

## 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	09/05/2019 12:45
Date Of Accident	07/05/2019 14:30
Exact Location Of Accident	EVANS ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLM6479C
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SIM GLARENCE
NRIC No	S8027427J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91902910
Alternative Phone No	OTHERS-91902910

### Vehicle Particulars

Manufacturer	BMW
Model	318I 2.0L A/T ABS D/AIRBAG 2WD 4DR
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	
Cover Note Number	

### Driver

Name of Driver	SIM GLARENCE
NRIC No	S8027427J
Date Of Birth	20/08/1980
Occupation	INDOOR
Date Of Driving Pass	03/08/2004
Driving Experience	14 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91902910
Fax Number	
Contact Number	OTHERS-91902910
Email Address	NOEMAIL

Address	75 YISHUN AVENUE 11 #12-12 SPORE 768860
Postcode	
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	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?	YES
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: : LIN TING GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE HEADQUARTERS
Police Station Address	<b>ROAD:</b> 10 UBI AVENUE 3 SINGAPORE , <b>POSTCODE:</b> 408865 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> - <b>FAX NO:</b>
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	GBF62R
Vehicle Make/Model/Colour	TOYOTA HIACE VAN TURBO 5 DR MANUAL
Details Of Properties	
Vehicle Category	GOODS VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### DETAILS OF INJURED PERSON 1

Name SIM GLARENCE

Approximate Age

Injuries Sustain

Injured person in which vehicle? SLM6479C

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

#### DETAILS OF INJURED PERSON 2

Name LIN TING

Approximate Age

Injuries Sustain

Injured person in which vehicle? SLM6479C

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

## Sketch Plan

### SKETCH PLAN

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6. 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.
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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.

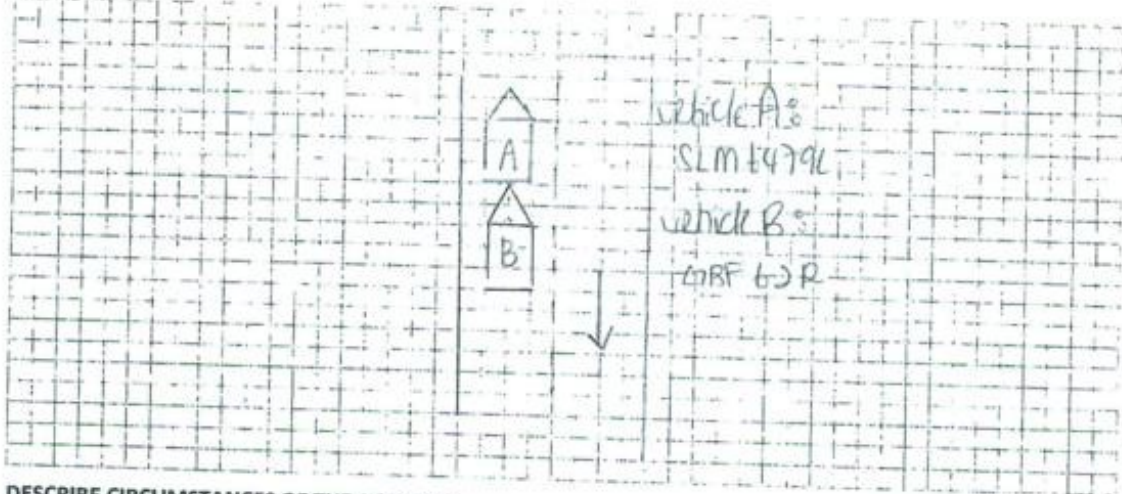
\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

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

\_\_\_\_\_  
Reporting Centre Personnel's Signature  
Name: *Subin*  
NRIC/FIN No.: *S804077A*

## Sketch Plan #2

### SKETCH PLAN



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


- Refer to Police Report -  
 Police station: 10 Ubi Ave 3, S 408865  
 Report no: T/20190507/2208.


- Seek Treatment -  
 Parkway Pantai (6A Napier Road S 25100)  
 MR - 3 days (Driver, 2 Passenger)  
 Neck & lower back care.

