

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	02/12/2019 13:56
Date Of Accident	25/11/2019 23:30
Exact Location Of Accident	ALONG WOODLANDS CHECKPOINT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKT5774G
Insured/Policyholder	
Name Of Registered Owner	ANG WEI CHAI
NRIC No	S8923607Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-84099292
Alternative Phone No	OTHERS-84099292

Vehicle Particulars

Manufacturer	HONDA
Model	STREAM-1.8 (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	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D19MTPV01011095
Cover Note Number	22/07/2019 - 21/07/2020

Driver

Name of Driver	ANG MENG KIM
NRIC No	S1363215D
Date Of Birth	23/03/1959
Occupation	INDOOR
Date Of Driving Pass	18/12/1978
Driving Experience	40 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84099292
Fax Number	
Contact Number	OTHERS-84099292
EEmail Address	MENGKIM.BT@GMAIL.COM

Address	199A PUNGGOL FIELD #05-407
Postcode	821199
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	PARENT
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	UNKNOWN (PRIVATE CAR)
Number of vehicles (including own vehicle) involved in the accident	3
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)	2
Passenger 1	NAME: : LEE SIOK YIN GENDER: : FEMALE

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 THE SKETCH PLAN BY DRIVER

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	SDM2002R
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)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

UNKNOWN

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)

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")
- (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:



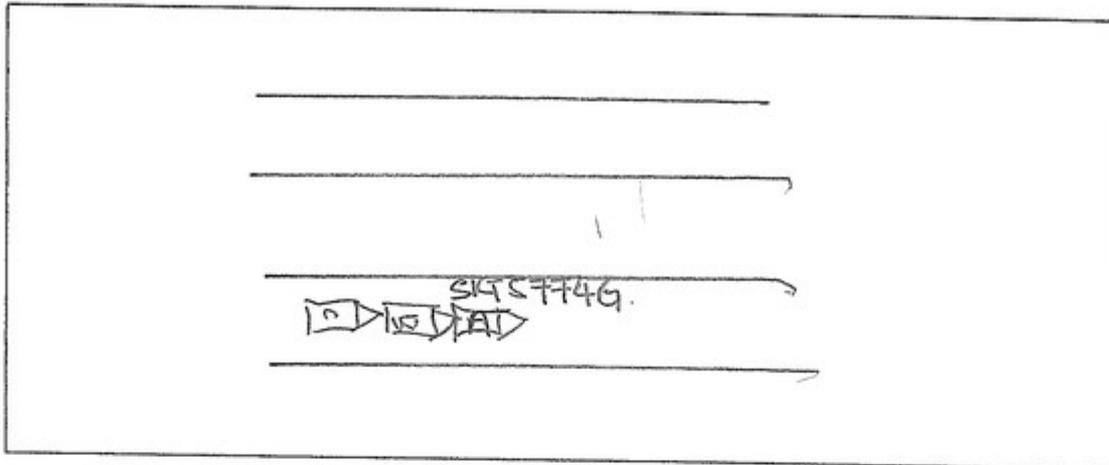
Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

Date of accident: 25/11/19 Time: 11:30pm Location: Along Woodlands checkpoint.
 My Vehicle A: SKT5774G Vehicle B: SDM2002R Vehicle C: UNKNOWN (MSIA)

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My vehicle already stop. I felt an impact on my rear. I got down to check my car & saw vehicle C has hit onto vehicle B and it hit my car.

Claim OD/TP at Ah Lim Motor Claim OD/TP at other workshop Reporting Only

Remarks : Please forward a copy of my efile accident report to :

My workshop :
 Email address : Doodyht @ singtel . nm . sg
 & myself :
 Email address :

Note : Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

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 Officer's Signature
 Name:
 NRIC/FIN No.:

AH LIM MOTOR COMPANY

CERT

**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.: 199905490E | GST Reg. No.: M200903196

PRIVATE CAR POLICY SCHEDULE

Intermediary Code : 11J06508

Policy No. : D19MTPV01011095

This Schedule is issued in accordance and should be read in conjunction with the terms, conditions and exceptions of the PRIVATE CAR Policy wordings, ref. MTP.27

Insured : ANG WEI CHAI
 Address : BLK 199A PUNGGOL FIELD
 #05-407
 SINGAPORE 821199

Business/Profession : SOLE PROPRIETOR

INSURED DETAILS

Date of Birth & Age : 10 JUL 1989 & 30 years old	Marital Status : SINGLE
Driving Experience in Singapore : 9 years	Gender : Male
Identification Type : NRIC(Singaporean)	Identification No. : S8923607Z

Period of Insurance : 22 JULY 2019 11:47 TO 21 JULY 2020 23:59

Persons or Classes of Persons entitled to drive : Refer to Certificate of Insurance

Limitations as to use : Refer to Certificate of Insurance

VEHICLE DETAILS

Vehicle Registration No.	: SKT5774G
Chassis No.	: JHMNR68408S203581
Engine No.	: R18A12803600
Vehicle Make & Model	: HONDA STREAM 1.8
Engine Capacity/Tonnage	: 1799
Type of Body	: STATIONWAGON
Year of Registration	: 2008
Seating Capacity (including driver)	: 7
Estimated value of Vehicle	: Market value at time of loss
Hire Purchase Owner	: INDEX CREDIT PTE LTD

PREMIUM DETAILS

Premium	2,086.36
Less EDF Discount (15%)	(312.95)
Total	S\$ 1,773.41
GST	S\$ 124.14
Premium (Incl. GST)	S\$ 1,897.55

Coverage : Comprehensive - ExcelDrive FOCUS

Excess : S 600 - Section I
 (Waived up to 50% or maximum S\$600 whichever is lower if accident repair is done at ExcelDrive Workshops for the first claim per policy year)

Voluntary Excess : N.A

Additional Excess : Named Young and/or Inexperienced Drivers or Elderly Drivers - \$1,500
 Un-named Young and/or Inexperienced Drivers or Elderly Drivers - \$3,000
 Un-named All Other Drivers - \$500

The terms shall be defined as follows:

'Young Drivers' shall be defined as drivers (including the Insured) who are below 25 years old.
 'Inexperienced Drivers' shall be defined as drivers (including the Insured) who have less than 2 years of driving experience in Singapore
 'Elderly Drivers' shall be defined as drivers (including the Insured) who are above 70 years old.

Paragraph 2 of Endorsement E in the policy will not apply to insured's spouse provided he/she is 25 years old & above but less than 70 years old &/or has 2 or more years driving experience.

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

Endorsements Applicable : Endorsement D - Young and/or Inexperienced or Elderly Drivers Excess
 Endorsement E - Excess Clause
 Endorsement H - Total Loss
 Endorsement L - Hire Purchase
 Endorsement M - Inclusion Of Special Perils
 Endorsement P6 - Riot And Strike Endorsement
 Endorsement Y3 - ExcelDrive Focus Plan



Sompo Insurance Singapore Pte. Ltd.

50 Raffles Place, 405-0106 Singapore Land Tower, Singapore 045025
Tel: 6461 6555 | Fax: 6221 3302 | Website: www.sompo.com.sg
Co. Reg. No.: 106005498E | GST Reg. No.: M200923196

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. : D19MTPV01011095
Insured : ANG WEI CHAI
Motor Car (Registration No.) : SKT5774G
Cover : Comprehensive - ExcelDrive FOCUS
Policy Commencement Date : 22 JULY 2019 11:47
Policy Expiry Date : 21 JULY 2020 23:59
Maximum Liability (Section I) : Market value at time of loss
Excess* : \$600 - Section I
(Waived up to 50% or maximum S\$600 whichever is lower if accident repair is done at ExcelDrive Workshops for the first claim per policy year)
Voluntary Excess* : N.A
Windscreen Excess* : S\$100.00 - Waived if Repair at ExcelDrive Workshop
Loss of Use : N.A.
* Subject to GST wherever applicable

Persons or Classes of Persons entitled to drive*

1. The Insured.
2. Any other person who is driving on the Insured's order or with his permission.
3. 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.

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, 1997 (Malaysia), and (2) the Policy terms, conditions and exceptions of the Private Car Policy ref MTP 27

Sompo Insurance Singapore Pte. Ltd.

Authorised Signatory

JIN LI PTE LTD
2 Kallang Avenue #08-16A
CT Hub S(339407)
Off : 6444 4116
Fax : 6444 0010

Date/Time of Issue : 18 JULY 2019 11:48

IMPORTANT NOTICE

- o Keep the Certificate in your Motor Car.
- o 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.
- o 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 comply with this obligation is an offence under the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189).
- o 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 : 11J06508 & JIN LI PTE. LTD. CI Code: 22A LXDHZH4J_0MBOKA4

Identification Card

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1363215D



Name
ANG MENG KIM

翁明金

Race
CHINESE

Date of birth
23-03-1959

Country/Place of birth
SINGAPORE

Sex
M

S1363215D

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1363215D**

Name:
ANG MENG KIM

Birth Date: **23 Mar 1959**

Issue Date: **08 Apr 2015**

002415310H




STRICTLY
FOR WORKSHOP USAGE
USE FOR ACCIDENT
REPORTING ONLY

owner - son.

8409222

plc
No injur.
No video.

29/4.
LEE SIOK YIN. (F)

STRICTLY
FOR WORKSHOP USAGE
USE FOR ACCIDENT
REPORTING ONLY

Barcode

NRIC No. S1363215D



Date of issue
31-03-2015

Address
**APT BLK 199A PUNGGOL FIELD
#05-407
SINGAPORE 821199**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

Class	Description	EFFECTIVE DATE
Class 2B	Motorcycles =< 200 cc	20 Feb 1979
Class 2A	Motorcycles between 201 cc and 400 cc	20 Feb 1979
Class 2	Motorcycles > 400 cc	20 Feb 1979
Class 3	Motor Cars =< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg	18 Dec 1978

NP 428A

Licence No: S1363215D



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

