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.	
	ACCIDENT STATEMENT
Date Of Report	19/09/2019 10:45
Date Of Accident	18/09/2019 13:55
Exact Location Of Accident	ALONG BRADDELL ROAD OUTSIDE GUANGYANG SEC SCHOOL
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLX969L
Insured/Policyholder	
Name Of Registered Owner	LIM KOK ENG
NRIC No	S1617313D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98342161
Alternative Phone No	OTHERS-98342161
Vehicle Particulars	
Manufacturer	HONDA
Model	CIVIC 1.5 TURBO VTIS SR
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3017431900
Cover Note Number	
Driver	
Name of Driver	LIM JIAN HONG

 Name of Driver
 LIM JIAN HONG

 NRIC No
 \$9802395Z

 Date Of Birth
 20/01/1998

 Occupation
 INDOOR

 Date Of Driving Pass
 15/02/2018

Driving Experience 1 YEAR AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-84990970

Fax Number

Contact Number

EMail Address LIMJH1998@GMAIL.COM

23 GAMBIR WALK Address

538981 Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured **CHILDREN**

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?

YES

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

NO 2

Number of Passengers (Including Driver)

Passenger 1

NAME: : ANGUS LEE ZHENG WEI

GENDER: : MALE

DETAILS OF OTHER VEHICLE PROPERTY 1

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?

NO

NO

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN.

Attachment(s)

Are accident photos available for attachment? Was there any video captured by Car Camera? NO

Was there any audio recorded?

YES

NO

Vehicle Registration Number SH6298B

Vehicle Make/Model/Colour **COMFORT DELGRO**

Details Of Properties

Vehicle Category **TAXI**

GOH KOON SENG Name of Driver

NRIC/Passport Number S0226393I

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 18

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:

- 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)
 - (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
- (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
- 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.
- 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.
- 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 SEP 2019

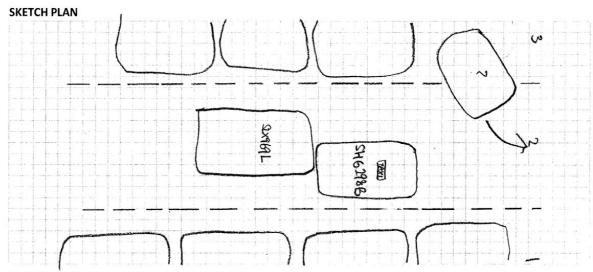
Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Poh Kwen Choo

Name:

NRIC/FIN No.:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving down along lane 2 of Braddell Rd outside
Guangyang Secondary Sechnol - I was slowing down as the taxi
SH6298B was stationary when the cars inhon't of it were already
moving. The taxi then released his brakes, seen from his brake
lights, I gently released my brakes, out of a sudden he
jammed his brakes. I couldn't brake to a stop in time as
my car skidded a little. My car dlided into his rear bumper
psculting in minor damages. According to the taxi driver of
stigating in minor damages. According to the taxi driver of Stigates a car suddenly cut into lane 2 when he was
about to start moving, hence jumning his brake. The time of
the accordant was at 1355 brs on 18/09/2019. The taxi driver
details as stated below. Driver: Goh Koon Seng
details as stated below. Driver: Goh Koon Seng NRIC: SO226393 I Carphite: SH6298 B.
Carplate: SH6298 B.

