#### 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 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

|--|

 Date Of Report
 12/12/2019 13:33

 Date Of Accident
 11/12/2019 23:15

Exact Location Of Accident JUNC OF CROSS ST 1 TELOK ATYER ST

Country/State of Loss SINGAPORE

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SJK5476B

Insured/Policyholder

Name Of Registered Owner GOLDEN CHARA ENTERPRISE

Co Reg No 53329286K

Email Address DTANCY@YAHOO.COM

Mobile Phone No

Alternative Phone No OFFICE-90262132

**Vehicle Particulars** 

Manufacturer NISSAN

Model SYLPHY 1.5 4AT

Exact Purpose for which vehicle was being used at

time of accident

WORK

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 HIRE

**Insurance Company** 

Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 5098031858-01

Cover Note Number

#### Driver

 Name of Driver
 TAN CHIN YEW

 NRIC No
 \$6830346Z

 Date Of Birth
 06/08/1968

 Occupation
 OUTDOOR

 Date Of Driving Pass
 18/03/1994

Driving Experience 25 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-90262132

Fax Number

Contact Number

EMail Address NOEMAIL

Address BLK 37 #23-349 LORONG 5 TOA PAYOH EAST PAYOH SPRING

Postcode 310037

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 SIDE SWIPE Weather Conditions DRIZZLING

WET Road Surface

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

3

involved in the accident

NO

Was any body injured in the Accident? Was any injured conveyed to hospital by

NO

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)

**Details of Police Action** 

1

Was the accident reported to the police?

If Yes, Please state which Police Station

NO

Was notice of intended Prosecution given?

NO

If Yes, against whom?

**Circumstances of Accident** 

REFFER ATTACHED;

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 SHD366D

Vehicle Make/Model/Colour

RENAULT / LATITUDE 2.0L DCI AUTO D/AB 4DR

**Details Of Properties** 

Vehicle Category

TAXI

Name of Driver TAN SECK CHUAN@TAN SECK HUI

NRIC/Passport Number S1300285A

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 13

#### Accident Sketch Plan

#### SKETCH PLAN

#### IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
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- 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.
- 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 :
  - 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:
  - 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: IDAG KAKI BUKIT (VAC) 25 Kaki Bukit Ave 4 #02-02 Singapore 415933 Tel: 67416697 Fax: 67492305

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

M 2 DEC 2019

### **Accident Sketch Plan**

SKETCH PLAN	
4	cross street
9	
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	A: 27 K = K76 B B: SHD366 17
Car Al was an left most lane in direction of Chinetumn before	along Cross Freet travelling
Greet.	Car B
Greet.  Can B was the 3rd land from from his lane and aboutly come largelet rear dow side to hit me	the left. He tried to fifter into my lone causing his
and bumper area.	of cer 1) from right heading
DECLARATION  I/We declare the foregoing particulars are true in every respect.	IDAC KAKI BUKIT (VAC) 23 Kaki Bukit Ave 4 #02-02 Singapore 415933 Tel: 67416697 Fax: 67492305 Email: vacib@vicom.com.eg
Policyholder's Signature Date & Time: 12/13/19 12-45pm (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: 12 DEC 2019

## **Singapore Accident Statement**

Date of Accident	11/12/19			
Time of Accident	2315 (24hr format)			
Exact Location Of Accide	ent Junction Cross St 1, Telok Ayl + St			
Country/State of Loss	Singapor P			
	Details Of Own Vehicle			
Vehicle No	SJK 5476B			
Insured/Policyholder				
	Individual Company			
Name of Registered Ow	ner Golden chara Enterprise			
Co Reg No	53329286K			
Email Address	deanch a yahoo. com			
Mobile No	90262132			
Alternative Phone No				
Vehicle Particulars				
Manufacturer	Nissan			
Model	Syphai			
Are you claiming under	your own insurance Yes / No			
policy for repair to your	· vehicle?			
If No, Please state actio	n to be taken			
Vehicle Category				
Insurance Company				
Name of Insurance Con	npany Income			
Type Of Coverage	Comprehensive			
Fleet Policy	Yes / No			
Policy Number	5098031858-01			
Cover Note Number Driver				
Name of Driver	TAN CHIN YEW			
NRIC No	568303462			
Date of Birth	6/8/1968			
Occupation	Indoor / Outdoor			
Date of Driving Pass 16/3/1994				
Gender	Female / Male			

