# 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.

<ol><li>By the lodgement of this report to the insurers, you aforesaid.</li></ol>	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	08/08/2019 14:14	
Date Of Accident	07/08/2019 18:15	
Exact Location Of Accident	ALONG 31 BUKIT BATOK CRESCENT CARPARK	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJJ6363S	
Insured/Policyholder		
Name Of Registered Owner	LAU LAY BENG	
NRIC No	S1704192D	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-84445188	
Alternative Phone No	OFFICE-84445188	
Vehicle Particulars		
Manufacturer	MERCEDES-BENZ	
Model	C180-1.6 (A)	

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 TOKIO MARINE INSURANCE SINGAPORE LTD

Type Of Coverage **COMPREHENSIVE** 

Fleet Policy NO

Policy Number MS001013

Cover Note Number

**Driver** 

Name of Driver LIN XIYU NRIC No S8817109H Date Of Birth 05/05/1988 Occupation **INDOOR Date Of Driving Pass** 14/01/2009

**Driving Experience** 10 YEARS AND 6 MONTHS

Gender **FEMALE** 

Mobile Number (LOCAL) +65-84445188

Fax Number

Contact Number

**EMail Address NOEMAIL**  Address BLK 52 CIRCUIT ROAD

#10-823

Postcode 370052

Was driver an employee of the Insured's Company NC

If No, Relationship of the Driver with the Insured CHILDREN

Vehicle Registration Number of Driver's Own Vehicle

enide

-

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)

involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO YES

2

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO 0

# Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Number of Passengers (Including Driver)

Was notice of intended Prosecution given? NO

If Yes, against whom?

# **Circumstances of Accident**

On 07/08/2019 at 1815hrs, my vehicle was parked at 31 Bukit Batok Crescent Carpark. As I walked towards my vehicle, there were damages on the front right side of my vehicle and there was also a note on my windscreen with a name & number. I've called the third party and the driver had admitted that they have knocked into my vehicle and would take full responsibility.

### 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 SGS8485Z

Vehicle Make/Model/Colour

**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)

#### Accident Sketch Plan

## SKETCH PLAN

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  Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by
  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) 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:
  - (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: Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre

NRIC/FIN No.:

I am fully aware that my insurer may have a 14-day period for me to decide on filing an Own Damage Claim,

GARONC Starter Planning Vi

# **Accident Sketch Plan**

SKETCH PLAN		Date of Accident: 01/08(204).
	Alono 31 Built	Gotor Crescent
	11 04 04 04 04 04 04 04 04 04 04 04 04 04	Prince (1919)
	HA	
		A : SJJ6363S
		B: UNKNOWN
ESCRIBE CIRCUMSTANC	CES OF THE ACCIDENT	
On 07/08/2019 at 1	815hrs, my vehicle was pa	irked at 31 Bukit Batok Crescent Carpark. As I
		ges on the front right side of my vehicle and the
		e & number. I've called the third party and the y vehicle and would take full responsibility.
		Own Damage Claim
		☐ Third Party Claim
		OD/TP Claim at another workshop :
ECLARATION		<b>⊠</b> Reporting Only
	rticulars are true in every respect.	RUTO BOOK
olicyholder's Signature	Driver's Signature	Reporting Contre Personnel's Senature
te & Time:	(If driver is not the policyho	older) Name:
	Date & Time:	NRIC/FIN No.:

#### Certificate of Insurance

## Tokio Marine Insurance Singapore Ltd.

(Company Rog, No.: 192300014M) (GST Rog No.: M2-0000023-4)

20 McCallum Street #09-01 Tokio Marine Centre Singapore 069045

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com

A exemper of the Tokio Marme Group



## Certificate of Insurance

FORM MX1 N

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)

Policy No.: MS001013 (Private Car)

 Index Mark and Registration Number of Vehicle SJJ6363S Chassis No.: WDD2040482A466810

2. Name of Policyholder LAU LAY BENG (Non Driving) 01/02/2019 (00:00:00)

Effective date of the Commencement of Insurance for the purposes of the Act

4. Date of Expiry of Insurance 31/01/2020

6. Persons or Class of Persons entitled to drive"

Any other person who is driving on the Policyholder's order or with with his permission.

Provided the 1 = Degree chang is permitted in experience with the first inter on regulators to these the Motor Vehicle or has over one permitted and in not degree held from other gives for Vehicle. And arriving further that the Mour Vehicle is registered under the Post Traffo Ax and its re

Use only for social domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or rewerd, racing, pace-making, reliability trial, speed-testing or the carriage of goods (other than samples) in connection with any trade or ousness or use for any purpose in connection with the Motor Trade.

\* Limitations sendered reconstitute by Section 8 of the Vistor Vendes (That Planty Richs and Compensation) Act (Chapter 188), and Section 96 of the Read Transport Act, 1987 (Malaysia), are not to be included under those recodings.

this nameby consty that the Folicy to which this Confidence relates is issued an accordance with the provision of the Vistor Vehicles (It is Farly Risks and Compensation). Act (Chapter 189) and Part N of the Rose Transport Act, 1997 (Maleys) at

Please refer to the Policy Actorials for full details, terms and conditions of the inter-twee

## IMPORTANT NOTICE

This Cultifics is sell invalenties. Turing its purpose the insurance is not order for while observe notion, you must rais in the Certificate in Tulie Microsins record for which insurance is statutory deducation to that effect. Paters to comply with this day is an offer counter fundor Vehicle (Tinds Party Risks and Companisation Act (Onesier 15%).

ADDITIONAL INFORMATION Account No: 2712DDA

Comprehensive Approved Workshop Plan

Prevailing Market Value Limit for total loss or theft:

Own Damage Claims Additional Excess for Unnamed (Original Excess: SGD 1.600.00) Policy Excess: SGD 1.500.00 SGD 500.00

Driver(s) Additional Excess for Young or Inexperience Driver(s) WindScreen Excess SGD 3.500.00

SGD 100.00

Financial Interest: NIL

TOKIO MARINE INSURANCE SINGAPORE LTD.

**Authorised Signature** 

UserID: 2712CDA Printed: 18-01-2519-17-34-01 Page 1

# REPUBLIC OF SINGAPORE

IDENTITY CARD NO. \$8817109H





Name:

LIN XIYU

林熙瑜



CHINESE

Date of birth

Sex

05-05-1988

Country/Place of birth

SINGAPORE





LIN XIYU

Name:

Birth Date: 05 May 1988

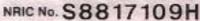
Issue Date: 16 Jan 2015





5412229







Date of issue

30-12-2014

APT BLK 52 CIRCUIT ROAD #10-823 SINGAPORE 370052

NRIC No: \$8817109H

Date:

22/05/2019

# YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

**EFFECTIVE DATE** 

Motor Cars=< 3000kg with =<7 passengers, exclusive 14 Jan 2009 Class 3 of the driver; and other motor vehicles =< 2500kg

NP 428A













