





## 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	26/11/2019 15:57
Date Of Accident	22/11/2019 20:00
Exact Location Of Accident	ALONG MAXWELL ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJW3699A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAY MARY
NRIC No	S0112174Z
Email Address	JEREMY@MISCHIEF.SG
Mobile Phone No	(LOCAL) +65-98582256
Alternative Phone No	OTHERS-93889839

### Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5049052963-08
Cover Note Number	

### Driver

Name of Driver	LIANG WEI EN, JEREMY (LIAN WEI'EN, JEREMY)
NRIC No	S8226474D
Date Of Birth	31/08/1982
Occupation	INDOOR
Date Of Driving Pass	01/09/2009
Driving Experience	10 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98582256
Fax Number	
Contact Number	OTHERS-93889839
Email Address	JEREMY@MISCHIEF.SG

Address	1N PINE GROVE #08-60
Postcode	591301
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	SIDE SWIPE
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?	NO
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)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CLEMENTI NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: NO. 20 CLEMENTI AVENUE 5 , POSTCODE: 129858 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8729999 - FAX NO: 67748639
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE 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	SMM8059G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	90115350
Address	
Postcode	
Insurance Company Name	

\* Nature Of Damage  
No. Of Passenger (Including Driver)

### SKETCH PLAN

### IMPORTANT NOTICE

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6. The 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 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: 26/11/19  
3.40 pm

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

Date & Time: 26/11/19  
3.40 pm

Reporting Centre Personnel's Signature

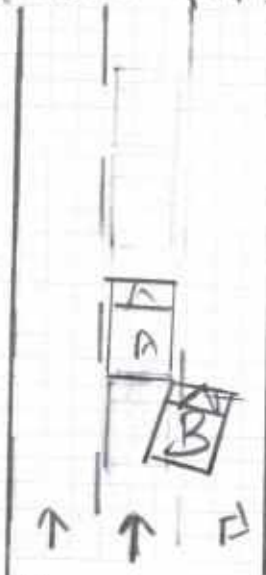
Name:

NRIC/FIN No.:



SKETCH PLAN

Along MAXWELL ROAD



A) SJW 3699A

B) SMM 8059 G

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 22 Nov 2019 evening at around 8 PM,  
I was turning from Shenton Way onto Maxwell Rd  
towards Neil Rd. The light was Red and my  
vehicle Stationary. My vehicle was hit from  
the right rear, by vehicle SMM 8059 G.  
There was some damage to the rear bumper on my  
vehicle. We exchanged personal particulars and went  
on our way.

DECLARATION

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

*[Signature]*

*[Signature]*

Policyholder's Signature

Date & Time: 26/11/19  
3.40 pm

Driver's Signature

(If driver is not the policyholder)

Date & Time: 26/11/19  
3.40 pm

Reporting Centre Personnel's Signature

Name

NRIC/FIN No.:

26/11/2019

*[Signature]*

## NOTICE OF REPORTING

This is to confirm that Liang Wei En, Jeremy NRIC/FIN  
S8226474D, has reported to the Police a non-injury traffic accident which

occurred at along Maxwell Road towards  
Neil Road, opposite AXA Tower

on 22/11/2019 at 8:00 am/pm involving the following vehicles: 1) SJW 3699A (Compton)  
 2) SMM 8059G

2 If this accident was reported to the Police within 24 hours of its occurrence, then  
 he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: Sgt Simon Chia

Date: 24/11/2019 Time: 2:32 pm

S/D Ref: 44

Police Post/Unit: Clementi NPL

Clementi NPC  
 20 Clementi Ave 3  
 S 1298581  
 Tel: 68728000  
 Fax: 68728030

24/11/2019

# ACCIDENT STATEMENT

ACCIDENT DATE: (22/11/2019) (DD/MM/YYYY), TIME: (8:PM) (HH:MM)

LOCATION: MAXWELL RD

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SJW 3699A  
 b) INSURANCE COMPANY: INCOME  
 c) POLICY NUMBER: 5049052963-08  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: TOYOTA ALTIS  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE USE  
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)  
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

## 2. INSURED / POLICY HOLDER

- a) NAME: TAY MARY (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S0112174Z CONTACT: 98582256  
 c) ADDRESS: IN PINE GROVE #08-60  
 S(591301)

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

- a) NAME: LIANG WEI EN JEREMY (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S8226474D CONTACT: 93889839  
 c) ADDRESS: IN PINE GROVE #08-60  
 S(591301)

\* d) DATE OF BIRTH: (31/08/1982) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 01 SEP 2009

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES/NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: MOTHER

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES/NO)

7. a) REPORTED TO POLICE (YES/NO)

IF YES, PLEASE STATE WHICH POLICE STATION: CLEMENTI NPC

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SMM 8059 G MODEL:  
 b) DRIVER'S NAME:  
 c) NRIC/FIN/PASSPORT: CONTACT: 90115350

