

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	11/11/2019 12:34
Date Of Accident	09/11/2019 16:00
Exact Location Of Accident	LORONG 25 GEYLANG
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD9074H
Insured/Policyholder	
Name Of Registered Owner	LIKO TRADE CENTRE PTE LTD
Co Reg No	199106194W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62841819

Vehicle Particulars

Manufacturer	NISSAN
Model	CABSTAR
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	ETIQA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MA005069
Cover Note Number	

Driver

Name of Driver	TAN POH HEE (CHEN BAOXI)
NRIC No	S7501471F
Date Of Birth	12/01/1975
Occupation	OUTDOOR
Date Of Driving Pass	02/06/1998
Driving Experience	21 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92716196
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 408 BEDOK NORTH AVENUE 2 #11-50
Postcode	460408
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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)	0

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

MY VEHICLE WAS PARKED AT PARKING LOT 42, LORONG 25 GEYLANG. VEHICLE B CAME FROM MY BEHIND AND COLLIDED INTO MY VEHICLE'S REAR RIGHT PORTION. AFTER I HEARD A LOUD BANG AND I CAME OUT TO CHECK, I SAW VEHICLE B HIT ONTO MY LORRY AN VEHICLE B'S DRIVER ADMITTED THAT THE ACCIDENT CAUSED BY HIM. THERE WAS NOBODY INJURED IN THIS ACCIDENT.

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	SJU9639U
Vehicle Make/Model/Colour	KIA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN KENG ENG
NRIC/Passport Number	
Contact Number	84045196
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

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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:



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

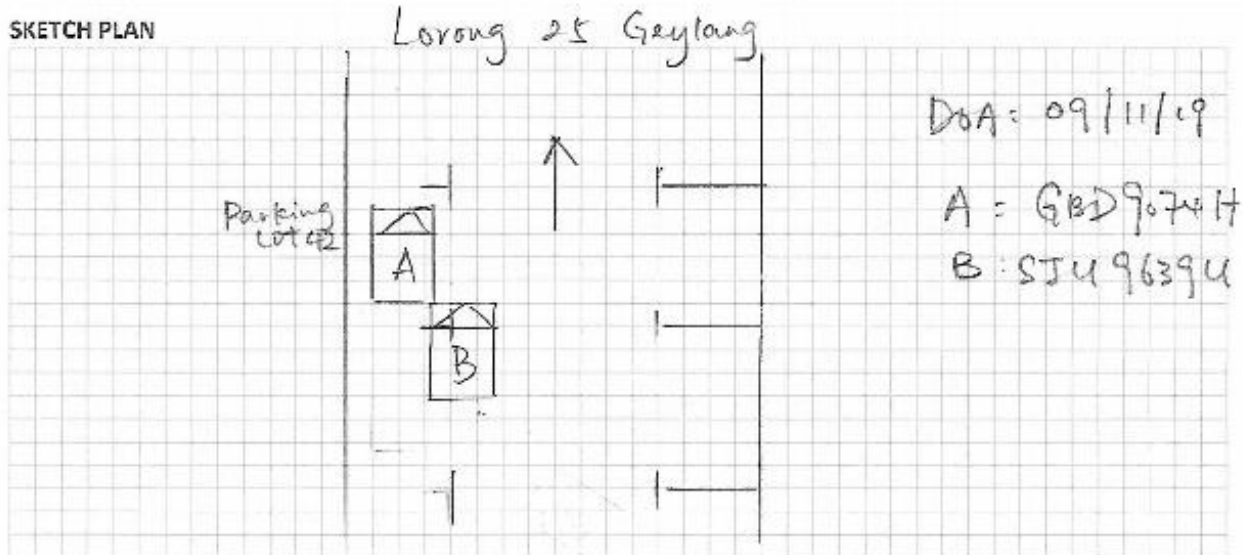
[Signature] 11/11/19

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



Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My vehicle was parked at Parking lot 42, Lorong 25 Geylang. Vehicle B came from my behind and collided into my vehicle's rear right portion. After I heard a loud bang and I came out to check, I saw vehicle B hit onto my lorry and vehicle B's driver admitted that the accident caused by him. There was nobody injured in this accident.

