#### SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

Fax Number
Contact Number

**EMail Address** 

- 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

	ACCIDENT STATEMENT
Date Of Report	29/07/2019 14:43
Date Of Accident	28/07/2019 12:15
Exact Location Of Accident	BLK 241A COMPASSVALE WALK MSCP
Country/State of Loss	SINGAPORE
Ţ	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKD8348T
Insured/Policyholder	
Name Of Registered Owner	TAN YEW CHOON
NRIC No	S7401202G
Email Address	ANDYTAN@ENGHUATHENG.COM.SG
Mobile Phone No	(LOCAL) +65-94558587
Alternative Phone No	OTHERS-94558587
Vehicle Particulars	
Manufacturer	NISSAN
Model	GT-R 3.8 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 CAR
Insurance Company	
Name of Insurance Company	ETIQA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	M0011278
Cover Note Number	25/05/2019 - 24/05/2020
Driver	
Name of Driver	TAN YEW CHOON
NRIC No	S7401202G
Date Of Birth	18/01/1974
Occupation	INDOOR
Date Of Driving Pass	01/09/2004
Driving Experience	14 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94558587

OTHERS-94558587

ANDYTAN@ENGHUATHENG.COM.SG

Address BLK 237 COMPASSVALE WALK #05-536

Postcode 540237

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 COLLIDED INTO PARKED VEHICLE

Weather Conditions CLEAR
Road Surface DRY

#### **Other Information**

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

2

involved in the accident

NO

Was any body injured in the Accident?
Was any injured conveyed to hospital by

NO

ambulance?

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?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

NO

### **Circumstances of Accident**

REFER TO THE ATTACHED SKETCH PLAN BY DRIVER.

### 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 SMH5779H

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver WONG KIM YONG

NRIC/Passport Number S7242840D

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 21

# Sketch Plan Pg. 1

Vehicle A: SKD8348	Time: 12-15 PM Location: BIK 241A COMPASSVALE TO Vehicle B: SMH 5779 H Vehicle C:	*******
ETCH PLAN		
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	-> [8]	
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ESCRIBE CIRCUMSTANCES OF		
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Veh B:	Wong Kim Yong / S724284	08
	V / I	U.S
	Wong Kim Yong / S724284 and Party.	0,8
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#### Sketch Plan Pg. 2

#### **SKETCH PLAN**

#### IMPORTANT NOTICE

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- 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:

- 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

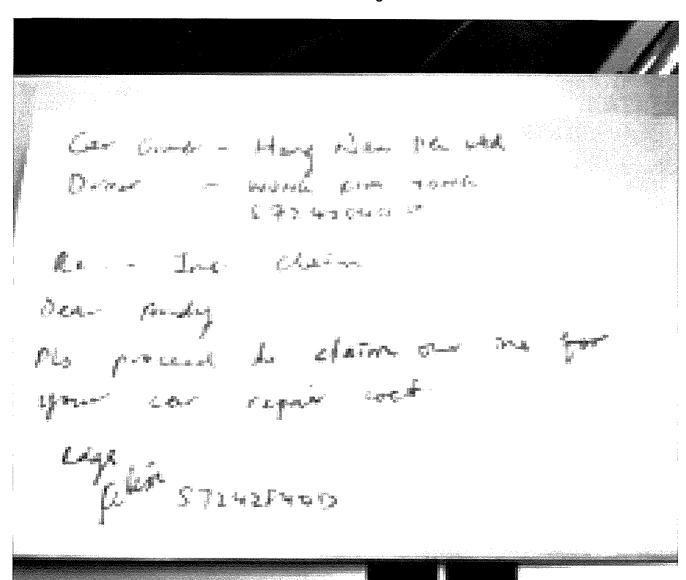
(ii) for complying with requirements under any regulations, laws or court orders.

lder's Signature Policynoises 24/07/19

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

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:





# INTERVIEW FORM

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Name (Driver):	: TAN	YEW	GIOON	
Policy No	: Mo	01127	P	
Vehicle No	: SKD	834	87	-
Place of Accident	: <u>BK</u>	2419	COMPASSIVALE WALK	Mech
Insured Driver's relationship with	Insured :		Owner	
Drink Driving of Insured and/or la	isured Drive	r:		
No of passenger(s) in Insured veh	icle :			
Injury to Insured and/or Insured d				
		<del></del>		
Third Party Vehicle No (if any)	;	SMA	187794	
No of passenger(s) in Third Party	Vehicle: _			
lnjury to Third Party driver and/c				
Type of collision and the extension	veness of the	damages to	o all whicles/Third Party property in	volved:
Any witness to the accident (if yo	es, please inc	licate Name	, Contact No and a copy of the states	nent):
Traffic Police report (enclosed)	: Yes /	No.		The state of the s
Please obtain a copy of the worker is involved)	driving lice	ence of Ins	sured driver and/or work perm	it (where foreign
Driver (Name & Signature) / Da	) A		(* (* <u>(* (</u>	
I, affirmed the above informating best knowledge	iion is given	to	Attended by (Name:	

Etiga Institutione Pte Ltd One Raffles Quay #22-01 North Tower Singapore 048583

T +65 63360477 F +65 63392109

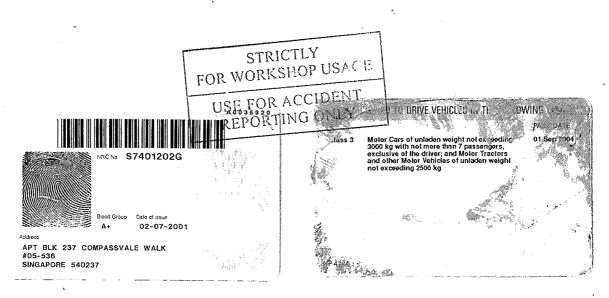
WWW.eliqa.com.sg Company Res. Ho. 201331905K

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### Sketch Plan Pg. 5



Ill. 9955 8587



M. No Ca. No Ca. No eTiQa Insurance MX1 80000008 Cov. Type: CO

#### **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. M0011278

1. Index Mark and Registration SKD8348T

Number of Vehicle

Name of Policyholder

Tan Yew Choon

3 Effective Date of Commencement of

25/05/2019 Excess: Named Drivers

s\$2,000 s\$2,500

Insurance for the purposes of the Act

Excess: Unnamed Drivers Excess: Windscreen s\$2,500 s\$100

4. Date of Expiry of Insurance

24/05/2020

Hire Purchase: Lian Hong Private Limited

5. Persons or Classes of Persons entitled to drive

(A) THE POLICYHOLDER.
THE POLICYHOLDER MAY ALSO DRIVE A MOTOR CAR NOT BELONGING TO HIM OR HIRED (UNDER A HIRE PURCHASE AGREEMENT OR OTHERWISE) TO HIM OR HIS EMPLOYER OR HIS PARTNER.
(B) ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HIS PERMISSION.

Tan Yew Choon

Leona Hong Moh Yi

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 permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle.

6. Limitations as to Use

USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS OR PROFESSION.
THE POLICY DOES NOT COVER:
( i) USE FOR HIRE OR REWARD.
( ii) USE FOR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING.
(iii) USE FOR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS.
( iv) 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 bindings.

#### Policy Owner's Protection Scheme

This policy is protected under the Policy Owner's Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact your insurer or visit the GIA / LIA or SDIC websites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

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).

For and on behalf of Etiqa Insurance Pte. Ltd.

Approved Insurer

Authorised Signature

GOP32702 21/05/2019 14:38:28





















