

## 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	09/09/2019 15:47
Date Of Accident	09/09/2019 08:20
Exact Location Of Accident	FARRER ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBC7743D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAR HONG PTE LTD
Co Reg No	199202627M
Email Address	TARHONG@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-92271745
Alternative Phone No	OFFICE-62866255

### Vehicle Particulars

Manufacturer	ISUZU
Model	TFR54HSR
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 29078039 MKC
Cover Note Number	28/04/2019 TO 27/04/2020

### Driver

Name of Driver	YAP CHIAN LYE
NRIC No	S1390479J
Date Of Birth	08/08/1959
Occupation	OUTDOOR
Date Of Driving Pass	30/09/1982
Driving Experience	36 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92271745
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address APT BLK 888A TAMPINES ST 81 #02-1080 (S) 521888  
 Postcode  
 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 -  
 -  
 -  
 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?  
 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) 2  
 Passenger 1  
 NAME: : PALANISAMY VALLIAPPAN  
 GENDER: : MALE

### 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 WITH ATTACH.

### 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 SHD4855H  
 Vehicle Make/Model/Colour  
 Details Of Properties  
 Vehicle Category TAXI  
 Name of Driver LEONG SIEW SOON  
 NRIC/Passport Number S1106602Z  
 Contact Number 98383473  
 Address  
 Postcode  
 Insurance Company Name  
 Nature Of Damage  
 No. Of Passenger (Including Driver)

Accident Sketch Plan Pg. 1

SKETCH PLAN

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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:

- (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.

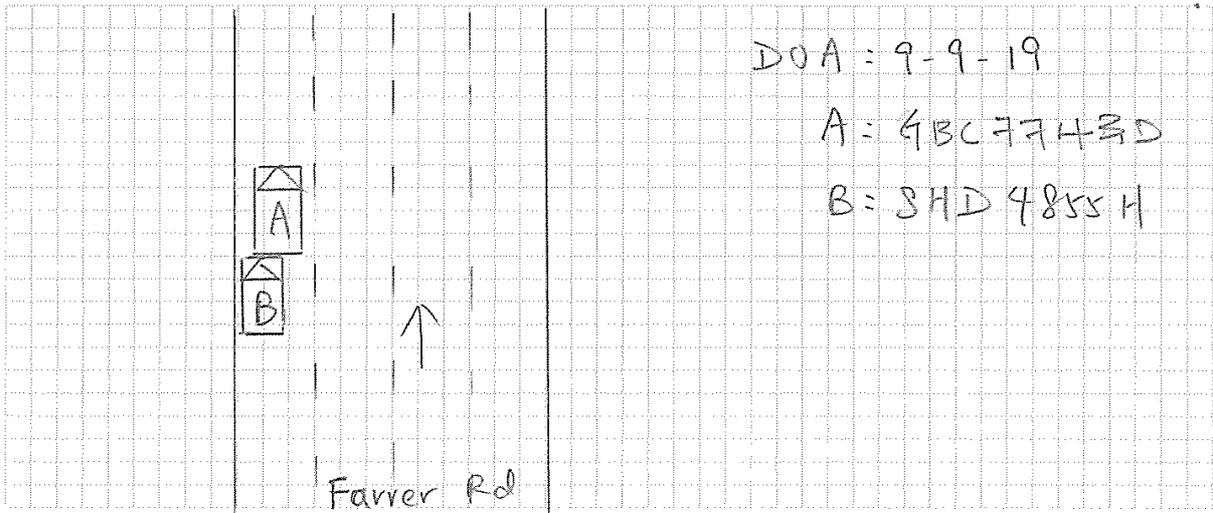
Policyholder's Signature
Date & Time:
Includes a circular stamp for T&A PTE LTD.

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Includes a circular stamp for MAN FOO KENG MOTOR WORKSHOP.

Accident Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling along Farrer Rd heading towards Queenstown, the traffic was heavy and slow, when the front vehicles stopped, I also stopped, but the rear taxi: SHD 4855H failed to stop in time and collided into the rear portion of my vehicle.

