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 <u>truthful and accurate</u> 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.

aforesaid.	ou nereby consent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	18/07/2019 16:11
Date Of Accident	17/07/2019 11:40
Exact Location Of Accident	CARPARK OF RAFFLES CITY SHOPPING CENTRE B2
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLW9374Z
Insured/Policyholder	
Name Of Registered Owner	ALENE POH LI CHENG
NRIC No	S9022740H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97659470
Alternative Phone No	OFFICE-97659470
Vehicle Particulars	

Vehicle Particulars

Manufacturer MERCEDES-BENZ

Model CLA180

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 EQ INSURANCE COMPANY LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number DMPPHQ19-001599

Cover Note Number

Driver

Name of Driver ALENE POH LI CHENG

NRIC No S9022740H

Date Of Birth 26/06/1990

Occupation INDOOR

Date Of Driving Pass 31/01/2017

Driving Experience 2 YEARS AND 5 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-97659470

Fax Number

Contact Number OFFICE-97659470

EMail Address NOEMAIL

Address 156 CANBERRA DRIVE #03-25

Postcode 768082

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 - MAJOR/MINOR RD

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 NO

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

NO

YES

NO

Was any other material or property damaged?

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?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

ON 17/07/2019 AT ABOUT 1145HRS AT BASEMENT 2 CARPARK OF RAFFLES CITY SHOPPING CENTRE, NO. 252 NORTH BRIDGE ROAD. I WAS TRAVELLING ON THE ABOVE MENTIONED DRIVEWAY AND SUDDENLY, A VEHICLE B EXITED OUT FROM THE SIDE DRIVEWAY WITHOUT STOPPING AND WITHOUT GIVING WAY TO MY ONCOMING VEHICLE HENCE COLLIDED ONTO MY RIGHT FRONT PORTION OF MY VEHICLE A CAUSING DAMAGES TO MY VEHICLE.

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 SMH5662K

Vehicle Make/Model/Colour

VEHICLE B

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 Pg. 1

SKETCH PLAN

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- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance
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 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 aforeseid.
- S. Consent under the Personal Data Protection Act (POPA)

t understand, acknowledge, agree and consent that:

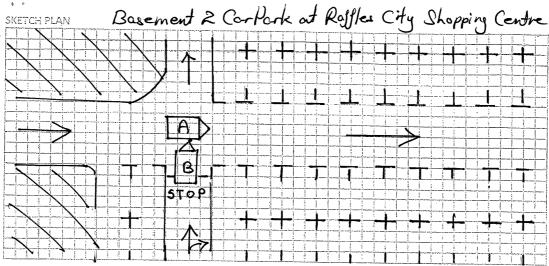
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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 daims;
 - (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 tirms, may/are permitted to collect, use, disclass and/or process my Personal Information for one or more of the above Perposes; and
- (c) thy Personal Information may/can be disclosed by any of the insurers and/or GIA to their third party service providers or agents/including their lawyars/law firms), which may be sted outside of Singapore, for one or more of the above Purposes.
- (d) my flersonal information will also be collected and used to compile cisims history for the purpose of fraud direction, investigation and management in present and all future claims.
- (a) The information so collected under (d) above thay be shored / disclosed:
 - (i) to all insurers end/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.

Policyholdur a Signatur Date & Time:

Oriver's Signature (If driver is not the policyholder) Date & Time:

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

MG3 SOLUTIONS



On 17/07/2019 at about 1145 hrs at Car Park of Roffles City Shopping Centre, No. 252 North Bridge Road. I was travelling on the mentioned driveway and suddenly a Vehicle (B) side driveway without giving way to on coming wehicle Portion of my Vehicle (A) to my vehicle SLW 9374 Z

Note: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Date & Time:

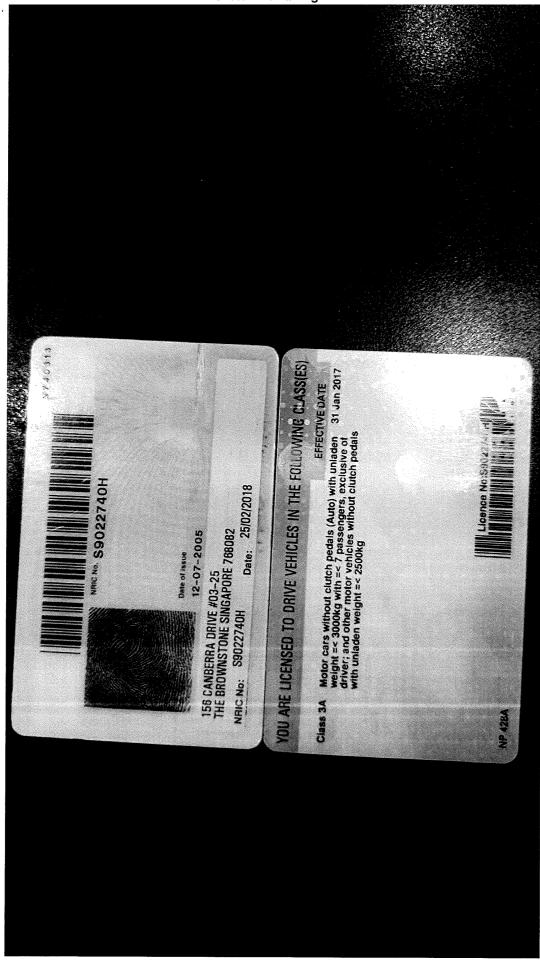
Driver's Signature (if driver is not the policyholder) Date & Time:

under your own comprehensive policy. Please check your policy for more information.

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

CASHC Bungfordow, vs





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Sketch Plan #5 Pg. 1

EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110 tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg rea no. 1978-00490-N



CERTIFICATE OF INSURANCE

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 RISKS AND COMPENSATION) RULES 1996 EDITION(REPUBLIC OF SINGAPORE) OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

PRIVATE CAR Comprehensive Premier

Certificate No.: DMPPHQ19-001599

1. Index Mark and Registration Number of Vehicles

Premier Plan - Any Workshop

Form: MX2 Excess:

Insured&Named Driver Unnamed Driver YEIDR

S\$500.00(Section 1 - Own Damage) S\$1,000.00(Section 1 - Own Damage) Additional S\$3,000.00

WindScreen

S\$100.00

2. Name of Policyholder ALENE POH LI CHENG

SLW9374Z

3. Effective Date of the Commencement of Insurance for the purpose of the Act 09/03/2019

4. Date of Expiry of Insurance 08/03/2020

5. Person 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 regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage.

6. Limitation as to use*

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover:

- (a) use for hire or reward
- (b) use for racing, pace-making, reliability trials or speed testing
- (c) use for the carriage of goods (other than samples) in connection with any trade or business
- (d) 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.

IVWE 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 and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase: Oversea Chinese Banking Corporation Limited

A000180/Hund & Hobbes Date of Issue: 01/03/2019 13:24

Authorised Signatory EQ Insurance Company Limited

Note

Young, Elderly &/or Inexperience Driver (YEIDR) refers to any person authorized to drive who is below 26 years old or above 70 years old and/or the holder of a qualified driving licence of less than 2 years duration.

A Member of Citystate

EQ Insurance-MARS Motor Accident Help Center





