1973
Driving Experience	45 YEARS AND 6 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98164908
Fax Number	
Contact Number	OFFICE-98164908
Email Address	MONICAKHONG@YAHOO.COM

Address	29C NIM ROAD
Postcode	805115
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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	3
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ANG MO KIO SOUTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 81 ANG MO KIO AVE 3 , POSTCODE: 569929 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4519999 - FAX NO: 65535679
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

refer to sketch plan & police report

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	SFU93A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LONG TIAN-EN, IAN
NRIC/Passport Number	S9112700H
Contact Number	91550879
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMJ1600Z
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

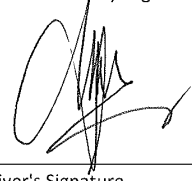
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

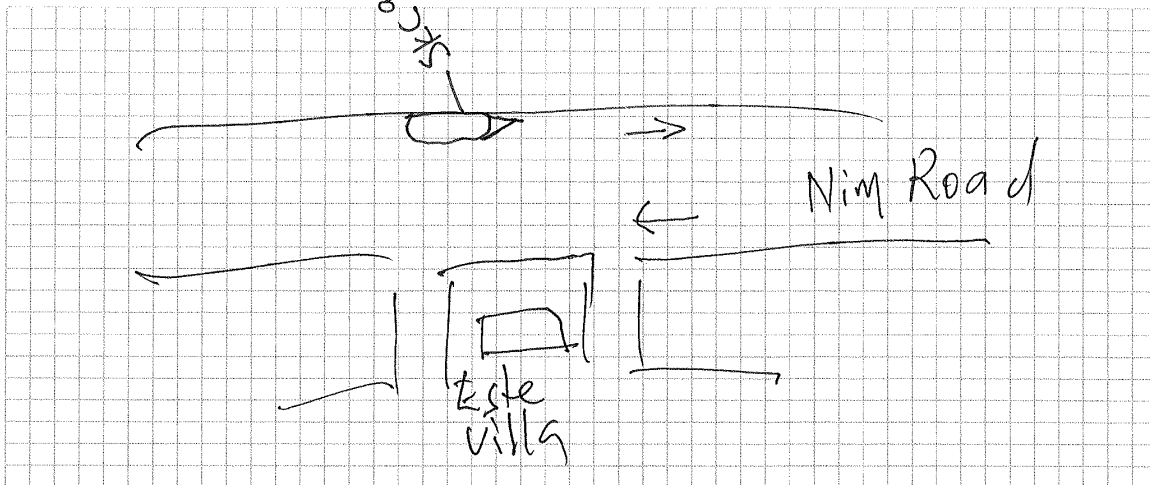
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "**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:


81030002
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

71C 89112700 H, 73 Nim Road, Singapore 807584

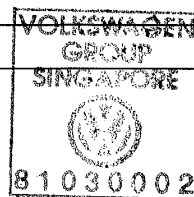
Driver Mr Long Tian-En, I am asked for my contact. He was driving a BMW 3FU 93 A and told by my family member he hit my car parked at Nim Road. He whatsapp me 29.04.19 today at 11.29 informed he was the one who had accident involving my car

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.:

Accident Sketch Plan Pg. 1



**SINGAPORE
POLICE FORCE**



T/20190429/2036

1 of 3

Police Station Of Origin:
Ang Mo Kio South N.P.C
81 Ang Mo Kio Avenue 3 SINGAPORE
569929
Tel No: 1800-4519999

Report No. T/20190429/2036

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/04/2019 11:52	Vide Report No.: F/20190428/0163	Station Diary No.: 62
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Informant's Particulars				
Name of Informant: LIM JEE MUAY		Address: 29C NIM ROAD SINGAPORE 805115		
ID Type / ID No.: NRIC NO / S0086346G		Contact No.: Home/Office: Mobile: 98164908		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Female	Age: 65	Date of Birth: 22/02/1954	Type of Informant: Driver	
Race: Chinese		Language:	Institution / School Name:	
Occupation: PROCUREMENT		Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 28/04/2019 16:15	Type of Location: Straight Road
Location: Along Road 1 NIM ROAD TOWARDS LILAC RD, LAMP POST 10 Lamp Post Number: 10				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SFU93A	Car					0
SKC995H	Car	VOLKSWAGO N	GOLF 1.4 TSI CL	Red	Seriously Damaged	0
SMJ1600Z						0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