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.:

INTERVIEW FORM



INTERVIEW FORM

Name (Driver) : TAN DOH HEE

Policy No : MA 005069

Vehicle No : GBD 9074 H

Place of Accident : LORONG 25 GETLANG

Insured Driver's relationship with Insured : EMPLOYEE

Drink Driving of Insured and/or Insured Driver : NO

No of passenger(s) in Insured vehicle : NO PASSENGERS

Injury to Insured and/or Insured driver, please indicate which hospital:
NO INJURY

Third Party Vehicle No (if any) : SJU 9639 U

No of passenger(s) in Third Party Vehicle : NO PASSENGERS

Injury to Third Party driver and/or passengor(s), please indicate which hospital:
NO



Type of collision and the extensiveness of the damages to all vehicles involved:
HEAD TO REAR

INSURED: REAR RIGHT PORTION. TP: FRONT LEFT PORTION.



Any witness to the accident (if yes, please indicate Name, Contact No and a copy of the statement):
NO

Traffic Police report (enclosed) : Yes / (No)

Please obtain a copy of the driving licence of Insured driver and/or work permit (where foreign worker is involved)



 

Driver (Name & Signature)
I, affirmed the above information is given to my best knowledge

Attended by (Name & Signature)
Workshop Name: Jin Auto Services Pte Ltd.

Etika Insurance Berhad (Company Reg. No. T09FC0054K)
1 North Bridge Road, #08-01 High Street Centre, Singapore 179094
T: +65 6336 0477 F: +65 6339 2109

Attended by  



MZ300
70000010
COV.Type: CO

CERTIFICATE OF INSURANCE

• 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)

CERTIFICATE No. MA005069

- | | | |
|--|---------------------------|---|
| 1. Index Mark and Registration Number of Vehicle | GBD9074H | |
| 2. Name of Policyholder | LIKO TRADE CENTRE PTE LTD | |
| 3. Effective Date of Commencement of Insurance for the purposes of the Act | 29/07/2019 | Excess: Section I S\$800.00 |
| 4. Date of Expiry of Insurance | 28/07/2020 | Engine No.: ZD30001325N
Chassis No.: JN1SC2F24Z0857652 |
| 5. Persons or Class of Persons entitled to drive | | |

ANY PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH THEIR PERMISSION.

AND PROVIDED FURTHER THAT THE MOTOR VEHICLE IS REGISTERED UNDER THE ROAD TRAFFIC ACT (AND SUBSEQUENT AMENDMENTS) AND ITS REGISTRATION UNDER THE ROAD TRAFFIC ACT (AND SUBSEQUENT AMENDMENTS) HAS NOT BEEN CANCELLED AT THE TIME OF THE ACCIDENT LOSS OR DAMAGE.

6. Limitations as to use

- USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS OR PROFESSION.
THE POLICY DOES NOT COVER:
- (i) USE FOR HIRE OR REWARD.
 - (ii) USE FOR RACING, PACE MAKING, RELIABILITY TRIAL OR SPEED-TESTING.
 - (iii) USE FOR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS.
 - (iv) 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.

Policy Owners' Protection Scheme

This policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact your insurer or visit the General Insurance Association Of Singapore (GIA) / Life Insurance Association Singapore (LIA) / SDIC websites (www.gia.org.sg / www.lia.org.sg / www.sdic.org.sg).

I/WE HEREBY CERTIFY that the policy to which this Certificate relates to is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV for the Road Transport Act, 1987 (Malaysia).