### 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: S. H. M.  
 NRIC/FIN No.: S8040377A

GAFFRIC Sketchplanform\_V2



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo

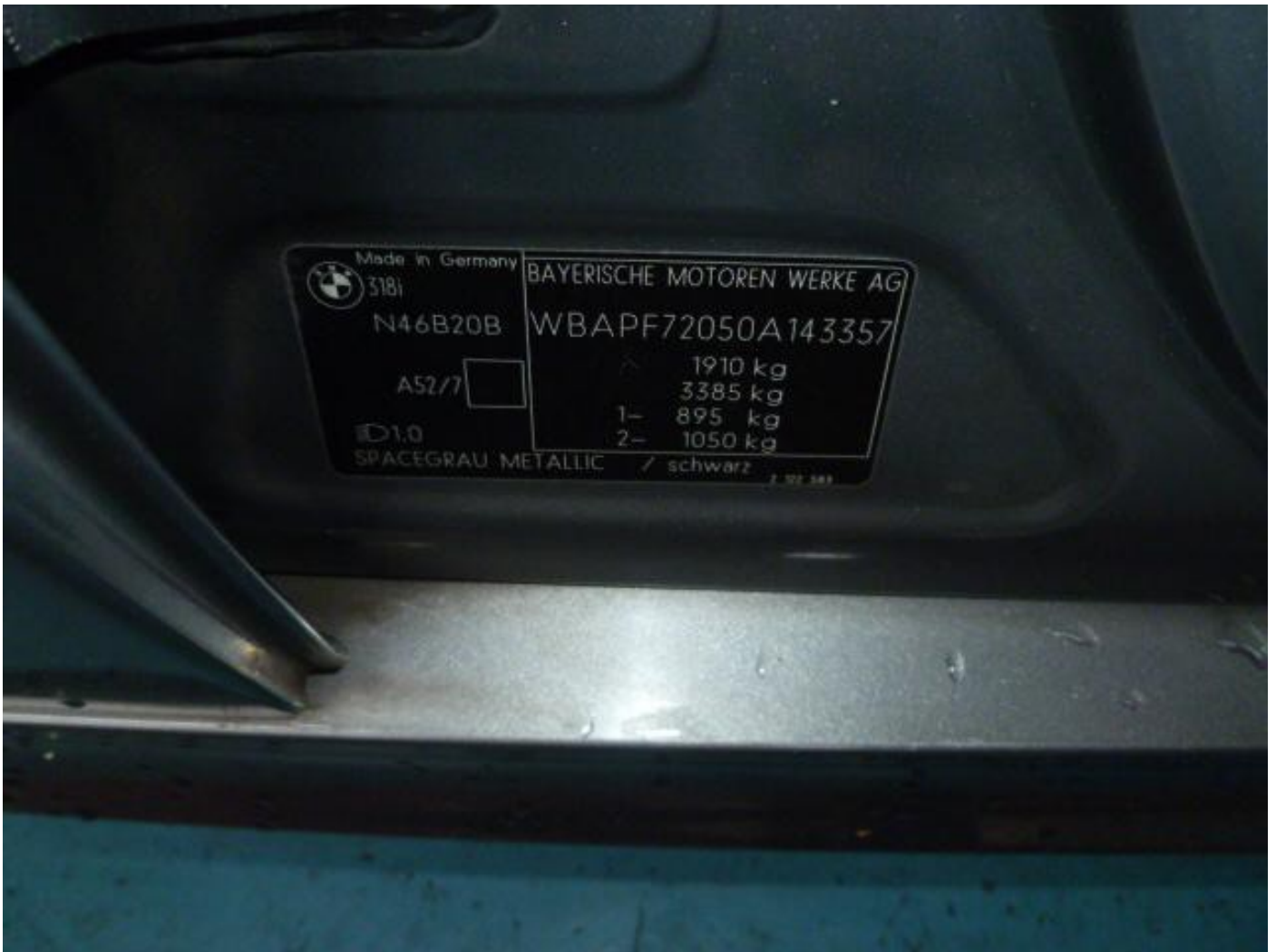


Accident Photo





Accident Photo





Driving License

**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**

Licence Number: **S8027427J**  
Name: **SIM GLARENCE**

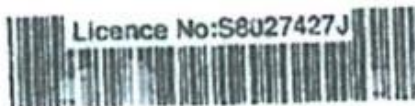
Birth Date: **20 Aug 1980**  
Issue Date: **01 Sep 2015**

**002468103H**

**55**  
**50**

YOU ARE LICENSE ( TO DRIVE VEHICLES ) THE FOLLOWING CLASS(ES)		EFFECTIVE DATE
Class 2B	Motorcycles =< 200 cc	13 Sep 2001
Class 2A	Motorcycles between 201 cc and 400 cc	26 Nov 2002
Class 2	Motorcycles > 400 cc	06 Jan 2004
Class 3	Motor Cars =< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg	03 Aug 2004

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IP 428A

# INSURANCE POLICY



Contact us at  
Hotline: (65) 6532 2888  
E-mail: CustomerService@DirectAsia.com

## CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act")  
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore)  
Road Transport Act, 1987 (Malaysia)  
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

