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 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 aforesaid.	bu hereby consent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	28/08/2019 13:13
Date Of Accident	28/08/2019 09:20
Exact Location Of Accident	CTE AND EXITING TO JALAN BUKIT MERAH TO SGH
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJL4431G
Insured/Policyholder	
Name Of Registered Owner	TAN SIONG HWEE
NRIC No	S8011862G
Email Address	IZINC@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-97557753
Alternative Phone No	OTHERS-97557753
Vehicle Particulars	

SUZUKI Manufacturer

Model SWIFT SPORT-1.6 ZC31S (M)

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?

REPORTING ONLY If No, Please state action to be taken PRIVATE CAR Vehicle Category

Insurance Company

Name of Insurance Company INDIA INTERNATIONAL INSURANCE PTE LTD

Type Of Coverage **COMPREHENSIVE**

Fleet Policy NO

Policy Number D18MPC0002760

Cover Note Number

Driver

Name of Driver TAN SIONG HWEE

NRIC No S8011862G Date Of Birth 22/04/1980 Occupation **INDOOR** Date Of Driving Pass 27/02/1999

Driving Experience 20 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97557753

Fax Number

Contact Number OTHERS-97557753 **EMail Address** IZINC@HOTMAIL.COM Address BLK. 890A WOODLANDS DRIVE 50

#12-287

Postcode 731890

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 WET

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

1

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

YES

Was any other material or property damaged? I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO 1

Number of Passengers (Including Driver)

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

NO

If Yes, against whom?

Circumstances of Accident

I WAS DRIVING ALONG CTE AND EXITING TO JALAN BUKIT MERAH TO SGH. AT THE SLIP ROAD THE EXPRESSWAY, THE CAR INFRONT JAM HIS BRAKE. UPON SEEING THAT, I ALSO STEP ON MY BRAKE. THE ROAD WAS WET AND MY CAR DID NOT MANAGE TO STOP AND SKIDDED AND KNOCKED ONTO THE CAR INFRONT OF ME. AFTER CHECKING WITH THE DRIVER INFRONT, HE DID VERBALLY MENTIONED THAT THE CAR INFRONT OF HIM ALSO STOP SUDDENLY BUT HE MANAGED TO STOP IN TIME.

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 SLC1192P
Vehicle Make/Model/Colour MAZDA 2

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

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 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)
 - 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:

Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Cehric Personal Industrial Park East 1
Reporting Cehric Personal Industrial Park
Name: 1519 2008 (1984) Fax: 5219 2096
NRIC/FIN No.: 544 5 3 5 710

S Automobile Services Pte Ltd

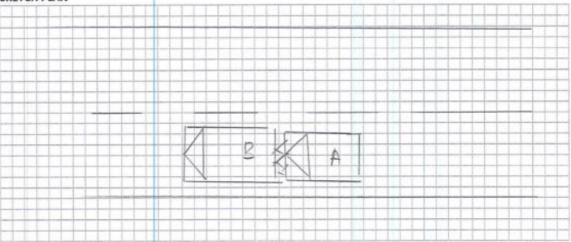
推科人有限公司

GIARMC ShetzhPlanForm V3

Sketch Plan #2

A-SJL44319 B-SLC1192P

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

SGH At the SI	ip road ext	ting the eg	ressing expre		ar
afront jam his The road was					
and knocked ont				TO STOP THE	
	A CANADA TANADA				
After checking i	with the dri	ver Infront	he did vert	pally mentioned	d
that the car inf					
stop in time.					
			15		

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 p

(If driver is not the policyholder)
Date & Time:

GIARMC SketchPlanForm_V3

Tys Automobile Services Pte Ltd

Reporting Gentre Parament, in Figure 1 Park

Name: Tel: 6219 2098 (Singapore 左2000

NRIC/FIN No.:



INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k [GST. Reg. No. M2-0078806-X 64 [Cocil Street | #04 | #05 | #06-02 | 10B Building | Singapore 049711 Office (65) 63476100 Exait insure@ili.cum.sg Fax (65) 62244174 Website www.ii.com.sg

COVER: COMPREHENSIVE

CERTIFICATE OF INSURANCE

MUTOR 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)

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

CERTIFICATE NO.: D18MPC0002760

1. Index Mark and Registration Number of Vehicle

: SJL4431G

: JSAEZC31S00202289

2. Name of Policyholder

: TAN SIONG HWEE (CHEN SONGHUI)

3 Effective date of Insurance

: 27 Nov 2018

4. Expiry date of Insurance

: 26 Nov 2019

5. Persons or Classes of Persons entitled to drive*

(a) The Policyholder

The Policyholder may also drive a Motor Car not belonging to or hired (under a hire purchase agreement or otherwise) to him/her or his/her

employer or his/her partner

(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

6. Limitations as to use*

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

The Policy does not cover

- a) Use for hire or reward.
- Use for racing, pace-making, reliability trial, 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.

Insured and Named Drivers Excess Sect I: SGD600.00

SGD1.100.00

Unnamed Drivers Excess Sect I: Windscreen Excess:

SGD100.00

United Overseas Bank Limited

FOR DRIVERS BELOW 21 YEARS OR ABOVE 65 YEARS OF AGE &/OR LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, ADDITIONAL EXCESS OF \$2500/- ON SECTION I WILL BE APPLICABLE.

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).

Agent/Broker : A000059/KEE CINDY Date of Issue : 09/11/2018 10:02:56

MX1-Private Car (Insured Driving)

For India International Insurance Pte Ltd

R. Ravindra Kumar

hwechwa/09/11/2018 10:02:56

Page 1 of 1

09/11/2018 10:03:27