For and on behalf of Etika Insurance Pte. Ltd.
Approved Insurer


Authorised Signature

Identification Card

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7501471F**
Name: **TAN POH HEE
(CHEN BAOXI)**

Birth Date: **12 Jan 1975**
Issue Date: **13 Sep 2011**

 001997574A

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S7501471F**





Name
**TAN POH HEE
(CHEN BAOXI)**
陳 寶 喜

Race
CHINESE

Date of birth
12-01-1975

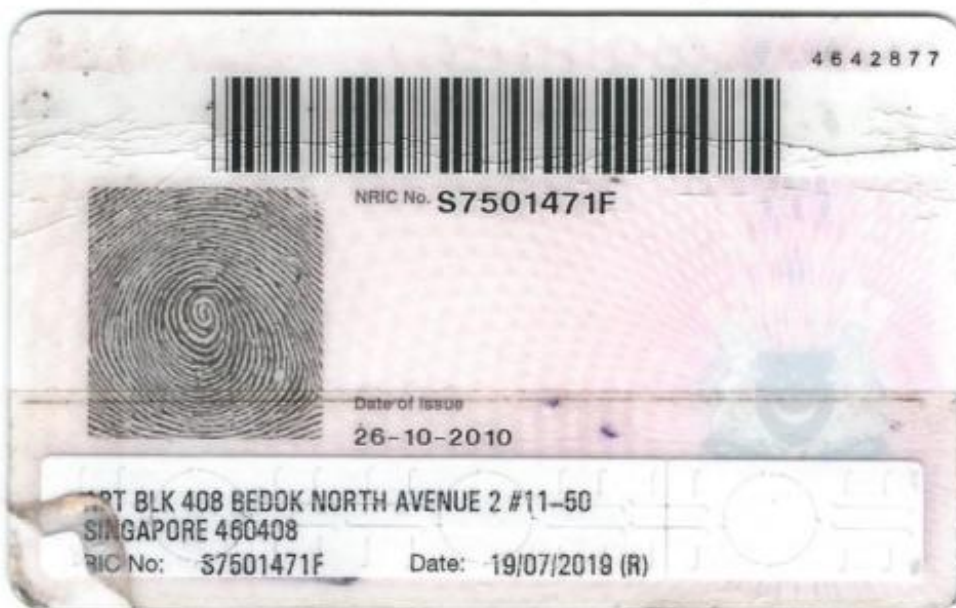
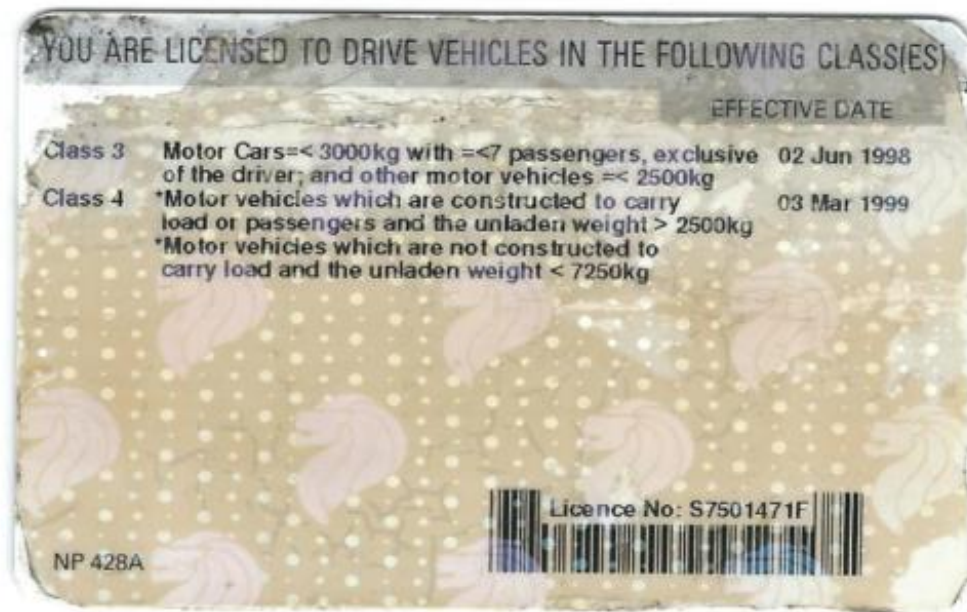
Country of birth
SINGAPORE