**SINGAPORE
POLICE FORCE**



T/20190429/2036

2 of 3

Police Station Of Origin:
Ang Mo Kio South N.P.C
81 Ang Mo Kio Avenue 3 SINGAPORE
569929
Tel No: 1800-4519999

Report No. T/20190429/2036

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKC995H	MSIG INSURANCE (SINGAPORE) PTE. LTD.	A50508709	16/01/2019	15/01/2020

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LIM JEE MUAY		ID No. S0086346G
Related Vehicle	SKC995H (Car)		Contact No. 98164908
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 27/04/2019 at about 1730hr, my son parked my car SKC995H along Nim Road outside my house. I was overseas since 18/04/2019 and only came back to Singapore on 28/04/2019 at about 1730hr.

On 28/04/2019 at about 1710hr, when my husband was driving his car from our house, proceeding to the airport to fetch me, he saw that my car which was parked outside my house was badly damaged. There were Police officers at scene and thus my husband approached the Police officer. The Police officer informed my husband that there were two other cars involved in the accident and handed over a case card to my husband for me to lodge the accident report.

I would like to state, that none of my family members saw the accident. The whole right side of my car was badly damage due to the accident.



**SINGAPORE
POLICE FORCE**



T/20190429/2036

Police Station Of Origin:
Ang Mo Kio South N.P.C
81 Ang Mo Kio Avenue 3 SINGAPORE
569929
Tel No: 1800-4519999

3 of 3

Report No. T/20190429/2036

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:
F /
SI SITTU QAMARIYAH BINTE MOHD NAJIB

Signature Of Informant:

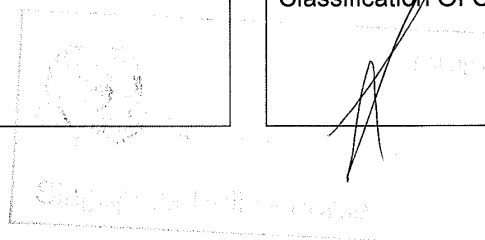
Signature Of Interpreter:
Not applicable

Date/Time:
29/04/2019 11:52

Officer In Charge Of Case:
TP / GIT /
Sgt 2 HO JIEKANG, IVAN
Contact No.: 65476170

Classification Of Case:

Authentication Stamp
NP168



VEHICLE CONDITION REPORT FORM / JOB RECORD



Date: 28/04/19 Time: 1930 Customer Name: LIN JEE MIN
 Technician Name: Vimal YN 36637 Customer Telephone: 98164908
 Reg. No: SKC 99311 Job No: V519001435 Make/Model: VW/GOLF
 Odometer Reading (Customer Vehicle): _____ Location: 39 Nim Rd
 KM Travelled by Assistance Vehicle: _____ (1 way) Time on Scene: 2037
 Fault Reported: Accident Time Job Completed: _____
 Fault Found: _____ Repaired at Breakdown Scene: Y/N
 How was vehicle repaired? _____ VIN No: _____

Hubcaps Y/N Day/Night Wet/Dry Clean/Soiled
 Spare Wheel Y/N Please circle the above as appropriate
 Tools Y/N Place X on damaged area for scratch and Y for dent
 Audio System Y/N
 Keys + Remote Y/N
 Aerial Y/N
 Cashcard Y/N