DECLARATION

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

Policyholder

CIASMC SketchPlanForm_v3

Date & Time: 19 SEP 2019

Driver's Signature

(If driver is not the policyholder)

19/09/2019

Date & Time:

Reporting Centre Personnel's Signature

which is neither that the second

Name: NRIC/FIN No.:

CERTIFICATE OF INSURANCE



中国太平保险(新加坡)有限公司

- 3

AND ADDRESS OF THE AD

CERTIFICATE OF INSURANCE

Motor Vahioles (Third-Party Risks and Compensation) Act (Chapter 189) Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 Rosel Transport Act, 1967 (Maleysie) Motor Vehicles (Third-Party Risks) Rules, 1959 (Mateysia)

135812415918 Engine No. DMSCSSXX517431300 CERTIFICATE No. 1. Index Mark and Registration Number of Vehicle HR LIN SUK ESS 2. Name of Policy Holder NAMED DRIVERS BY SECT. I ... 3. Effective date of the Commencement of Insurance for 12 MARCH 2019 IN ADDITION TO MAKED DRIFFER BYthe purposes of the Regulations, Ordinance or Enactment EX FECT. 1 - AGE re 15 EX SECT. I - ACE -- 16. 33 HANCH 2020 4. Date of Expiry of Insurance . AGE AS AT DATE OF ACCIDENT EX ON RINGECERROR. 5. Persons or Classes of Persons entitled to drive." (A) THE POLICYHOLDER IN ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S CEDER OR WITH HIS PERMISSION PROVIDED THAT THE PERSON DRIVING IN PERMITTED IN ACCORDANCE WITH THE LICENSING OR OTHER LAWS OR REQUESTIONS TO DRIVE THE MOTOR VEHICLE OR HAS REIN SO PERMITTED AND IS NOT DISCOLUTED BY ORDER OF A COURT OF LAW OR BY REASON OF ANY ENACTMENT OR RESULATION IN THAT RENALF FROM DRIVING THE MUTOR VEHICLE

E. Limitations as to use: "

THE POLICY DOLD NOT COVER DEE FOR RIBE OR REMAND TOUTION DRIVING THAT RACING FACE-MARING, RELIABILITY THE POLICY DOLD NOT COVER DEE FOR RIBE OR REMAND TOUTION DRIVING THAT RACING FACE-MARING, RELIABILITY TRIAL SPEED-TESTING, THE CARRIAGE OF GOODS OTHER THAN RAMPLES IN CONSECTION WITH ANY TRACE OR ROSSINGED OR DEE FOR ANY PORPOSE IN CONNECTION WITH THE MOTOR TRADE.

SECRES WHICHEVER IS APPLICABLE FOR LOSSES OCCUPANIES COTSIDE SISCLECES (COMPTRUCTIVE TOTAL LOSS / DEEPT WILL BE DOUBLE)

ONE TIME WAIVER OF EXCESS FOR THE PIRST ASSESSMENT TO THE INSTRUCT AND NAMED DRIVERS IN THE EVENT OF CHE DAMAGE CLAIM AT OUR AUTHORISED WORKSHOPS FOR EACH POLICY YEAR.

RISE PURCHASE CO. . UNITED OVERERAS MANY LIMITED AS NO OWNER

*Limitations rendered inspersive by Section 8 of the Mater Vehicles (Third-Perty Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I/We hereby Certify that this policy to which the CEAT profess is issued in accordance with the provisions of the Motor Various (Taud-Party Risks and Compensation) Act (Chapter 189) and that is it is Road Transport Act, 1967 (Malaysia). Please see reverse For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Countersigned By:

Authorised Officer

Authorised Signatory

MARAAA

3 Aroun Road #15-00 Springhad Tower Singapore 079009 Tel. 6380 6111 Fax: 6225 3502 Website, www.sg.ordsping.com

OWNER'S NRIC Pg. 1







LIM KOK ENG

国 荣

Race CHINESE Date of birth 18-12-1963

\$16173130

Country/Place of birth SINGAPORE

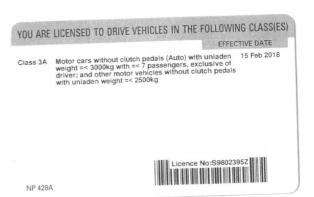
6220762 19-06-2019 23 GAMBIR WALK SINGAPORE 538981

DRIVER'S NRIC + DRIVING LICENCE Pg. 1













CHASSIS NUMBER