Insurance Co.	Mit Insurance (S)	PLC
Vehicle No.	GBC 7743D	Accident 9/9/19
<input type="checkbox"/>	Reporting Only	
<input type="checkbox"/>	Own Damage Claim	
<input checked="" type="checkbox"/>	Third Party Claim	
<input checked="" type="checkbox"/>	Other Workshop	

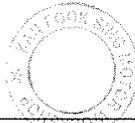
DECLARATION

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

driver's nric & license Pg. 1

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1390479J



Name  
YAP CHIAN LYE  
葉前未  
Race  
CHINESE  
Date of Birth  
08-08-1959 M  
Country of Birth  
SINGAPORE

1657100

FOR KFS ACCIDENT CLAIM USE ONLY

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S1390479J  
Name  
YAP CHIAN LYE  
Date of Birth: 08 Aug 1959  
Issue Date: 11 Dec 2007

001547823E

FOR KFS ACCIDENT CLAIM USE ONLY



1657100

NRIC No S1390479J



Blood Group Date of issue  
A+ 04-02-1994

APT BLK 888A TAMPINES CT 91 #02-1080  
SINGAPORE 621828

NRIC No: S1390479J Date: 14-10-1998 No: 2690154

FOR KFS ACCIDENT CLAIM USE ONLY

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

Class	Description	PASS DATE
Class 2B	Motorcycles =< 200 cc	22 Sep 1960
Class 3	Motor Cars=<3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg	30 Sep 1982
Class 4	*Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg *Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg	23 Apr 1983

Licence No: S1390479J

NP 428A



MSIG Insurance (Singapore) Pte. Ltd.  
 4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807  
 Tel +65 6827 7888, Fax +65 6827 7800  
 Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

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

Form M. Z. 300 Goods Carrying Vehicle - Sch I	COMMERCIAL VEHICLE Comprehensive
Certificate No. A 29078039 MKC	Excess : SGD500
1. Index Mark and Registration Number of Vehicle GBC7743D	
2. Name of Policyholder Tar Hong Pte Ltd	
3. Effective Date of the Commencement of Insurance for the purposes of the Act 28/04/2019	
4. Date of Expiry of Insurance 27/04/2020	
5. Persons or Classes of Persons entitled to drive*	
Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.	
* Provided that the person driving is permitted in accordance with the licensing or other laws or 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 in connection with the Policyholder's business. Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business. Use for social domestic and pleasure purposes. The Policy does not cover	
(1) Use for hire or reward or for racing pace-making reliability trial or speed-testing.	
(2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.	
* 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.	
This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).	

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) or any Amendment, Act or Acts passed in substitution thereof.

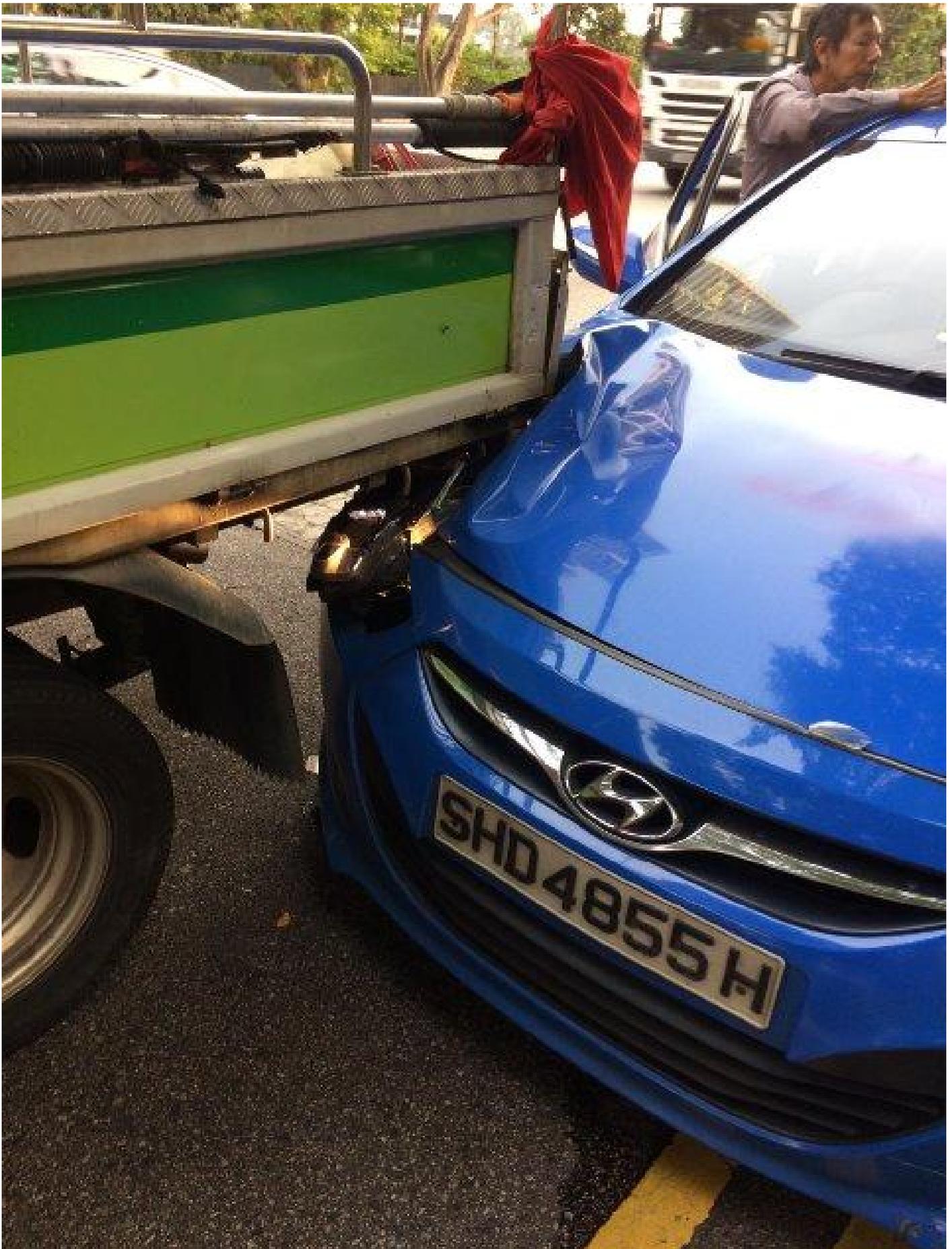
MSIG Insurance (Singapore) Pte. Ltd.  
 Approved Insurers

