#### 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 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.
- 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	02/05/2019 12:54
Date Of Accident	30/04/2019 19:15
Exact Location Of Accident	HOLLAND ROAD
Country/State of Loss	SINGAPORE
I	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMG4519D
Insured/Policyholder	
Name Of Registered Owner	CHENG HEE YWAI
NRIC No	S8485834Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96984123
Alternative Phone No	OTHERS-96984123
Vehicle Particulars	
Manufacturer	BMW
Model	5231
Exact Purpose for which vehicle was being used at time of accident	t
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	PRIVATE CAR
Insurance Company	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3029321900
Cover Note Number	
Driver	
Name of Driver	CHENG HEE YWAI
NDIO N.	004050047

NRIC No S8485834Z

Date Of Birth 17/02/1984 Occupation **OUTDOOR Date Of Driving Pass** 04/03/2016

**Driving Experience** 3 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-96984123

Fax Number

**Contact Number** OTHERS-96984123

**EMail Address NOEMAIL**  Address BLK 302A ANCHORVALE LINK #03-88

Postcode 541302

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

-

2

NO

#### **General Information of the Accident**

Type Of Accident COLLISION - HEAD TO REAR

Weather Conditions CLEAR
Road Surface WET

#### **Other Information**

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident?

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.

Number of Passengers (Including Driver) 1

#### **Details of Police Action**

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name MARINE PARADE N.P.C

Police Station Address ROAD: 300 MARINE PARADE ROAD, POSTCODE: 449296, COUNTRY:

**SINGAPORE** 

NO

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

# **Circumstances of Accident**

On 30/04/2019 at about 1915hrs, I was driving along Holland Road towards Ang Mo Kio. At that point of time, the traffic was heavy hence I was driving slowly, The other party that was in front of my vehicle was also driving slowly. Subsequently, while the other party was driving forward, I also drove my vehicle forward. However, the other party suddenly braked, hence, I also braked. However, I felt a slight impact of the front portion of my vehicle hit onto the rear portion of the other party's vehicle. Myself and the other party then alighted from our vehicles to exchange particulars and took pictures of the damages to the vehicles. My vehicle had sustained slight scratches at the middle of the front bumper. After exchanging particulars, we then left the location. I am lodging this report in the event that I am claiming insurance.

## 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 SKT523Y

Vehicle Make/Model/Colour

reflicie Make/Model/Colou

**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

### SKETCH PLAN

#### 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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: Driver's Signature (If driver is not the policyholder) Date & Time:

Name: NRIC/FIN No.

Reporting Centre Personnel

Page 4 of 25

# Sketch Plan #2

ETCH PLAN			
		P	+. SMG 4519D.
	Ì B I		: SKT 5234.
e .	A-A.		
ESCRIBE CIRCUMSTAN	CES OF THE ACCIDENT		
	police report.		
	MA.		
			1
			5.
ECLARATION			
	articulars are true in every respect.		(10)
X. (X		1	The Sollowing E
olicyholder Sanature Nate & Time:	Driver's Signature (if driver is not the policyholder) Date & Time:	Nam	orting Centre Personnel Signature





Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296 2 of 4 Report No. T/20190501/2045

Tel No: 1800-4428999

#### CONTINUATION OF REPORT

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMG4519D	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSN30293219 00	22/04/2019	15/05/2020

Details of Perso	n Involved			SETTING TO SET	NIE IT	
Any Pedestrian I	nvolved: No					
No. of Pedestrians Injured: NIL			Use of Pe	Use of Pedestrian Crossing: NA		
Driver			MICHIEL			
Name	CHUA KIAN TONG, PETER (PETER CAI JIAN ZHONG)			ID No		S8003817H
Related Vehicle	SKT523Y (Car)			Contact No.		92711433
Hospital/Clinic	NIL		Class Drivin Licend Expiry	g	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL Date Disc			charge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o		NIL	
Driver						- All
Name	CHENG HEE YWAI		ID No	Ú.	S8485834Z	
Related Vehicle	SMG4519D (Car)		Conta	ct No.	96984123	
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g ce &	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc	charge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o	f Injury	NIL	

#### Brief Details.

On 30/04/2019 at about 1915hrs, I was driving along Holland Road towards Ang Mo Kio. At that point of time, the traffic was heavy hence I was driving slowly. The other party that was in front of my vehicle was also driving slowly. Subsequently, while the other party was driving forward, I also drove my vehicle forward. However, the other party suddenly braked, hence, I also braked. However, I felt a slight impact of the front portion of my vehicle hit onto the rear portion of the other party's vehicle.