## 9. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: MODEL:  
 b) DRIVER'S NAME:  
 c) NRIC/FIN/PASSPORT: CONTACT:

email = jeremy@mischief.sg  
 VIDEO



## Claim Handling

## Accident MT/1073106

Policy No.	5049052963-08	Vehicle No.	SJW3699A	GST Registrati
Certificate No.				
Policyholder Name	TAY MARY			Policyholder NI
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading
Contact No.(Mobile)	98582256	Contact No.(Office)		Contact No.(Hi
Email Address		Special Remark		eCode
KFK	= No Yes	TCA	= No Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	50	Private Hire

## ▼ Accident Details

Report Date	26/11/2019 16:11	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	22/11/2019	Time of Accident hh:mm	20:00	Country of Acc
Reporting Centre		Orange Force		ICM No.
Accident Location	ALONG MAXWELL ROAD			

## ▼ Excess

Own damage Excess	0.00	Additional Excess	0	Windscreen Ex
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	0.00	
Third Party Excess	0.00	Outside Singapore TP Excess	0.00	

## ▼ Benefits

Coverage		Sum Insured	
Excess Waiver		99999999.99	
Transport Allowance		99999999.99	

## ▼ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

## ▼ Policyholder Mailing Address

Address 1	1N PINE GROVE	Address 2	#08-60 PINE GROVE	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.		Related Policy Number	5049052963-08	

## ▼ OI Driver Info

Driver Name	LIANG WEI EN JEREMY	Driver Type	Named Driver	
Unnamed driver Name		Driver NRIC	S8226474D	Driver DOB
Register Date of Driver License	20/11/2014	Driver Age	37	Driving Experie
Contact No.(Mobile)	93889839	Contact No.(Office)		Contact No.(Hi
Address 1		Address 2		Address 3
Address 4		Address Type	Foreign address	Post Code
Unit No.				
Does he own a Singapore Registered car?	Yes = No	Driver Vehicle No.	SJW3699A	Driver Insurer

## Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes = No
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## Modification History

Claim 001 **New**

Claim Type *	OD-MX	Insured Name	TA
Contact No.(Mobile)	98582256	Contact No. (Home)	
Email Address		OI Vehicle Number	SJW
Claim Description	SJW3699A / SMH8059G ON 22 Nov 2019		
Preferred Workshop		Insured Liability	Not at Fault
Contract No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Date Registered	26/11/2019 16:19	GIA report	Received
Report Taken By	BOSLI WAHAB		

Print AK letter

- Attachment

Accident No. MT/10/3186		Claim No. 001	
Last Doc. Received <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Upload Date 26/11/2019 16:19	
Path *		Category *	
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/>	<input type="button" value="Please Select"/>	<input type="button" value="NO"/>
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/>	<input type="button" value="Please Select"/>	<input type="button" value="NO"/>
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<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/>	<input type="button" value="Please Select"/>	<input type="button" value="NO"/>
<input type="button" value="Message Read"/>		<input type="button" value="Please Select"/>	<input type="button" value="NO"/>

 Attachment List

Attachment	Uploaded By/Date	Category	?	Urgency	
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Nov 2019 16:19	Photos		Normal	Phc
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Nov 2019 16:19	Photos		Normal	Phc
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Nov 2019 16:19	Photos		Normal	Phc
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	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Nov 2019 16:19	Photos		Normal	Phc
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Nov 2019 16:19	NRIC/ Driving License	Y	Normal	NRIC/ Driv
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Nov 2019 16:19	SAS		Normal	S

▼ Video List

Uploaded By/Date	Folder Date	File Name	
			<div> <div>Display in New Window</div> <div>Scan and uploading</div> </div>

## 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 Number:** 5049052963-08

**Cover :** drive CLASSIC

1. Index mark and Registration Number of Vehicle : **SJW3699A**  
Chassis Number : **MR053ZEE106169666**
2. Name of Policyholder : **TAY MARY**
3. Effective Date of Insurance : **19 Mar 2019**
4. Expiry Date of Insurance : **18 Mar 2020**
5. Persons or Classes of Persons entitled to drive#  
(a) The Policyholder.  
(b) Any other person who is driving on the Policyholder's order or with his/her permission.  
Provided that the person driving is permitted in accordance with the licensing or other 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#  
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

**This Policy does not cover**

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

# Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: YES
EXCESS WAIVER	: YES
PRIMARY DRIVER	: TAY MARY
NAMED DRIVER (1)	: LIANG WEI EN JEREMY
NAMED DRIVER (2)	: LIANG WEI HAN, KEITH
HIRE PURCHASE COMPANY	: HONG LEONG FINANCE LIMITED
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : LAKE-VIEW (USED CARS) TRADING (00000614043)  
Date of Issue : 06 Mar 2019 11:33 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive