

## 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             | 13/12/2019 10:31                         |
| Date Of Accident           | 09/12/2019 19:00                         |
| Exact Location Of Accident | MAXWELL ROAD AND WALLICH STREET JUNCTION |
| Country/State of Loss      | SINGAPORE                                |

### DETAILS OF OWN VEHICLE

|                             |                           |
|-----------------------------|---------------------------|
| Vehicle Registration Number | SCL89X                    |
| <b>Insured/Policyholder</b> |                           |
| Name Of Registered Owner    | TAN HAI PENG MICHEAL      |
| NRIC No                     | S7020677C                 |
| Email Address               | MICHEAL@HOLEEGROUP.COM.SG |
| Mobile Phone No             | (LOCAL) +65-98150080      |
| Alternative Phone No        | OTHERS-98150080           |

### Vehicle Particulars

|  |             |
|--|-------------|
| Manufacturer   | PORSCHE     |
| Model  | PANAMERA 4S |
| 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? | YES         |
| If No, Please state action to be taken                                       |             |
| Vehicle Category   | PRIVATE CAR |

### Insurance Company

|                           |                                     |
|---------------------------|-------------------------------------|
| Name of Insurance Company | ALLIED WORLD ASSURANCE COMPANY, LTD |
| Type Of Coverage          | COMPREHENSIVE                       |
| Fleet Policy              | NO                                  |
| Policy Number             | BVPCSB0321411901                    |
| Cover Note Number         |                                     |

### Driver

|                      |                           |
|----------------------|---------------------------|
| Name of Driver       | TAN HAI PENG MICHEAL      |
| NRIC No              | S7020677C                 |
| Date Of Birth        | 25/06/1970                |
| Occupation           | INDOOR                    |
| Date Of Driving Pass | 15/11/1990                |
| Driving Experience   | 29 YEARS AND 0 MONTHS     |
| Gender               | MALE                      |
| Mobile Number        | (LOCAL) +65-98150080      |
| Fax Number           |                           |
| Contact Number       | OTHERS-98150080           |
| EEmail Address       | MICHEAL@HOLEEGROUP.COM.SG |

|   |                |
|---|----------------|
| Address   | 23 JALAN LEBAN |
| Postcode  | 577560         |
| 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   | COLLIDED INTO PROPERTY |
| Weather Conditions | RAINING                |
| Road Surface       | WET                    |

#### Other Information

|   |   |
|---|---|
| Was any foreign vehicle involved in this accident?  | NO                                      |
| Number of vehicles (including own vehicle) involved in the accident                         | 1                                       |
| Was any body injured in the Accident?   | NO                                      |
| Was any injured conveyed to hospital by ambulance?  |   |
| Was any other material or property damaged?   | NO                                      |
| I have been approached by unknown person(s) soliciting/offering accident claims assistance. | NO                                      |
| Number of Passengers (Including Driver)   | 2                                       |
| Passenger 1   | NAME: : SELENE QUEK<br>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

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  |

Sketch Plan Pg. 1

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:

13 DEC 2019

10:31 am



Driver's Signature

(If driver is not the policyholder)

Date & Time: 13 DEC 2019

10:31 am



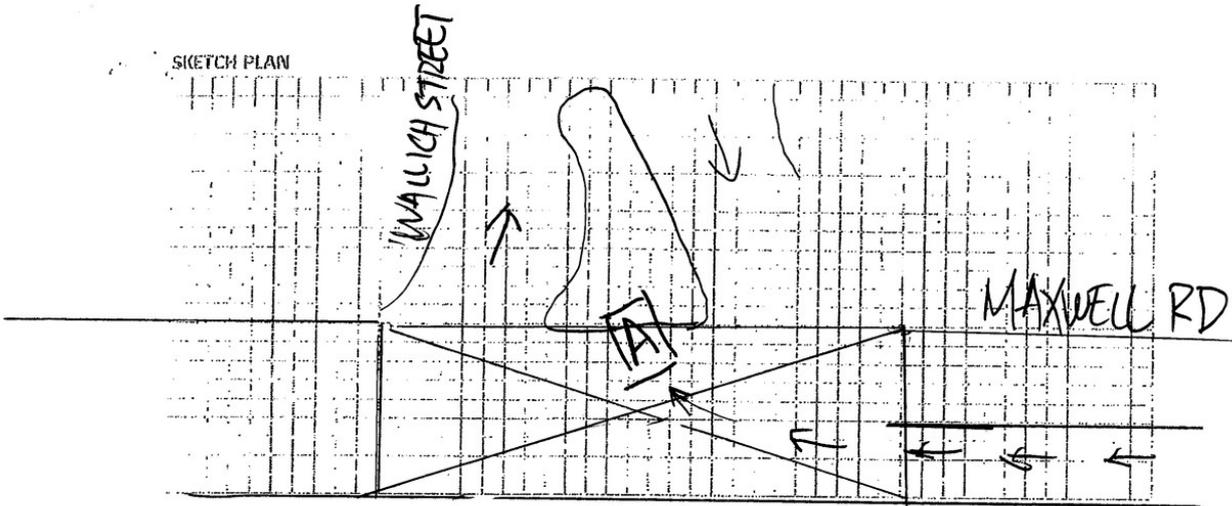
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.: Poh Kwee Choo

