

## 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	10/06/2019 13:57
Date Of Accident	08/06/2019 22:00
Exact Location Of Accident	HIGHLAND CENTRE 22 YCK RD CARPARK EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SBY60X
-----------------------------	--------

#### Insured/Policyholder

Name Of Registered Owner	WONG MARY
NRIC No	S1242636D
Email Address	MARYNYS@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91710486
Alternative Phone No	OTHERS-91710486

#### Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	GOLF 1.4 CLBMT 90 TSI D7F
Exact Purpose for which vehicle was being used at time of accident	
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	A28635675 AVW
Cover Note Number	

#### Driver

Name of Driver	WONG MARY
NRIC No	S1242636D
Date Of Birth	11/08/1957
Occupation	INDOOR
Date Of Driving Pass	19/06/1978
Driving Experience	40 YEARS AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-91710486
Fax Number	
Contact Number	OTHERS-91710486
Email Address	MARYNYS@GMAIL.COM

Address	20 ALNWICK ROAD
Postcode	559974
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?	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

REFER TO SKETCH PLAN

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO NOT DOWNLOADED YET
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

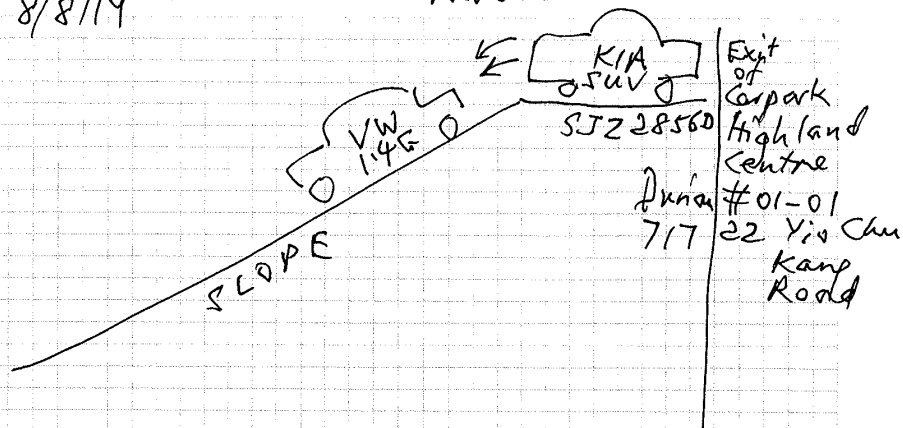
Vehicle Registration Number	SJZ2856D
Vehicle Make/Model/Colour	SUV SORENTO
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MR THIN
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

SKETCH PLAN

8.03-8.06pm  
8/8/19

Male Driver Mr. Thin  
Reversed into Me



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

AROUND 8.03-8.06pm. 8/8/19

I was in queue of 3 vehicles going out of carpark Highland Centre #01-01 22 Yio Chu Kang Road after buying duvions from 717 Trading. I was at least 3 feet away from KIA SJZ 28560.

SJZ 28560

The car in front of the queue went out of the gantry. ~~It~~ suddenly reversed into me and I honked immediately and ~~he~~ <sup>he did not</sup> managed to stop the car. A man (the driver Mr Thin) and a woman (Jolene They) came out of the car and both apologised to me. He said he wasn't thinking straight. Their car was not damaged much, but my car bonnet and front was smashed.

I was shocked, but ~~as~~ Another car came behind us and we both got out of the carpark and talked in the next road. She said their insurance will settle my repairs. She gave me her business card and we exchanged phone numbers. JOLENE THEY. Sales Manager 98312218. jolene.they@fulcoleasing.com.sg FULCO LEASING PTE LTD. 22 Ubi Rd 7, Fulco Building, S 408617 Tel. 67436266. They refused to tell me their IC Numbers and

DECLARATION said the insurance will settle. later I sent Jolene photos of my car and she agreed that her driver is taking responsibility. I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Date & Time:

10/6/19  
1400

Driver's Signature

(If driver is not the policyholder)

Date & Time:

10/6/19  
1400

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

**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**.
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. 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.
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:

10/6/17

1700

Driver's Signature

(If driver is not the policyholder)

Date & Time:

10/6/17

1700

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

**MSIG**

MSIG Insurance (Singapore) Pte. Ltd.  
Shenton Way #21-01 SGX Centre 2 Singapore 068807  
Tel: (65) 6827 7888 Fax: (65) 6827 7800  
Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

## Certificate of Insurance

ORIGINAL

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 28635675 AVW

Excess : SGD500

Windscreen Excess : SGD100

1. Index Mark and Registration Number of Vehicle

SBY60X

2. Name of Policyholder

Wong Mary

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

30/10/2018

4. Date of Expiry of Insurance

29/10/2019

5. Persons or Classes of Persons entitled to drive\*

Wong Mary

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.



Signature / Date

Counter-Signatory:

Winner Consultancy Pte. Ltd.

This certificate is not valid unless it is signed for & on behalf of the Company and Counter-Signed by a duly authorised representative of the Counter-Signatory.

XWOPLIKS2018100110239167

MSIG Insurance (Singapore) Pte. Ltd.  
Approved Insurers

Amy Ler  
Senior Vice President, Agencies

**MSIG**

Insurance (Singapore) Pte. Ltd.  
 100, Raffles Place #21-01 SGX Centre 2 Singapore 068807  
 (65) 6827 7888 Fax: (65) 6827 7800  
 Reg. No. 200412212G GST Reg. No. 20-0412212G

**VW DRIVEEASY****RENEWAL CERTIFICATE**

Policy Number	Period of Insurance	Place of Issue
A 28635675 AVW	30/10/2018 to 29/10/2019	SINGAPORE
Name and Address of Insured		Date of Issue
Wong Mary 20 Alnwick Road SINGAPORE 559974		01/10/2018
		Account Number
		156346
Premium	GST	Total Due
SGD805.18	SGD56.36	SGD861.54

**RISK NUMBER 1****VW DRIVEEASY****OCCUPATION**

Doctor

**SCOPE OF COVER** Comprehensive**INTEREST INSURED**

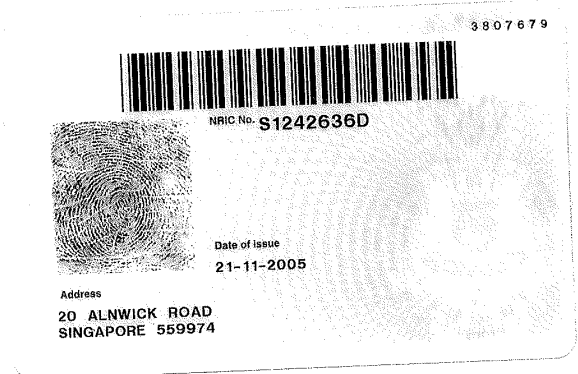
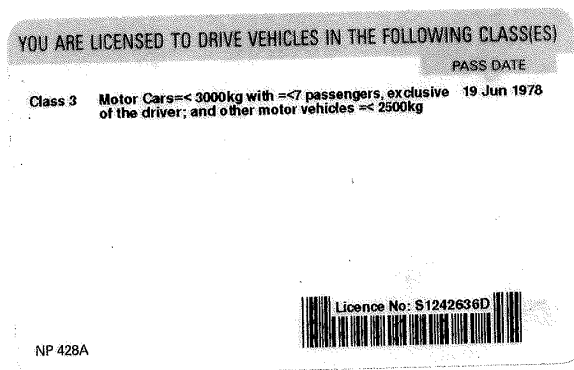
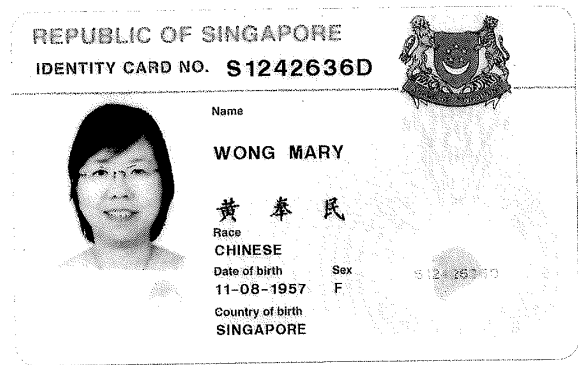
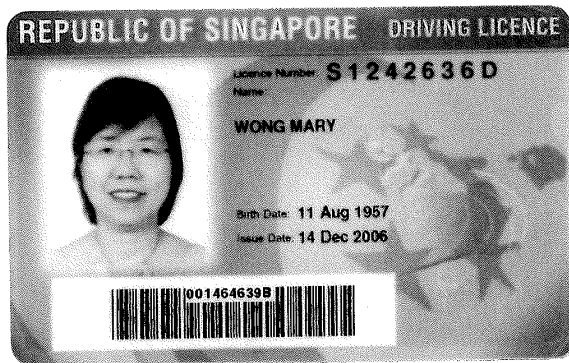
<b>REGISTRATION NO.</b>	SBY60X	<b>SUM INSURED</b>	MARKET VALUE
<b>MAKE/MODEL</b>	Volkswagen Golf 1.4	<b>INCL. COE/PARF</b>	YES
<b>ENGINE NUMBER</b>	CXS259153	<b>OFF-PEAK CAR</b>	NO
<b>CHASSIS NUMBER</b>	WVWZZZAUZFW356921	<b>NO CLAIM DISCOUNT</b>	50.00 % (or F/D)
<b>YEAR OF MFG</b>	2015	<b>GOOD DRIVER'S</b>	
<b>CAPACITY</b>	1,395 C.C.	<b>DISCOUNT</b>	SGD42.38
<b>SEATING CAPACITY</b>	5 (INCL. DRIVER)	<b>NCD PROTECTOR</b>	COVERED
<b>WINDSCREEN</b>	UNLIMITED	<b>EXCESS</b>	SGD500
		<b>ANNUAL PREMIUM</b>	SGD805.18

**ACCESSORIES** Aircon, radio/cassette/compact disc player, in-vehicle unit, rust-proofing and other accessories that are factory fitted.

**AUTHORISED DRIVERS**

Wong Mary

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



Accident Photo





Accident Photo



**Accident Photo**



**Accident Photo**



**Accident Photo**



Accident Photo



**Accident Photo**



Accident Photo

