

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	20/06/2019 17:06
Date Of Accident	20/06/2019 14:15
Exact Location Of Accident	KOVAN ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SME8537K
Insured/Policyholder	
Name Of Registered Owner	THE CAR REGENCY PTE LTD
Co Reg No	200703745Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97308778
Alternative Phone No	OFFICE-97308778

Vehicle Particulars

Manufacturer	HONDA
Model	FREED HYBRID-1.5 G (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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 HIRE

Insurance Company

Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	CN 42533
Cover Note Number	19/10/2018 - 18/10/2019

Driver

Name of Driver	SIM BAK TONG
NRIC No	S7131417J
Date Of Birth	08/09/1971
Occupation	INDOOR
Date Of Driving Pass	14/11/2003
Driving Experience	15 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97308778
Fax Number	
Contact Number	OTHERS-97308778
Email Address	JOHNNYSIM2002@YAHOO.COM.SG

Address	452 HOUGANG AVE 10 #02-569
Postcode	530452
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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)	0

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 THE SKETCH PLAN BY DRIVER

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	PASS TO OWN WORKSHOP
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	EU730G
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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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:

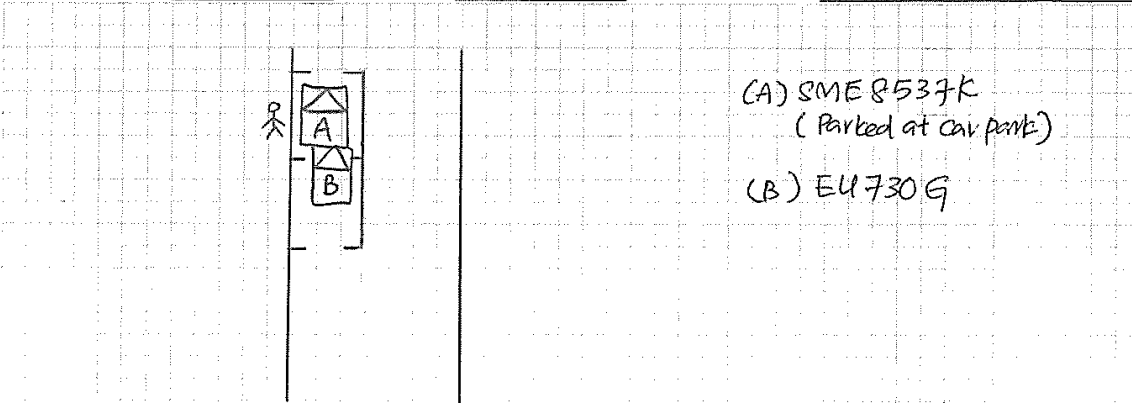


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan Pg. 2

SKETCH PLAN

Date of Accident: 20/6/2019 Time: 2:15 PM Location: Kovan Road
 My Vehicle A : SME8537K Vehicle B : EU 730 G Vehicle C/Others : _____



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 20/6/2019 at about 2:15 PM, my vehicle (A) SME8537K was parked at carpark at Kovan Road. I stand at beside my car. Suddenly, vehicle (B) EU 730 G park behind my vehicle (A) SME8537K & accidently hit onto my vehicle (A) SME8537K rear portion.
() Claim OD/TP at Ah Lim Motor (☒) Claim OD/TP at other workshop () Reporting Only
Remarks : Please forward a copy of my efile accident report to: My workshop : <u>Optima Werkz Pte Ltd</u> email address : <u>cily.101@ow.sg</u> & myself : _____ email address : _____
Note : Please take note that your insurer have 14 days timeframe for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information.

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 Company Personnel's Signature
Name:
NRIC/FIN No.:

EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110
tel 65 6223 9433 | fax 65 6224 3503 | www.eqinsurance.com.sg
reg no. 1978-00480-N



EQ Motor Cover Note

ORIGINAL

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 and Compensation) Rules 1959 (Malaysia)

Whereas the insured named in the Schedule below having proposed for insurance in respect of the Motor Vehicle described in the Schedule below the risk is hereby HELD COVERED in the terms of the Company's usual form of Policy applicable thereto for the period as stated below unless the cover be terminated by the Company by notice in writing in which case the insurance will thereupon cease and a proportionate part of the annual premium otherwise payable for such insurance will be charged for the time the Company has been on risk.

