

## 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	05/03/2020 12:56
Date Of Accident	04/03/2020 19:05
Exact Location Of Accident	ALONG PIE EXIT TO BKE (SLIP RD)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLW2622D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	KUIK TIEN HENG
NRIC No	S8719719J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93800552
Alternative Phone No	OFFICE-93800552

### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	B180
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	ERGO INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPG19006243
Cover Note Number	

### Driver

Name of Driver	KUIK TIEN HENG
NRIC No	S8719719J
Date Of Birth	06/07/1987
Occupation	INDOOR
Date Of Driving Pass	03/07/2007
Driving Experience	12 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93800552
Fax Number	
Contact Number	OFFICE-93800552
Email Address	NOEMAIL

Address	BLK 210 CHOA CHU KANG CENTRAL #11-162
Postcode	680210
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	CHAIN 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	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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

ON 04/03/2020 AT ABOUT 1904HRS, I WAS DRIVING MY CAR (SLW2622D) ALONG PIE EXIT BKE IN EXTREME RIGHT LANE. VEHICLE IN FRONT OF ME STOPPED, SO I SLOWED DOWN AND STOP TOO. SUDDENLY, I FELT AN IMPACT FROM THE BACK AND DUE TO THE HUGE IMPACT, MY CAR BEING PUSHED FORWARD AND HIT ONTO THE VEHICLE IN FRONT OF ME. WHEN I CAME OUT TO INSPECT MY CAR, I REALISED THAT I WAS INVOLVED IN A 3 CARS CHAIN COLLISION ACCIDENT. VEHICLE B DRIVER (SLE6796D) DID MENTIONED TO ME THAT HE WANTED TO FILTER TO THE LEFT LANE (ie: MIDDLE LANE) AND WHEN FILTERING, HE REALISED AN INCOMING MOTORCYCLE, HE SWERVED HIS CAR TO THE RIGHT AND ACCIDENTALLY KNOCKED INTO THE LEFT PORTION OF MY CAR. HENCE, I HERE TO LODGE THIS REPORT TO CLAIM AGAINST VEHICLE B'S INSURANCE FOR MY ACCIDENT DAMAGES. I WILL GO TO SEE DOCTOR IF FEEL ANY UNCOMFORTABLE AFTER THIS.

#### 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	SLE6796D
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Vehicle Category	PRIVATE CAR
Name of Driver	PEH QING LIANG GILBERT
NRIC/Passport Number	S8419446H
Contact Number	
Address	
Postcode	

Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SGL616C
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE C
Vehicle Category	PRIVATE CAR
Name of Driver	HELMY BIN AZMAT
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:

5/3/2020

1117hrs

Driver's Signature

(If driver is not the policyholder)

Date & Time:

5/3/2020

1117hrs

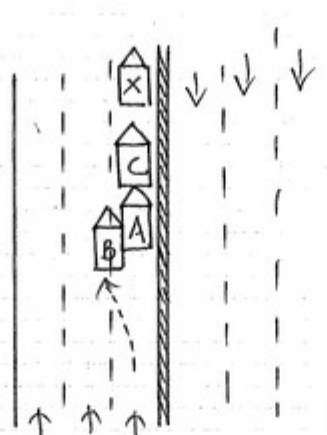
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

PRECISE

# SKETCH PLAN



- (A) SLW 2622D.
  - (B) SLE 6796D.
  - (C) SGL 616C.
- Along PIE Exit To BKE.

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 04-03-2020 at about 1904hrs, I was driving my car (SLW 2622D) along PIE Exit BKE in the extreme right lane. Vehicle in front of me stopped, so I slow down and stop too. Suddenly I felt an impact from the back and due to the huge impact, my car being push forward and hit on to the vehicle in front of me. When I came out inspect my car and I realized that I was involving 3 cars chain collision accident. Veh B's driver (SLE 6796D) did mentioned to me that he wanted to filter to the left lane (ie: middle lane) and when filtering, he realised an incoming motorcycle on his left. Thus, in order to avoid colliding with the incoming motorcycle, he swerved his car to the right and accidentally knocked into the rear left portion of my car. Hence I hereto lodge this report to claim against Veh B's Insurance for my accident damages. (I will go to see doctor, if feel any uncomfortable after this).

## DECLARATION

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

Policyholder's Signature  
 Date & Time: 5/3/2020  
 1117 hrs

Driver's Signature  
 (If driver is not the policyholder)  
 Date & Time: 5/3/2020  
 1117 hrs.

5/3/20  
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S8719719J



Name

KUIK TIEN HENG, DANIEL  
(GUO TIANXING)

郭添兴

Race  
CHINESE

Date of birth  
06-07-1987

Sex  
M

Country/Place of birth  
SINGAPORE

S8719719J

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S8719719J

Name

KUIK TIEN HENG, DANIEL  
(GUO TIANXING)

Birth Date: 06 Jul 1987

Valid Date: 03 Jul 2007



001511536J

5843666



NRIC No. S8719719J



Date of issue  
26-12-2017

Address

APT BLK 210 CHOA CHU KANG CENTRAL  
#11-162  
SINGAPORE 680210

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg 03 Jul 2007



Licence No: S8719719J

NP 428A

**ERGO****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 : DMPG19006243  
 Vehicle Registration Number : SLW2622D  
 Cover Type : Superior Comprehensive  
 Policy Type : Private Car  
 Name of Policyholder/Insured : KUIK TIEN HENG  
 Commencement Date of Insurance : 08/07/2019  
 Expiry Date of Insurance : 07/07/2020

24-Hour Motor Accident Reporting  
 and Assistance Helpline

**6333 2222**

www.ergo.com.sg

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

Finance Company/Hire Purchase Owner : STANDARD CHARTERED BANK (SINGAPORE) LIMITED

**\*Persons or Classes of Persons entitled to drive:**

1. The Policyholder
2. 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

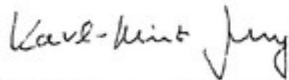
- 1) Use for hire or reward, racing, pace-making, reliability trial or speed-testing and on race track
- 2) Use for the carriage of goods other than samples in connection with any trade or business
- 3) Use for any purpose in connection with the Motor Trade

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



Authorized Signature

A000361	SUNMEX ENTERPRISE	
Vehicle Chassis Number : WDD2482422J249860, Vehicle Engine Number : 27091030371427		PC1, 20/08/2019 14:25

ERGO Insurance Pte. Ltd. Co. Reg. No.: 199305211H GST Reg. No.: M2-0116930-5  
 5 Temasek Boulevard #04-05 Suntec Tower Five Singapore 038985 Tel: +65 6829 9189 Fax: +65 6829 9248 www.ergo.com.sg

1000/1000

SUNMEX ENTERPRISE

04/03 2020 7:36 PM FAX +6562201698

Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo

