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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
- 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

aforesaid.	and to copies of the report being made available
KIND DEED AND DEED	ACCIDENT STATEMENT
Date Of Report	21/05/2019 17:00
Date Of Accident	18/05/2019 20:45
Exact Location Of Accident	WOODLANDS CENTRE ROAD NEAR TRAIN CHECKPOINT
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SFS6288B
Insured/Policyholder	
Name Of Registered Owner	CHAI LOO SANG
NRIC No	S2552490Z
Email Address	LAISHENG.CHAI@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98620880
Alternative Phone No	OTHERS-98620880
Vehicle Particulars	
Manufacturer	TOYOTA
Model	HARREIR
Exact Purpose for which vehicle was being used a time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
f No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5098276713-01
Cover Note Number	
Driver	
Table of Carriers	

Driver	
Name of Driver	CHAI LOO SANG
NRIC No	S2552490Z
Date Of Birth	08/05/1953
Occupation	OUTDOOR
Date Of Driving Pass	10/11/1980

Driving Experience 38 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98620880

Fax Number

Contact Number OTHERS-98620880

EMail Address LAISHENG, CHAI@GMAIL, COM Address

BLK 108C MCNAIR ROAD

#29-222

Postcode

324108

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

1000

Insurance Company of Driver's Own Vehicle

.

General Information of the Accident

Type Of Accident

SIDE SWIPE

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

involved in the accident

-

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

17.

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:

: PASSENGER

GENDER:

: FEMALE

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 AND ATTACHMENT

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

SHD6988U

Vehicle Make/Model/Colour

HYUNDAI

Details Of Properties

Vehicle Category

TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)
Passenger 1

2

NAME:

GENDER: :

SKETCH PLAN

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.
- 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:

Reporting Centre Personnel's Signatu

Name:

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AS per AHO	used.				
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DECLARATION I/We declare the foregoing particular	s are true in every respe	ect.			21/02/2013
Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the pol Date & Time:	licyholder)		Reporting Centr Name: NRIC/FIN No.:	e Personnel's Signature

REPORT OF ACCIDENT ON 18.5.2019, 20:45PM

Vehicles Involved:-

Owner: Chai Loo Sang / SFS6288B / Private Hired Car (Toyota Harrier)

Owner: Confort Delgro / SHD6988U / Taxi (Hyundai)

Date & Time: 18/05/2019 at 20:45pm

Location: Woodlands Centre Road, junction near Taxi Stand of Woodlands Train Checkpoint.

Photos Attached: Damages of Vehicle SFS6288B collided by SHD6988U with proof of

scratches.

Description of Accident:-

The Taxi SHD6988U was originally queued along the most (left side) inner lane to the Taxi Stand of Woodlands Train Checkpoint.

I was taking a passenger towards the drop-off point near the train checkpoint and was travelled straightly on the central lane parallel to the left inner lane.

A few meter before I turned in to the slip road towards the drop off point, the Taxi driver of SHD6988U suddenly exited from the inner lane and moved out from the queue and collided my vehicle SFS6288B. The Taxi driver just ignored the heavy flow of traffic and changed his lane without taken care of my vehicle that had already passed by his Taxi. The Taxi collided my vehicle (SFS6288B) with long scratches and damaged the car body and doors.

As the checkpoint was in very heavy traffic, we didn't exchange information and phone numbers.

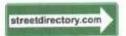
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Report submit by:

Chai Loo Sang NRIC: S2552490Z Mobile: 98620880

Address: Block 108C McNair Road #29-222 Singapore 324108.