SCHEDULE

Agent / Broker Code: John Teo

Policy No. _____ Cover Note no.: 42533

Name of Insured The Car Regency Pte Ltd

Registration Number _____

Make / Model Honda Freed Hybrid

Year of Registration 2018

Cubic Capacity 1496

Engine Number LEB5610738

Chassis Number GB71075531

Cover Type Comprehensive

Value market value at the time of loss

Period of Insurance From: 19/10/2018 (Time: _____ any/pm) To: 18/10/2019

Hire Purchase Company _____

Excess \$2000 (Section 1) & \$2000 (Section 2)

Type Of Plan ☒ Classic ☐ Premier

We hereby certify that this Cover Note is issued in accordance with the provisions of Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.

Not valid unless counter-signed by Authorized Signatory

[Signature]
Signature / Date

18/10/18

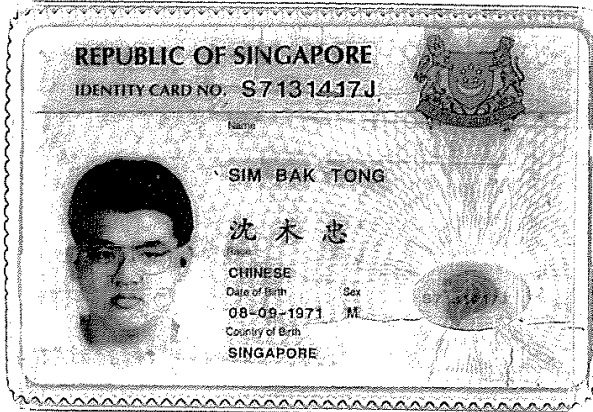
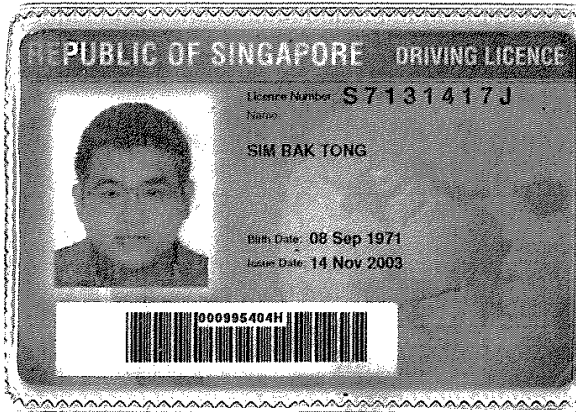
EQ Insurance Company Limited

[Signature]
Authorized Signatory

Important Notice:

- This Cover Note is valid for 30 days from the first day of the Policy Period.
- Premium Warranty (for Individual Customers): Please note that the premium in full should be paid before inception date shown above in order for the insurance cover to be valid.

A Member of Citystate



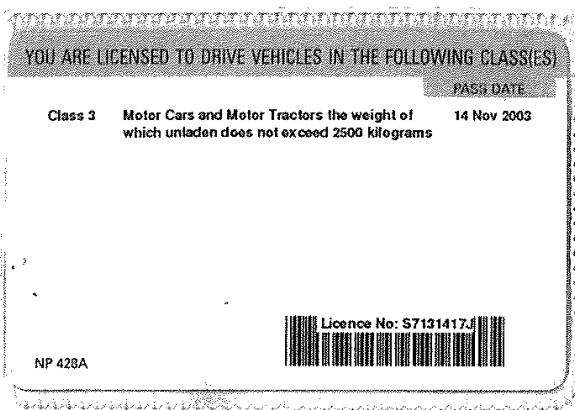
HP: 97308778

Email: johnnysm2002@yahoo.com.sg

Weather: Dry / Clear

Passenger: No one in car

Camera - Yes



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