  
 for Chief Executive Officer

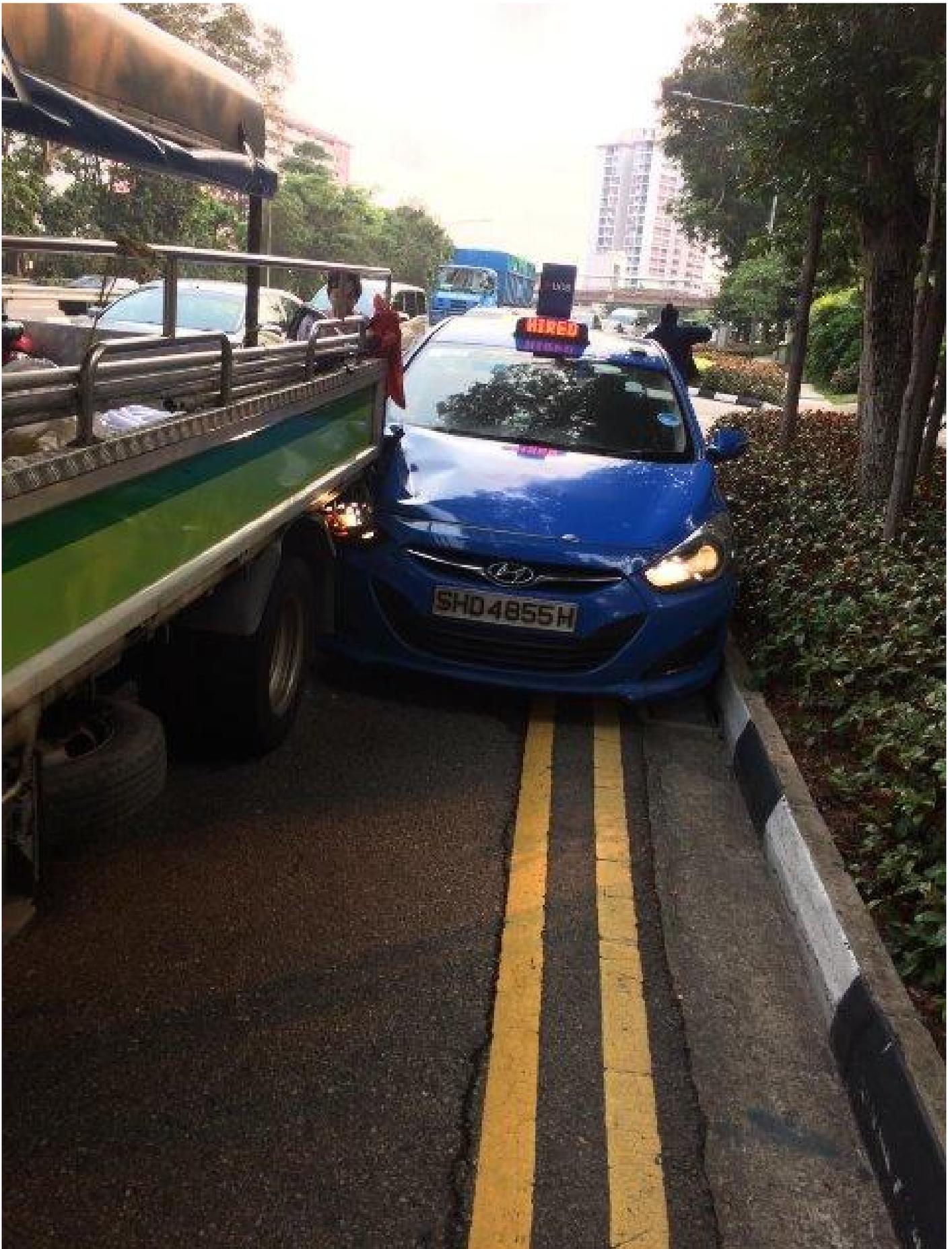
Accident Photo