Fuel

E		F
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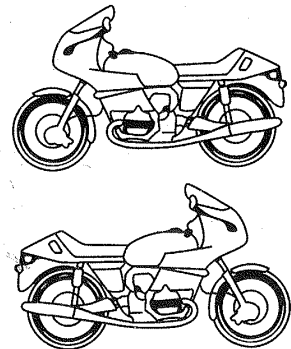
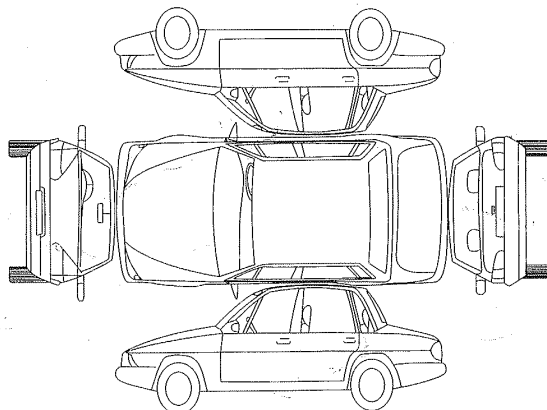
Interior Condition :

Front Seats

Rear Seats

Floor Covering

Headlining



Delivery to Dealership / Date and Time: VW Macpherson 28/04/19

Vehicle received in the above condition YES/NO

If not stated as above specify difference: _____

CUSTOMER DECLARATION

1. I am entitled to the service requested. In the event of this subsequently not being the case I shall be responsible for the cost of any assistance provided.
2. I accept that any roadside repairs will be of a temporary nature and that advice of a franchised dealer should be sought by me as soon as possible.
3. In the case of forced entry, I confirm that I specifically requested that the operator forcefully enter the vehicle and that all damages occasioned thereby is and shall be my sole responsibility.
4. I accept that any removable items left in the vehicle will not be the responsibility of the emergency service or their agents.

Customer Name & Signature (green copy)		Dealer/Workshop Signature, Name & Stamp (yellow copy)		Operators Signature (white & pink copy)	
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MSIG Insurance (Singapore) Pte. Ltd.
 4 Shenton Way, # 21-01, SGX Centre 2, Singapore 058807
 Tel +65 6827 7888, Fax +65 6827 7800
 Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

Certificate of Insurance

ROAD TRANSPORT ACT 1987 (MALAYSIA)
 THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)
 THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
 (REPUBLIC OF SINGAPORE)
 THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.X.1
 Individual Ownership

VW DRIVEEASY
Comprehensive

Certificate No. A 29115199 AVW

Excess : SGD500

Windscreen Excess : SGD100

1. Index Mark and Registration Number of Vehicle

SKC995H

2. Name of Policyholder

Lim Jee Muay

3. Effective Date of the Commencement of Insurance for the purposes of the Act

16/01/2019

4. Date of Expiry of Insurance

15/01/2020

5. Persons or Classes of Persons entitled to drive*

Lim Jee Muay

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

* Provided that the person driving is permitted in accordance with the licensing or other laws or 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 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 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.

PLEASE NOTE ALL CLAIMS RELATED REPAIR MUST BE CARRIED OUT AT VOLKSWAGEN CENTRE SINGAPORE.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

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) or any Amendment, Act or Acts passed in substitution thereof.

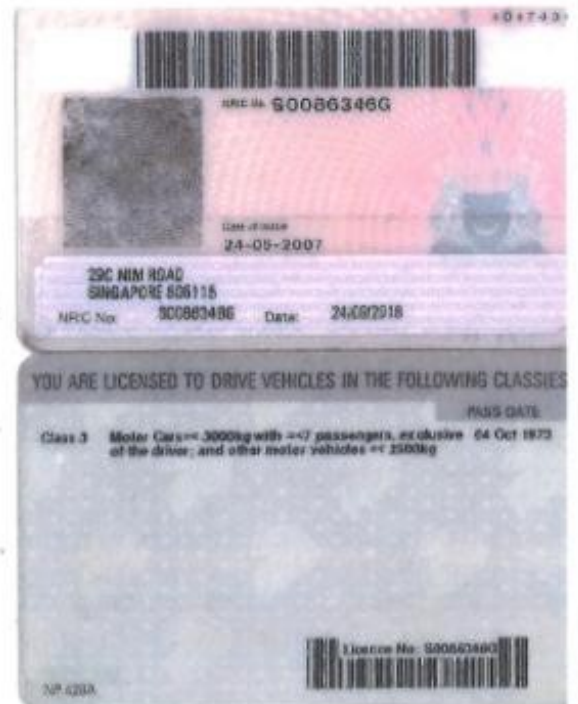
MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurers

f

for Chief Executive Officer

Accident Sketch Plan



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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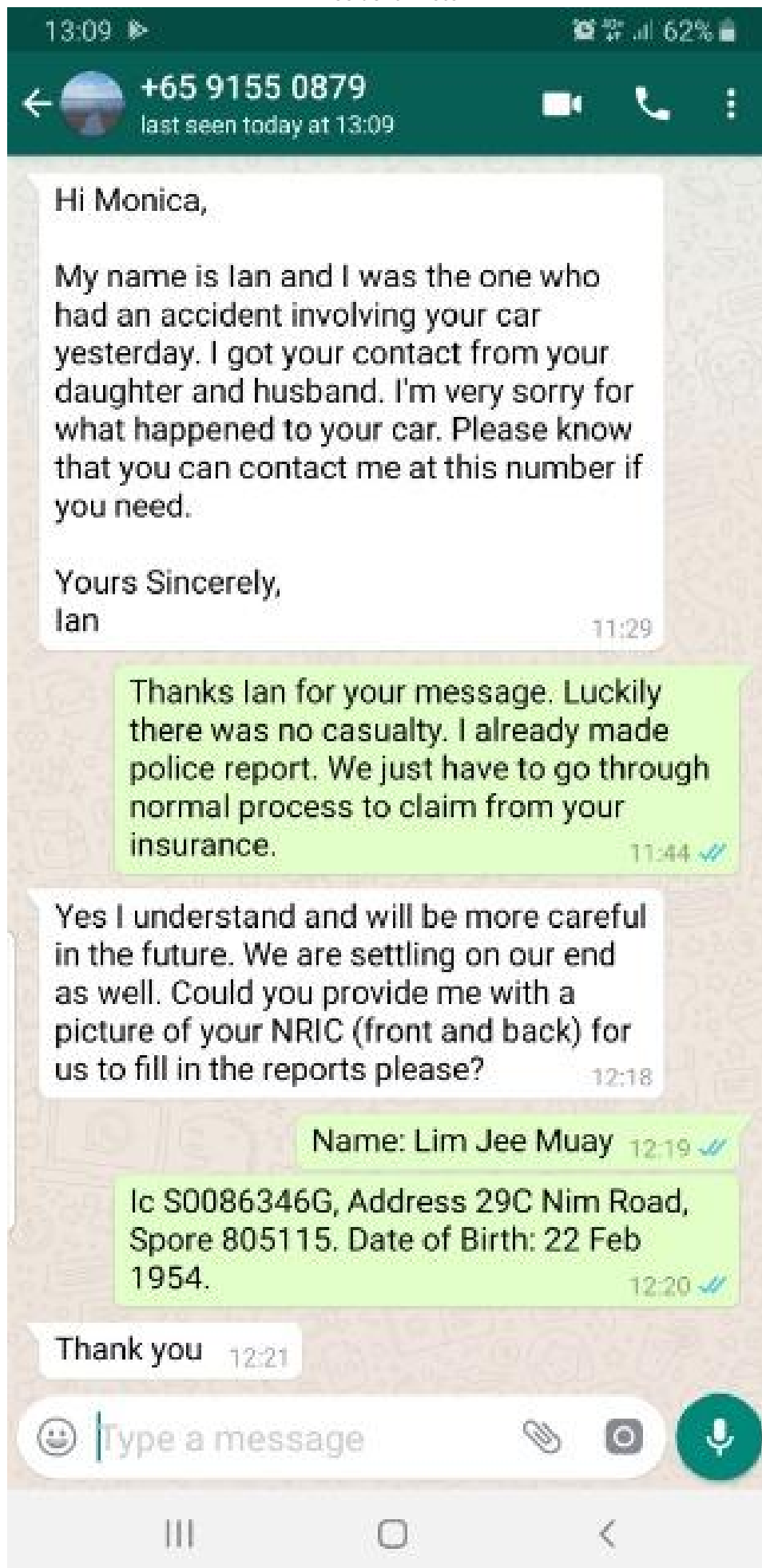


Accident Photo



Accident Photo





Accident Photo