<b>Certificate No.</b>	: MT/00554700
<b>Type of Coverage / Driver Plan</b>	: Low Mileage Car Third-Party Fire and Theft (Value Plan)
<b>1) Vehicle Registration No.</b>	: SMH6479C
<b>Chassis No.</b>	: WBAPF72050A143357
<b>2) Name of Policy Holder</b>	: Sim, Glarence
<b>3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act</b>	: 03/11/2018 12:53
<b>4) Date/Time of Expiry of Insurance</b>	: 15/11/2019 23:59
<b>5) Persons or Classes of Persons Entitled to Drive</b>	
(a) Any person who is named on the policy who is driving on the Policyholder's permission.	
The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.	
<b>6) Limitations as to use*</b>	
Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business. Private car-pooling arrangements where you commute with passengers and split the fuel expense is covered under the standard policy. Grab Hatch will only be covered if this is the declared usage stated on your Policy Schedule. Only two rides are permitted a day. Other forms of commercial car-pooling or any ride hailing services (e.g. Grab, Go-Jek etc.) are not allowed.	
*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.	
<b>Sum Insured</b>	: Market Value
<b>Own Damage Excess</b>	: S\$ 800.00 (before any applicable GST)
<b>Windscreen Excess</b>	: Not Applicable (before any applicable GST)
<b>Low Mileage Excess</b>	: S\$ 5,000.00 (before any applicable GST)
<b>(If you exceed permitted allowance of 8,000KM per year)</b>	
<b>Choice of workshop</b>	: DirectAsia approved workshops
<b>Finance company / Hire Purchase</b>	:
<b>Main driver</b>	: Sim, Glarence
<b>Named driver</b>	: None
<b>Important Note: This policy is on a named driver basis. The Policyholder has to be named as the Main Driver or Named Driver to be covered. Any unnamed drivers will not be covered.</b>	

[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 the Road Transport Act, 1987 (Malaysia).

Issued on: 08/05/2019

Direct Asia Insurance (Singapore) Pte. Ltd.

Edip Okur (Chief Underwriting Officer)

Direct Asia Insurance (Singapore) Pte Ltd  
20 Anson Road #08-01 Twenty Anson Singapore 079912  
www.DirectAsia.com

# Police Report



**SINGAPORE  
POLICE FORCE**



T/20190507/2208

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 3

Report No. T/20190507/2208

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/05/2019 22:49	Vide Report No.:	Station Diary No.:
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### Informant's Particulars

Name of Informant: SIM GLARENCE			Address: 75 YISHUN AVENUE 11 #12-12 THE CANOPY SINGAPORE 768860		
ID Type / ID No.: NRIC NO / S8027427J			Contact No.: Home/Office: Mobile: 91902910		
Nationality:			Email:		
Sex: Male	Age: 38	Date of Birth: 20/08/1980	Type of Informant: Driver		
Race:			Language:	Institution / School Name:	
Occupation: PROJECT MANAGER			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

### General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 07/05/2019 14:30	Type of Location: Straight Road
Location: Along Road 1 EVANS ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBF62R	Van					0
SLM6479C	Car	BMW	318i 2.0L A/T ABS D/AIRBAG 2WD 4DR	Grey	Slightly Damaged	1

### Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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## Police Report



**SINGAPORE  
POLICE FORCE**



T/20190507/2208

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20190507/2208

### CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLM6479C	DIRECT ASIA INSURANCE (SINGAPORE) PTE. LTD.	MT/00554700	03/11/2018	02/11/2019

### Brief Details.

On 07/05/2019 at about 1430hrs, I was driving my vehicle bearing registration number SLM6479C along Evans Road at a slow speed when suddenly I felt a hard impact from the rear. After which I realized that a van bearing registration number: GBF62R (DHL Van) had hit the rear of my vehicle. The traffic was slow during that period as it was also a single lane road and there was traffic light ahead. We came down and exchanged particulars. My passenger who is my wife, Lin Ting S8234675I, and myself then head down to Gleneagles to seek medical attention and both of us were given 3 days MC each. The other party, driver's particulars as such, Muhammad Khairul Anam Bin Mohamad S8411391C H/P: 97441969. I am lodging this report for record purpose.



# Police Report



**SINGAPORE  
POLICE FORCE**



T/20190507/2208

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

3 of 3

Report No. T/20190507/2208

## 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: L / Sr Staff Sgt NIRATNA NINGSEH BINTE ABD JALIL	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 07/05/2019 22:49
Officer In Charge Of Case: TP / AEIT / SI ANG YI TING, STEPHANIE Contact No.: 65476414	Classification Of Case: 

Authentication Stamp  
NP168