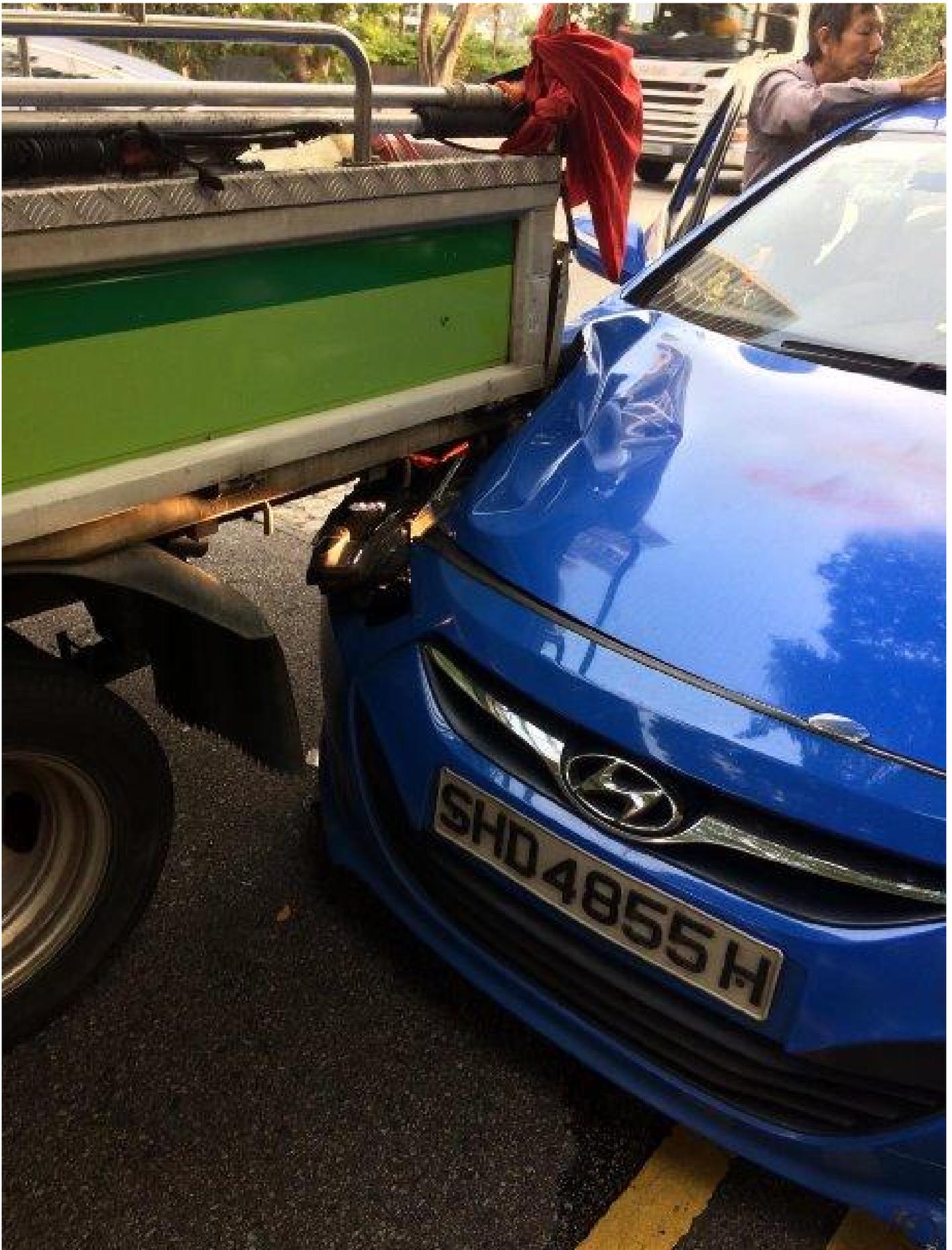
Accident Photo



Accident Photo



Accident Photo