Sex
M





Identification Card



SCENE PHOTO

6284 5727

Email:
shop@liko.com.sg



SCENE PHOTO



SCENE PHOTO



SCENE PHOTO



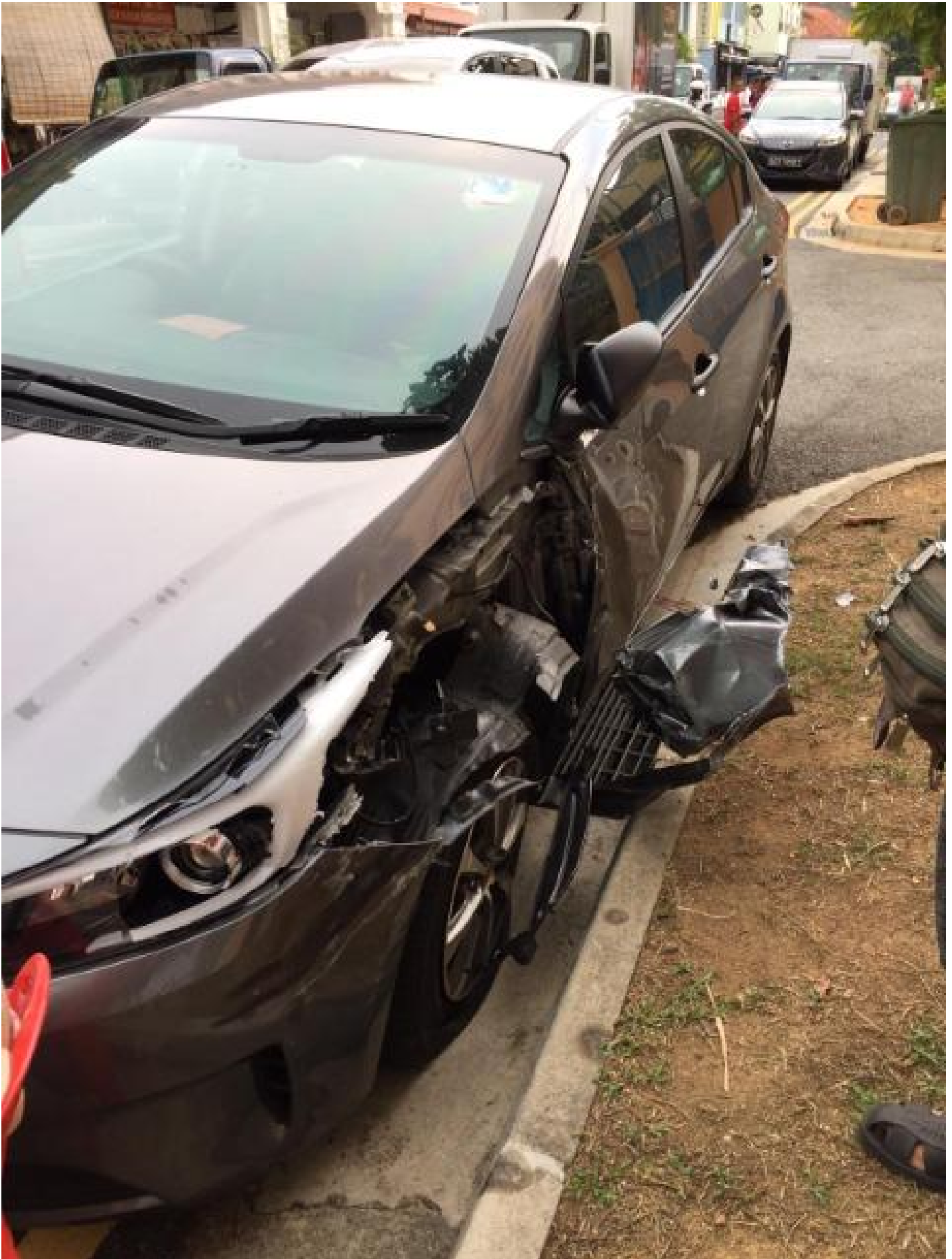
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