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.

By the lodgement of this report to the insurers, yo aforesaid.	u hereby consent to the archiving of this report at the centre and to copies of the report being made available			
	ACCIDENT STATEMENT			
Date Of Report	20/01/2020 11:27			
Date Of Accident	18/01/2020 14:50			
Exact Location Of Accident	ALONG PIE TOWARDS CHANGI			
Country/State of Loss	SINGAPORE			
DETAILS OF OWN VEHICLE				
Vehicle Registration Number	SKZ7095M			
Insured/Policyholder				
Name Of Registered Owner	TONY NGAWING			
NRIC No	F2282477P			
Email Address	NGAWING.TONY@ARKEMA.COM			
Mobile Phone No	(LOCAL) +65-90119488			
Alternative Phone No	OFFICE-90119488			

Vehicle Particulars

Manufacturer **AUDI**

Model Q5 2.0 TFSI QU (230 BHP)

Exact Purpose for which vehicle was being used at

time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

If No. Please state action to be taken REPORTING ONLY Vehicle Category PRIVATE CAR

Insurance Company

ERGO INSURANCE PTE. LTD. Name of Insurance Company

COMPREHENSIVE Type Of Coverage

Fleet Policy

Policy Number DMPG190006450

Cover Note Number

Driver

Name of Driver **TONY NGAWING**

NRIC No F2282477P Date Of Birth 15/12/1960 Occupation **INDOOR Date Of Driving Pass** 02/02/1995

Driving Experience 24 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-90119488

Fax Number

Contact Number OFFICE-90119488

EMail Address NGAWING.TONY@ARKEMA.COM Address NA

Postcode

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 NO COLLISION

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

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

NO

NO

2

1

Was any other material or property damaged? NO

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME: : NA

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name

BUKIT BATOK NEIGHBOURHOOD POLICE CENTRE

NO

ROAD: 21 BUKIT BATOK EAST AVE 4, POSTCODE: 659840, COUNTRY:

Police Station Address SINGAPORE

Police Station Contact TEL NO: 1800-6659999 - FAX NO: 66655793

Was notice of intended Prosecution given?

If Yes, against whom?

.

Circumstances of Accident

AS PER SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

YES

NO

NO

Accident Sketch Plan

SKETCH PLAN

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- 5. Any false reporting may be referred to the Police for Investigation.
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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)
 - (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: 20

Driver's Signature

(If driver is not the policyholder)

Date & Time: 20

Reporting Cellifre Personnel's Signature

Name:

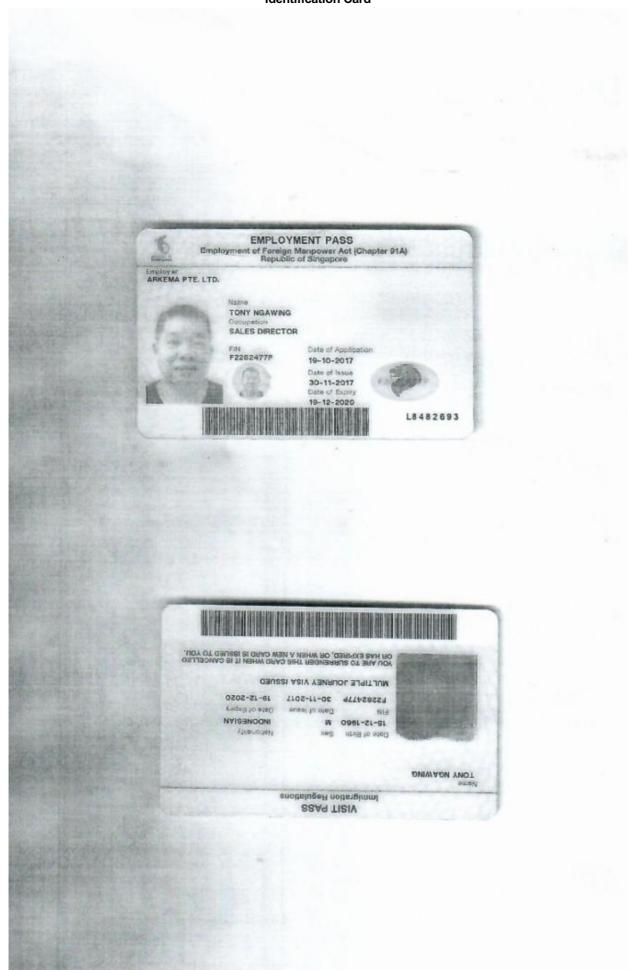
NRIC/FIN No.:

Accident Sketch Plan

			,
KETCH PLAN	000	(3)	100
A = Skz 7095 M			
8 = SDR 8200 U			
	B		
	A	' H-	
SCRIBE CIRCUMSTANCES OF THE ACCIDENT		1	
Accident Date & Time: 18/01/2020 14:50HRS			
Accident Location : ALUNG PLE TOWARDS CHANGE.			
I was drang along the			
location. Vehicle B suddo	mby e-branced as		
there was an acciden	t infrint.		
1 collowed ast & u			
stop in time. There w			
vehide B. My wehlde	was not damag	ed,	
Homever Vehicle B class		d	
collided into his vehic	U.		
Reporting Only Own Damage	☐ Third Party ☐ Clair	n at other work	shop (OD/TP)
DECLARATION	RTANT NOTE:		
occurrence of a good and a second of the second occurrence	POURTEEN (14) days clause whereby the	Could be made within the supple	ed timeframe hom the day of
IN /	(1	
olicyholder's Signature Driver's Signature	Reporting	entre Personnel's !	signature
ate & Time: 20/1 2000 (If driver is not the policyholder)	Name:		

Driving License YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES) Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg EFFECTIVE DATE REPUBLIC OF SINGAPORE F2282477P TONY NGAWING Birth unite. 15 Dec 1960 Marie Date: 09 Feb 2019 Valid Till 08/02/2021

Identification Card



ERGO

24-Hour Motor Accident Reporting

and Assistance Helpline

6333 2222

vw.ergo.com.sq

700.00

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/Policy Number

DMPG19000650

Vehicle Registration Number

SKZ7095M

Cover Type

: Superior Comprehensive

Policy Type

Private Car

Name of Policyholder/Insured

TONY NGAWING

Commencement Date of Insurance

29/01/2019

:

Expiry Date of Insurance

. 28/01/2020

Excess

EXCESS: (SECTION I)... ADD'L EXCESS: UNNAMED DRIVERS (SECTION I).

500.00 ADD'L EXCESS: NON-AUTH WORKSHOPS (SECTION I) S\$ 300.00 EXCESS: WINDSCREEN 100.00 YOUNG & INEXP DRIVERS (SECTION I) 3,000.00

Finance Company/Hire Purchase Owner: UNITED OVERSEAS BANK LTD

*Persons or Classes of Persons entitled to drive:

- 1. The Policyholder
- 2. JUNITA TUMUNDO
- 3. Any Person who is driving on the Policyholder's order or 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

* Limitations as to Use:

- 1) Use only for social domestic and pleasure purposes
- 2) Use for Policyholder's business

This Policy does not cover

- 1) Use for hire or reward, racing, pace-making, reliability trial or speed-testing and on race track
- 2) Use for the carriage of goods other than samples in connection with any trade or business
- 3) 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 (*).

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)

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

Karl- heint Jung

Authorized Signature

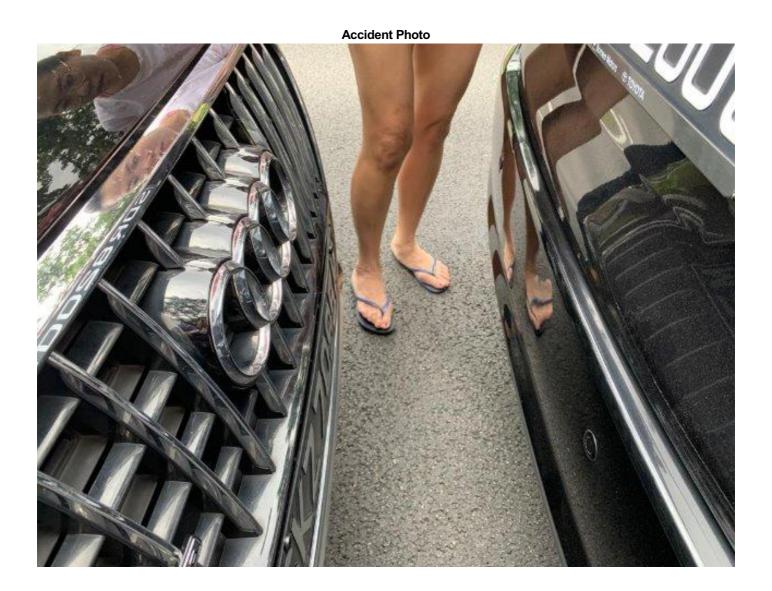


Accident Photo



Accident Photo





Accident Photo

