### SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

Mobile Number

Contact Number **EMail Address** 

Fax Number

- 1. Please report <u>correctly</u> 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</u> and <u>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

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	29/10/2019 10:51
Date Of Accident	27/10/2019 11:15
Exact Location Of Accident	BISHAN ST 13 OUTSIDE KUO CHUAN PRIMARY SCHOOL
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKX619J
Insured/Policyholder	
Name Of Registered Owner	CHAN YEE PIA
NRIC No	S8102941E
Email Address	ADMIN@SUPREME.SG
Mobile Phone No	(LOCAL) +65-91186653
Alternative Phone No	OFFICE-NOPHONE
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	ELANTRA AD 1.6 GLS AT (AMS)
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	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D19MTPV01000266
Cover Note Number	15/01/2019 TO 14/01/2020
Driver	
Name of Driver	CHAN YEE PIA
NRIC No	S8102941E
Date Of Birth	30/01/1981
Occupation	INDOOR
Date Of Driving Pass	17/09/2001
Driving Experience	18 YEARS AND 1 MONTH
Gender	FEMALE

(LOCAL) +65-91186653

ADMIN@SUPREME.SG

OFFICE-NOPHONE

Address 1 BISHAN STREET 15

#25-08

Postcode 573910

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 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

Number of Passengers (Including Driver)

1

#### **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 TO SKETCH PLAN.

### 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 SKK4032T

Vehicle Make/Model/Colour

**Details Of Properties** 

Details Of Froperties

Vehicle Category PRIVATE CAR

Name of Driver RANVKA D/O PONNVSWAMY

NRIC/Passport Number

Contact Number 97836109

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

### Sketch Plan

### 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:

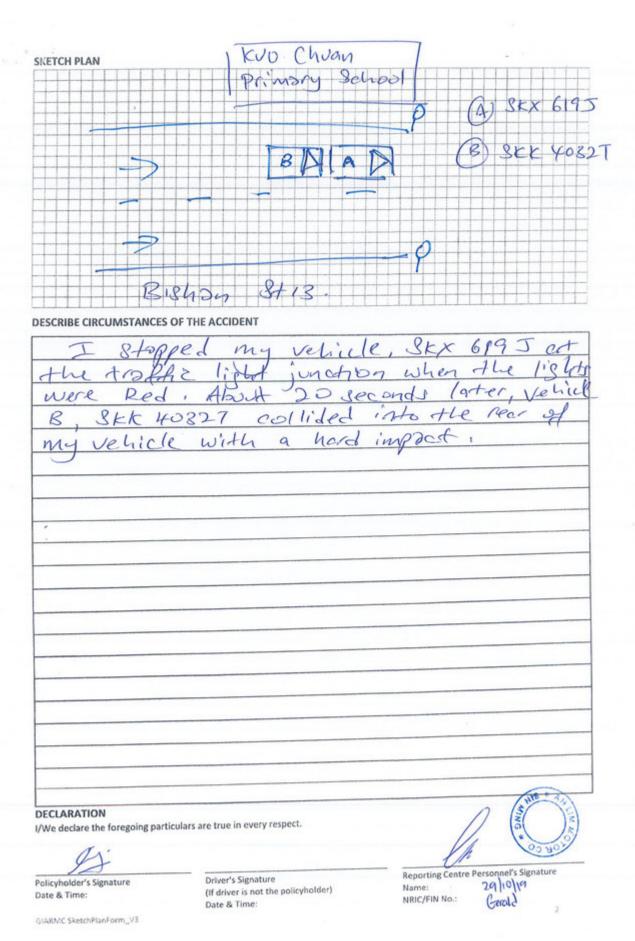
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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")
- 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.
- (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:

NRIC/FIN No .:

Reporting Centre Personnel's Signature Name: OKICAL 29/10/2019





#### Sompo Insurance Singapore Pte. Ltd.

50 Raffles Place, #05-01/06 Singapore Land Tower, Singapore 048623 Tel: 6461 6555 | Fax: 6221 3302 | Website: www.sompo.com.sg Co. Reg. No.: 198905490E | GST Reg. No.: M200903196

### Certificate of Insurance

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES,1959 (MALAYSIA)

Cert No./Policy No.

: D19MTPV01000266

Insured

: CHAN YEE PIA

Motor Car (Registration No.) : SKX619J

Cover

: Comprehensive - ExcelDrive PRESTIGE

Policy Commencement Date : 15 JANUARY 2019 00:00

Policy Expiry Date

: 14 JANUARY 2020 23:59

Maximum Liability (Section I): Market value at time of loss - Excl. COE

: \$500 - Section I

(Waived up to S\$1,000 if accident repair is done at ExcelDrive Workshops for the first claim

per policy year)

: N.A

Voluntary Excess\* Windscreen Excess\*

: S\$100.00 - Waived if Repair at ExcelDrive Workshop

Loss of Use

: Per Policy Schedule

Persons or Classes of Persons entitled to drive\*

- The Insured.
- Any other person who is driving on the Insured's order or with his permission.In the event of the death of the insured,

a. any member of the insured's family, or a paid driver who has been driving the Motor Car during the life of the insured and permission to drive had not been withdrawn prior to the death of the insured; and

b. any other person who has been given permission to drive the Motor Car prior to the death and such permission had not been withdrawn by the Insured.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Car 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 Car. And provided further that the Motor Car is registered under the Road Traffic Act (Chapter 276) and its registration under the Road Traffic Act (Chapter 276) has not been cancelled at the time of the accident, loss or damage.

#### Limitations As To Use

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

ExcelDrive Workshops and Accident Reporting
It is a condition precedent to liability that the Insured shall call at the Company's Accident Reporting Center with the Motor Car within 24 hours of the accident or by the next working day thereof.

All accident repairs to the Motor Car must be carried out at ExcelDrive Workshops, otherwise the claim is not payable under the Policy. For ExcelDrive Prestige Plan, accident repairs to the Motor Car can be carried out at any workshop other than ExcelDrive Workshops.

For the list of Accident Reporting Centres and ExcelDrive Workshops, please visit our website at www.sompo.com.sg or call our Emergency Hotline: (65) 6226 3323.

I/We HEREBY CERTIFY that the policy to which this Certificate relates is issued in accordance with (1) the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Melaysia); and (2) the Policy terms, conditions and exceptions of the Private Car Policy ref MTP-27

Sompo Insurance Singapore Pte. Ltd.

**Authorised Signatory** 

Date/Time of Issue: 11 DECEMBER 2018 21:13

### IMPORTANT NOTICE

Keep the Certificate in your Motor Car.

Keep the Certificate in your Motor Car; Under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189), it shall be unlawful for any person to use or cause to permit any other person to use a motor vehicle without a valid policy of insurance under the Act; On the sale of the Motor Car or if for any reason the Insurance is terminated during its currency, the Insured must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a statutory declaration to that effect must be made. Failure to compty with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189); This Policy will cease to be valid once the Motor Car has been sold to another person. The Policy is not transferable to the new owner of the Motor Car.

Intermediary Code & Name: 11F02505 & FINANCIAL ALLIANCE PTE LTD CI Code: 22A DDLDPPC4PBMD1KIA

<sup>\*</sup> Subject to GST wherever applicable

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$8102941E



OHAN VE

CHAN YEE PIA (ZENG YANBING)

曾 燕 冰 Rece CHINESE Date of birth See 30-01-1981 F

SINGAPORE

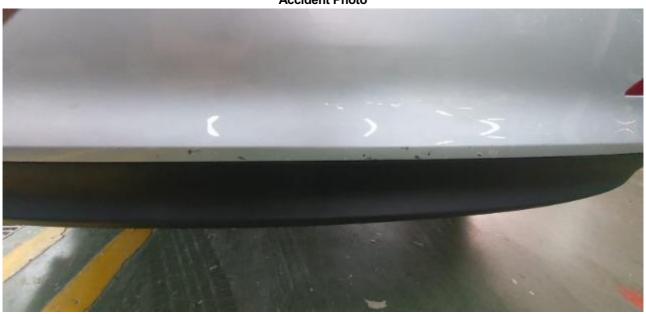












**Accident Photo** 

















**Accident Photo** 



