Mobile Number <u>90262132</u>	
Fax Number	
Contact Number	
Email Address	
Address BUK 37 Lovery	Toa payo 4
# 13-349 5	3/0037
Postcode	
Was driver an employee of the Insured's Company	Yes / No
If No, Relationship of the Driver with the Insured	DWhen
Vehicle Registration Number of Driver's Own Vehicle	
Insurance Company of Driver's Own Vehicle	
General Information of the Accident	
Type of Accident	change Collising
Weather Conditions	Dhirle
Road Surface Other Information	wet
Was any foreign vehicle involed in this accident?	Yes / (No)
Was any body injured in the Accident?	Yes / (No)
Was any other material or property damaged?	(Yes) / No
Was there any video captured by Car Camera?	Yes /(No)
Number of Passengers (including Driver)	165 / 119
Details of Police Action	
Was the accident reported to the police?	Yes / (No)
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	Yes / (No)
If Yes, against whom?	
Details of Othe	er Vehicle Property 1
Vehicle Registration Number SHD3	66 D
Vehicle Make/Model/Colour Den M	
Details Of Properties	Micle B
Name of Driver	seck Chuan @ Tan Seck Hui
NRIC/Passport Number	nu 28+ 0



## 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: 5098031858-01

1. Index mark and Registration Number of Vehicle

Chassis Number

2. Name of Policyholder

3. Effective Date of Insurance

4. Expiry Date of Insurance

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.

: SJK5476B

: 24 Apr 2019

: 23 Apr 2020

Cover : drivo CLASSIC

: GOLDEN CHARA ENTERPRISE

: JN1BAAG11Z0106928

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

## This Policy does not cover

(a) Use for racing, pace-making, reliability trial or speed-testing.

(b) Use for the carriage of goods (other than samples) in connection with any trade or business.

(c) 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.

: \$\$2,000 **EXCESS (SECTION 1)** : \$\$1.500 **EXCESS (SECTION 2)** : \$\$100 WINDSCREEN EXCESS : N/A ADDITIONAL EXCESS

: PLEASE REFER OVERLEAF UNNAMED DRIVER EXCESS

: NO REPAIR AT OWNER'S PREFERRED WORKSHOP : YES INSURF WITH COE : NO NCD PROTECTION : NO TRANSPORT ALLOWANCE : NO **EXCESS WAIVER** 

: TAN CHIN YEW PRIMARY DRIVER : NG CHENG CHENG NAMED DRIVER (1)

: N/A NAMED DRIVER (2) HIRE PURCHASE COMPANY

: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS SUM INSURED

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)

: AUTOSHIELD PTE. LTD. (00000573469) : 19 Mar 2019 15:26 hrs Date of Issue

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

**Authorised Officer** 

**Chief Executive** 

## EN DEMATION RESIDENCE

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT. THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

# Business Profile (Business) of GOLDEN CHARA ENTERPRISE (53329286K)

Date: 28/05/2019

he Following Are The Brief Particul	ars of:				
lame of Business	:	GOLDEN CHARA	ENTERPRISE		
Former Name(s) if any	:				
Date of Change of Name	:				
Registration No.	:	53329286K			
Registration Date	:	17/02/2016			
Commencement Date	:	17/02/2016			
Status of Business	:	Live			
Status Date	:	18/02/2018			
Renewal Date	:	18/02/2018			
Expiry Date	:	17/02/2021			
Renewal via GIRO	:	NO .			
Constitution of Business	:	Partnership			
Principal Place of Business	•	37 LORONG 5 TO #23-349 EAST PAYOH SF SINGAPORE (31)	RING		
Date of Change of Address					
Principal Activities					
Activities (I)		PASSENGER LA AND TRISHAWS	ND TRANSPORT N.E.C. (EG ) (49219)	PRIVATE CARS FOR HIRE	WITH OPERATOR
Description		PASSENGER LA	ND TRANSPORT		
Activities (II)					
Description					
Particulars of Authorised Represe	ntative(s)				100
Name ID		Nationality	Address	Address Source	Date of Appointment

Authentication No.: W19356398J









1145165

NRICNO S6830346Z

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

No: 6368236

Date: 07/12/2009

APT BLK 37 LORONG 5 TOA PAYOH #23-349 SINGAPORE 310037 NRIC NO: S68303462 Date: 07/12/20

28-07-1993

A+

Blood Group Date of assue

Issue Date TAXI VL BUS VL BUS ATTENDANT Description

003

17/03/2016 21/12/2001 21/12/2001