Myself and the other party then alighted from our vehicles to exchange particulars and took pictures of the damages to the vehicles. My vehicle had sustained slight scratches at the middle of the front bumper. After exchanging particulars, we then left the location. I am lodging this report in the event that I am claiming insurance.





Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296 1 of 4 Report No. T/20190501/2045

Tel No: 1800-4428999

# REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/05/2019 14:04		/lade:	Vide Report No.:	Station Diary No.: 32	
Informa	nt's Partic	ulars			
	f Informant: HEE YWAI		Address: APT BLK 302A ANCHORVALE LINK #03-68 SINGAP 541302		
	/ ID No.: O / S848583	34Z	Contact No.: Home/Office: Mobile: 96984123		
National MALAYS			Email:		
Sex: Male	Age: 35	Date of Birth: 17/02/1984	Type of Informant:		
Race: Chinese			Language:	Institution / School Name:	
Occupation: IT SALES			Driving Licence Information: Class: 3	Date of Expiry:	

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 30/04/2019 19	15	Type of Location Straight Road
Location: Along Road 1 HOLLAND RO		MO KIO		4	
Weather: Clear		Road Surface: Wet		Roa	d Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		- Traf	fic Volume:
Type of Collis Between Mov	ion: ing Vehicles - Head T	o Rear		Anyo	one conveyed by ulance:

Details of Vo	ehicle Invo	lved			and the second	
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SKT523Y	Car					2
SMG4519D	Car	BMW	528I AT D/AB DSC LED NAV	Black	Slightly Damaged	0

	surance			
Vehicle No. Insuran	ce Company	Insurance No	Effective	Expiry Date



Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296

Tel No: 1800-4428999



3 of 4 Report No. T/20190501/2045

CONTINUATION OF REPORT





Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296 Tel No: 1800-4428999 4 of 4 Report No. T/20190501/2045

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 G / Sgt 2 KHAIRUL HANIS BINTE	5. 100 0.00 7.00 0.00	Signature Of Informant:		
Signature Of Interpreter: Not applicable		Date/Time: 01/05/2019 14:04		
Officer In Charge Of Case: TP / GIA /		Classification Of Case:		
Staff Sgt WONG SIEU LUI Contact No.: 65476151	SINSAPORE POLICE FORCE			
Authentication Stamp NP188		4	- 11-	
	5)6	RIATURE		

#### CERTIFICATE OF INSURANCE



# 中国太平保险(新加坡)有限公司

MX1E N SN AN0569A COMPREHENSIVE AUTOSAFE

#### 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 No.

DMPCSN3029323900

Engine No : 34440676N2OB2OA

Chassis No: WBA5A52080D285016

1. Index Mark and Registration Number of Vehicle

SMG4519D

2. Name of Policy Holder

MR CHENG HEE YWAT

3. Effective date of the Commencement of Insurance for

22 APRIL 2019 (10:21 HOURS)

NAMED DRIVERS EX SECT. I...... IN ADDITION TO NAMED DRIVERS EX:

the purposes of the Regulations, Ordinance or Enactment

15 MAY 2020

EX SECT. I - AGE <= 25......\$\$3,000.00 EX SECT. I - AGE >= 26......S\$500.00

4. Date of Expiry of Insurance

\* AGE AS AT DATE OF ACCIDENT

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 DORS 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 \$\$1,000 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. : TOKYO CENTURY LEASING (S) PTE LTD 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

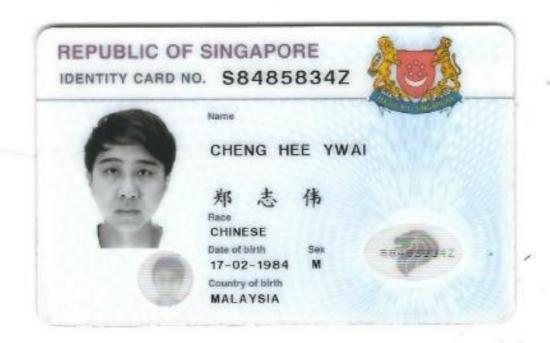
For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Countersigned By:

Authorised Officer

Authorised Signatory

## **Driving License**





9179832



NRIC No.S8485834Z

Nationality

MALAYSIAN

Date of issue

03-10-2012

APT BLK 302A ANCHORVALE LINK #03-68 SINGAPORE 541302 S8485834Z 08/0

08/05/2014

# YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

EFFECTIVE DATE

Class 3

Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg

04 Mar 2016

NP 428A

Licence No:S8485834Z

