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On Monday 9th dec around 7pm, I was heading toward Guoco Tower for dinner. It was raining. I was traveling alone Maxwell road towards shenton way. I was turning into Wallich street. As it was raining, I didn't see that it was a non-right turn junction, and I also didn't see the kerb island (see attached) due to the poor visibility. As I was turning, a car came from the opposite side and I accelerated, and I mounted and went over the kerb. When my car dismounted from the kerb island, mg car have lost tyre pressure signal for both my front tyres. I immediately parked at the open carpark beside Guoco Tower, and when I inspected the car, both front tyres have burst but there was no other exterior damages.

06

I called for tow truck to tow my car to Soon Huat Tyre at Enterprise Hub so that they can change my tyres on Tuesday morning. After I collected the car on Tuesday late morning, I realized that my car drives with a lot of noise and vibration. That's when I sent my car to MBM workshop at Sin Ming. MBM only assessed the full damaged and give me the repair cost assessment on Wednesday evening. Upon receiving the assessment cost at \$10k, I realized that I need to claim insurance for the repair.

There was no other 3rd party involved nor was there any body injuries.

09:48

DECLARATION

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

  
 Policyholder's Signature  
 Date & Time:  
 13 DEC 2019  
GIAT/PAAC Sketch Plan Form\_V3

X  
 Driver's Signature  
 (If driver is not the policyholder)  
 Date & Time:  
 13 DEC 2019

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

CERTIFICATE OF INSURANCE Pg. 1

PRIVATE CAR

MX1  
R SB  
B367SD1  
Cov. Type: C  
KSKTSSB

CERTIFICATE OF INSURANCE

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP 189) OF THE REPUBLIC OF SINGAPORE  
THE ROAD TRANSPORT ACT 1987 OF MALAYSIA  
THE AGREEMENT BETWEEN THE MINISTER FOR FINANCE (SINGAPORE) AND THE MOTOR INSURERS' BUREAU OF SINGAPORE DATED 22 FEBRUARY 1975  
THE AGREEMENT BETWEEN THE MINISTER OF TRANSPORT (MALAYSIA) AND THE MOTOR INSURERS' BUREAU OF WEST MALAYSIA DATED 15 JANUARY 1968  
ANY SUBSEQUENT REVISIONS TO THE ABOVE ACTS AND AGREEMENTS

|  |  |                          |
|--|--|--------------------------|
| CERTIFICATE No.  | BVPCSB0321411901   | ChaNo: WP0ZZZ97ZHL123971 |
| 1. Index Mark and Registration Number of Vehicle   | SCL 89 X   |                          |
| 2. Name of Policyholder  | TAN HAI PENG MICHEAL   |                          |
| 3. Effective Date of Commencement of Insurance for the purposes of the Ordinance                           | 22 August 2019   |                          |
| 4. Date of Expiry of Insurance   | 21 August 2020   |                          |
| 5. Persons or Classes of Persons entitled to drive* (For certificate references MX1 and MX4, see overleaf) | <p>A. THE POLICYHOLDER.<br/>THE POLICYHOLDER MAY ALSO DRIVE A MOTOR CAR NOT BELONGING TO OR HIRED (UNDER A HIRE PURCHASE AGREEMENT OR OTHERWISE) TO HIM OR TO HIS EMPLOYER OR HIS PARTNER.</p> <p>B. ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HIS PERMISSION.</p>   |                          |
| 6. Limitations as to Use* (For certificate reference MX1, see overleaf)                                    | <p>USE ONLY FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS.<br/>THE POLICY DOES NOT COVER :</p> <ol style="list-style-type: none"> <li>USE FOR HIRE OR REWARD.</li> <li>USE FOR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING.</li> <li>USE FOR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS.</li> <li>USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.</li> </ol> <p>Estimated Value : MARKET VALUE WITH COE/PARF<br/>Hire Purchase Owner : MAYBANK<br/>Type of Cover : Comprehensive</p> |                          |

\* Limitations rendered inoperative by Section 79 of the Road Traffic Ordinance 1958 (Malaysia) or Section 7 of the Motor Vehicle (Third-Party Risks and Compensation) Ordinance 1960 (Republic of Singapore) are not to be included under the headings.

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



Approved Insurers

Examined By

*[Handwritten signature]*

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