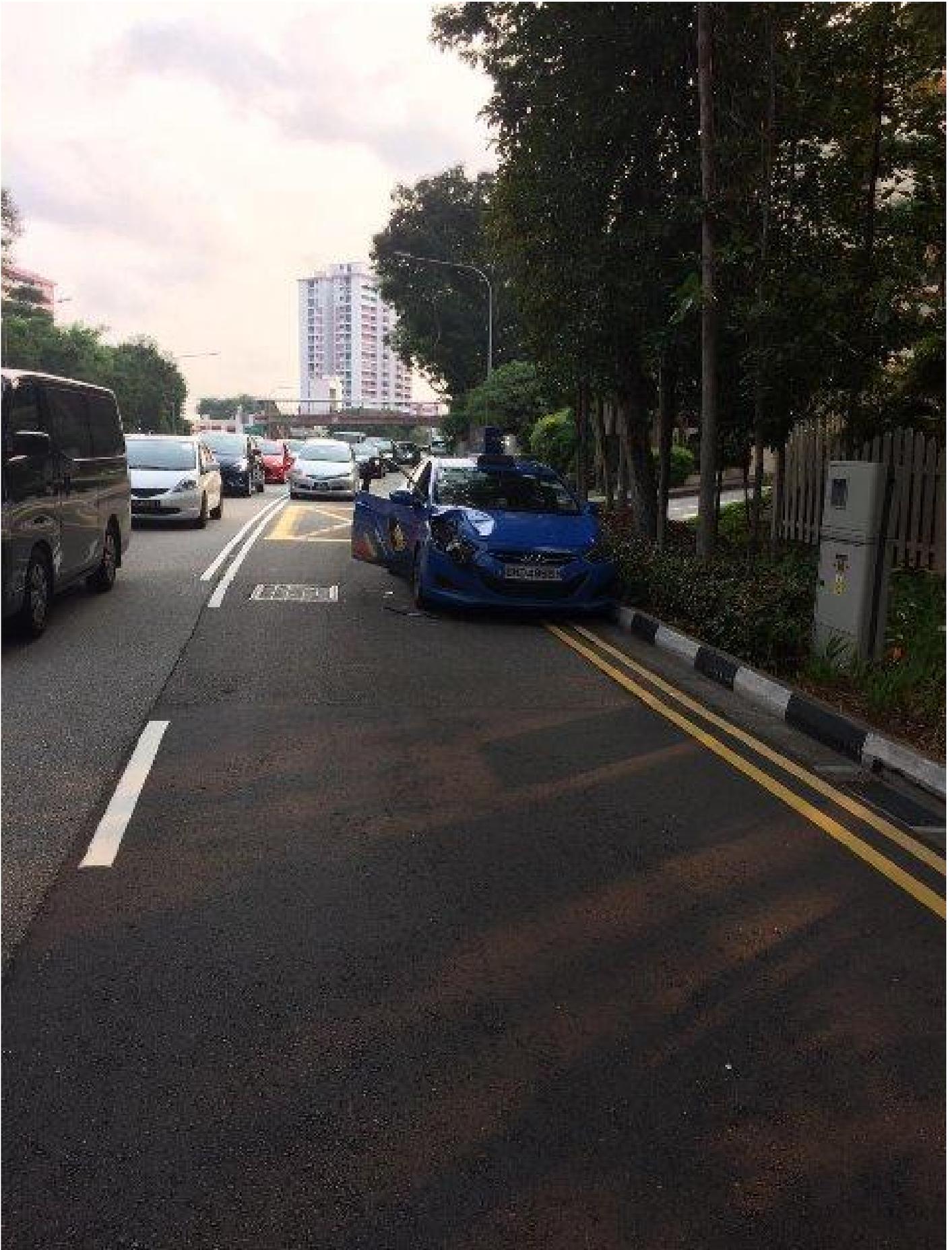
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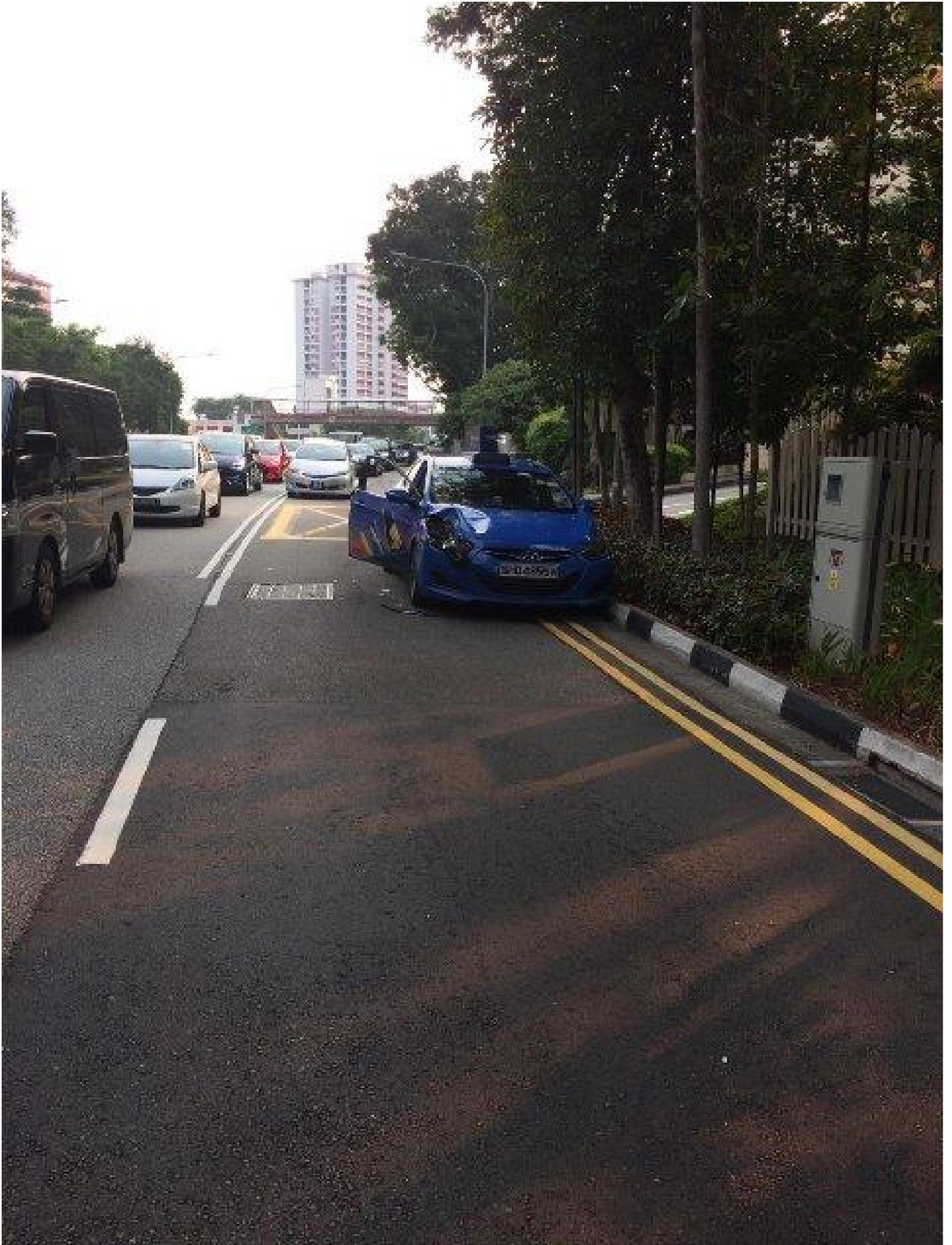
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