

MCGM19107527 / Chew Goon Motor - AMK ENTRY DATE & TIME: 16/08/2019 15:43 SUBMITTED BY: Lau Yee Thong

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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 This Form must be completed by the Policyholder and/or the Authorised Driver.
 Information provided must be as <u>truthful</u> and <u>accurate</u> as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.

- 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	16/08/2019 15:43
Date Of Accident	16/08/2019 13:15
Exact Location Of Accident	BUKIT TIMAH ROAD BESIDE BLACKMORE DR
Country/State of Loss	SINGAPORE
material State Control of the D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SJG3658C
Insured/Policyholder	
Name Of Registered Owner	SMIIU
Co Reg No	53329516E
Email Address	SAMUEL333LOU@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81215360
Alternative Phone No	OFFICE-81215360
Vehicle Particulars	
Manufacturer	HONDA
Model	CIVIC 1.8L A
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5096690706-01
Cover Note Number	
Driver	
Name of Driver	LOU AIK HOE (LIU YIHE)
NRIC No	S7902573I
Date Of Birth	24/01/1979
Occupation	INDOOR
Date Of Driving Pass	15/02/1999
Driving Experience	20 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81215360
Fax Number	
Contact Number	
EMail Address	SAMUEL333LOU@GMAIL.COM

Address BLK 458 YISHUN AVENUE 11 #11-738

Postcode 760458

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle Registration Number of Environment Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

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)

Passenger 1

NAME:

2

NO

YES

NO

2

NO

NO

: RUCHA KHANDEMA

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

AT AROUND 13:15 HRS ON 16.08.2019, I WAS DRIVING MY CAR SJG3658C ALONG BUKIT TIMAH ROAD TOWARDS THE DIRECTION OF UPPER BUKIT TIMAH ROAD ON THE RIGHT LANE OF THE 3 - LANE DUAL CARRIAGEWAY, AT THE SPEED OF APPROXIMATELY 50 KM/PH WHEN A BLUE CAR SKA1860S WHICH WAS TRAVELLING ON THE LEFT LANE INITIALLY, THEN FILTERED TO THE CENTRE LANE AND ABRUPTLY CUT INTO MY LANE, ENCROACHING MY PATH, RESULTING IN A COLLISION. THE CENTRE AND RIGHT LANE HAS A DOUBLE WHITE LINE AT THE POINT WHEN THE OTHER CAR CUT IN.

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKA1860S

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver NRIC/Passport Number Contact Number PRIVATE CAR

SONG WENNA S1558516A

96215071

Address

Postcode Insurance Company Name Nature Of Damage No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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- 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
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 interested parties.
- By the ladgment 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:

RES NO.

Oriver's Signature \ (If driver is not the policyholder)

Date & Time: 16 . 8 . 19

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Oniver's Signature) Oniver's Signature) Oniver's Signature)	Reporting Centre Personnel's Signature National National
DECLARATION We declare the freegoing particulars are true in every respect.	WAY .
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8 JG 3658 C along Butit Track Ros	L WAS DANIES MES CON
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	B: 21415602
(south divides (Resb)	
	Juounitras Indiana din
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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) Cover : drivo CLASSIC

Certificate Number: 5096690706-01

1. Index mark and Registration Number of Vehicle

Chassis Number

2. Name of Policyholder 3. Effective Date of Insurance

4. Expiry Date of Insurance

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.

: SJG3658C

: 27 Dec 2018

: 26 Dec 2019

: SMIIU

: JHMFD16308S216134

6. Limitations as to Use# (a) Use for social domestic and pleasure purposes and 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 for the carriage of goods (other than samples) in connection with any trade or business.

(c) Use for any purpose in connection with the Motor Trade.

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 headings.

: S\$2,000 **EXCESS (SECTION 1)** : S\$1,500 **EXCESS (SECTION 2)** : S\$100 WINDSCREEN EXCESS : N/A ADDITIONAL EXCESS

: PLEASE REFER OVERLEAF UNNAMED DRIVER EXCESS

: NO REPAIR AT OWNER'S PREFERRED WORKSHOP : YES **INSURE WITH COE** : NO NCD PROTECTION : NO TRANSPORT ALLOWANCE : NO **EXCESS WAIVER** : N/A PRIMARY DRIVER NAMED DRIVER (1) : N/A NAMED DRIVER (2) : N/A HIRE PURCHASE COMPANY : N/A

: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS SUM INSURED

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)

: AUTOSHIELD PTE. LTD. (00000573469)

Date of Issue

: 20 Dec 2018 09:57 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	D. C.	
Owner ID Type:	Business	
Owner ID:	516E	
Vehicle Details		
/ehicle No.:	SJG3658C	
/ehicle to be Exported:	No	
ntended Deregistration Date:	16 Aug 2019	
Vehicle Make:	HONDA	
/ehicle Model:	CIVIC 1.8L A	
Primary Colour:	Blue	
Manufacturing Year:	2008	
Engine No.:	R18A13035568	
Chassis No.:	JHMFD16308S216134	
Maximum Power Output:	103.0 kW (138 bhp)	
Open Market Value:	\$21,302.00	
Original Registration Date:	27 Jun 2008	
First Registration Date:	27 Jun 2008	
Transfer Count:	1	
Actual ARF Paid:	\$21,302.00	
ntended PARF Rebate Details		
PARF Eligibility:	Forfeited	
PARF Eligibility Expiry Date:		
PARF Rebate Amount:	\$0.00	
ntended COE Rebate Details		
COE Expiry Date:	26 Jun 2023	
COE Category:	B - Car (1601cc & above)	
COE Period(Years):	5	
PQP Paid:	\$18,953.00	
COE Rebate Amount:	\$14,635.00	
Total Rebate Amount: Message	\$14,635.00	

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 16 Aug 2019