Woodlands Centre Road

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Directions

Map

Building Directory

What's Nearby

Get Tips

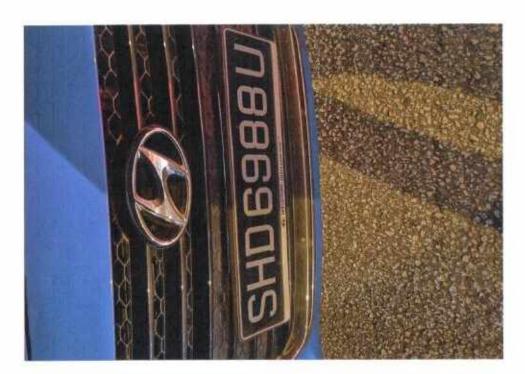
Getting Here

5 Things You Shouldnt Do If Hes Cheating On You

Woodlands Centre Road

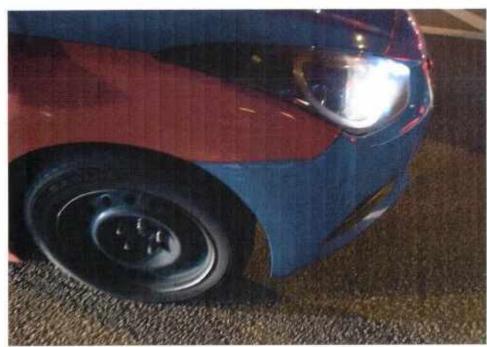


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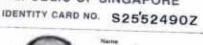
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Policyholder Name	CHALLOO SANG			Di Boutone Print	
Product No.: Model	COMMERCIAL VEHICLE INSURAL	Cover Type	Comprehensive	Policyfoldar NASC Loading	525524002
Email Address	986209(6)	Contact No. (Office)		Canted No.(Home)	8
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Reporting Centre	18/95/2019	Time of Accident tith: min	20:49	Country of Accident	Singapore
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			Fin-	order (appointing Ca	ini idak)	
10			Claim Handling(ac	cident reporting Cla	ilm Task)	

ACCIDENT STATEMENT

ACCIDENT DATE: 1 5 3019 (DD/MM/YYY), TIME: 20 . 45 (HH:MM)
LOCATION: Woodland's Courte Road near Thair Unset point.
DETAILS OF VEHICLE STEED STEED OF BUILDING STEED
DIPOLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
DITYPE: (SALOON / COUPE / MPV /VAN / LORRY / MOTORCYCLE / OTHERS) G) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE) h) PURPOSE OF USING AT ACCIDENT TIME:
I) ARE YOU CLAIMING UNDER YOUP OWN INSURANCE (XES/NO) IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)
AINAME: CHAY LOO GANG (MALE FEMALE)
AX (4) DINRIC/FIN/PASSPORT: S 8558490 Z CONTACT: 9860 0 180
*CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER OF passenger DRIVER A CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER
(Including driver) GINAME: AS ABOVE (MALE / FEMALE) DINRIC/FIN/PASSPORT: CONTACT:
c)ADDRESS:CONTACT.
e)OCCUPATION: (INDOOR FOUTDOOR)
4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (VESTINO)
5. a) WEATHER CONDITION THE DRIVER WITH INSURED: CONTROL OF THE DRIVER WITH INSURED:
6. WAS ANYBODY INJURED (XX (NO)
IF YES, PLEASE STATE WHICH POLICE STATION:
His of passenger of VEHICLE NUMBER: SHE 6988 U MODEL: HYUN DAT
(2) C) NRIC/FIN/PASSPORT: NIL CONTACT: NIL
the of passenger of VEHICLE NUMBER:MODEL:
(Including driver) NRIC/FIN/PASSPORT:CONTACT:
: email = laisheng. chai & ginail: com
VIDEO

REPUBLIC OF SINGAPORE





CHAI LOO SANG



CHINESE 08-05-1953

Country of him MALAYSIA









VOCATIONAL LICENCE

Licence No : \$2552490Z Name : CHAI LOO SANG

Card Issue Date : 19/02/2018

Please visit www.lta.gov.sg to check the status of this vocational licence

3694449



« \$2552490Z



30-03-2005

APT BLK 108C MCNAIR ROAD #29-222 SINGAPORE 324108

NRIC No: \$2552490Z

Date: 29/09/2008

No: 5972748

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

PARS DATE

Molor Cars and Motor Tractors the weight of which unlocked does not exceed 2500 kilogram

10 Nov 1950

NF 438A

This card is not transferable and is the property of the Land Transport Authority (LTA), it must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type

Description

Issue Date

12

TAXI VL

19/02/2018



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: 5098276713-01

Cover : Comprehensive

Index mark and Registration Number of Vehicle

: SFS6288B

Chassis Number

2. Name of Policyholder

ZSU600031051

3. Effective Date of Insurance

: CHAI LOO SANG 24 Apr 2019

4. Expiry Date of Insurance

: 23 Apr 2020

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.
- (b) Use for the carriage of passengers or goods 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 whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.
- # 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

EXCESS (SECTION 1)

= \$\$2,000

EXCESS (SECTION 2)

\$\$2,000

WINDSCREEN EXCESS

\$\$100

INSURE WITH COE

VES

HIRE PURCHASE COMPANY

: MAYBANK SINGAPORE LIMITED

SUM INSURED

: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency

: GRABCAR PTE. LTD. (00000601726)

Date of Issue

: 15 Apr 2019 15:01 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive