

## 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	25/03/2020 11:39
Date Of Accident	24/03/2020 09:10
Exact Location Of Accident	ALONG 61 TOH GUAN ROAD EAST
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJQ79R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	WONG CHUN WOO
NRIC No	SXXXX049J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92397662
Alternative Phone No	OFFICE-92397662

### Vehicle Particulars

Manufacturer	TOYOTA
Model	LEXUS-3.5 GS350 LUXURY AUTO (A)
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	ECICS LIMITED
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MPC19P00023300
Cover Note Number	

### Driver

Name of Driver	WONG CHUN WOO
NRIC No	SXXXX049J
Date Of Birth	04/09/1977
Occupation	INDOOR
Date Of Driving Pass	24/08/2000
Driving Experience	19 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92397662
Fax Number	
Contact Number	OFFICE-92397662
Email Address	NOEMAIL

Address	BLK 164 BUKIT BATOK STREET 11 #05-140
Postcode	650164
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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	4
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?	YES
If Yes, Please state which Police Station	
Police Station Name	NANYANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 2 JURONG WEST AVENUE 5 , POSTCODE: 649482 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7929999 - FAX NO: 67912972
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

Please refer to Police Report T/20200324/2042.

#### 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	GBE460E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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

SG5037A

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

BUS

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 3

Vehicle Registration Number

GBF3783Z

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)



## Accident Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

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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. 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.
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: 24/2/20

2-44 PM

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



I am fully aware that my insurer may have a 14-day period for me to decide on filing an Own Damage Claim.

Printed Name: [Signature]

# Accident Sketch Plan

## SKETCH PLAN

Date of Accident: 24/05/2020

Please refer to accident photos attached.

A: 5JQ79R  
B: GBF3783Z  
C: GBE460E  
D: SG5037A

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to Police Report T/20200324/2042

- ☐ Own Damage Claim  
☐ Third Party Claim  
☐ OD/TP Claim at another workshop :  
☒ Reporting Only

## DECLARATION

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

Policyholder's Signature

Date & Time: 24/5/20

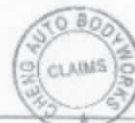
2.44pm

GAMALVE SANTOS

Driver's Signature

(If driver is not the policyholder)

Date & Time:



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

# Certificate of Insurance



## CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks 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)  
 Road Transport (Amendment) Act, 2019 (Malaysia)

### AUTHORISED WORKSHOPS

MZ300  
 COMPREHENSIVE  
 ORIGINAL

CERTIFICATE NO: MPC19P00023300	Chassis No. JTHBE1BL605002702
AGENCY NAME: Ensurance.Pro	Engine No. 2GR8738149
AGENCY CODE: A0000175	
1. Index Mark and Registration Number of Vehicle: SJQ79R	
2. Name of Policyholder: WONG CHUN WOO	
3. Period of Insurance (both dates inclusive): 02-10-2019 to 01-10-2020	
4. Persons or Classes of Persons entitled to drive	
a) The Policyholder and all Named Drivers declared under the policy b) Any other person who is driving on the Policyholder's order or with his 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.	
5. Limitations as to use	
Use for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or reward, tuition, driving test, race, pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.	
6. EXCESS APPLICABLE	
WINDSCREEN	SGD 100.00
SECTION I - INSURED/NAMED DRIVER	SGD 750.00
ADDITIONAL EXCESS OTHER THAN NAMED DRIVERS:	
SECTION I - UNNAMED DRIVERS	SGD 500.00
SECTION I - AGE<25, AGE>65 OR DRIVING EXP<2 YEARS OLD	SGD 3,000.00
7. Hire Purchase: Tokyo Century Leasing (S) Pte Ltd	
Signed for and on behalf of ECICS Limited	
	
AUTHORISED SIGNATORY	

### Important Notice:

- Policyholders are hereby warned that it shall be unlawful for any person to use or cause or permit any other person to use a motor vehicle without a valid insurance under the Act.
- On the sale of a motor vehicle, Policyholders must surrender all insurance papers issued including 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).
- The Certificate of Insurance and the Policy will cease to be valid once the motor vehicle has been sold or transferred.
- The Payment Before Cover Warranty or Premium Payment Warranty found in the Policy must be complied with otherwise there would be no liability under the Policy and Certificate of Insurance.



## Police Report



**SINGAPORE  
POLICE FORCE**



T/20200324/2042

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

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Report No. T/20200324/2042

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 24/03/2020 12:05		Vide Report No.: D/20200324/0045		Station Diary No.: 73
<b>Informant's Particulars</b>				
Name of Informant: WONG CHUN WOO		Address: APT BLK 164 BUKIT BATOK STREET 11 #05-140 SINGAPORE 650164		
ID Type / ID No.: NRIC NO / S7765049J		Contact No.: Home/Office: Mobile: 92397662		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 42	Date of Birth: 04/09/1977	Type of Informant: Driver	
Race: Chinese		Language:	Institution / School Name:	
Occupation: CONSTRUCTION CONTRACTOR		Driving Licence Information: Class: Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 24/03/2020 09:10	Type of Location: Straight Road
Location: Along Road 1 TOH GUAN ROAD EAST 61 Toh Guan Road East				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBE460E	Lorry				Slightly Damaged	2
GBF3783Z	Lorry				Seriously Damaged	0
SG5037A	Bus/Coach/Minibus				Seriously Damaged	0
SJQ79R	Car	TOYOTA	LEXUS GS350 LUXURY AUTO	Brown	Slightly Damaged	0

Police Report



**SINGAPORE  
POLICE FORCE**



T/20200324/2042

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

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Report No. T/20200324/2042

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJQ79R	ECICS LIMITED	MPC19P00023300	02/10/2019	01/10/2020

**Brief Details.**

On 24/03/2020 at around 0910hrs, I was driving my car, a brown Lexus bearing the registration number of SJQ79R, along Toh Guan East Road. At that point of time, there was another vehicle, a blue lorry bearing the registration number of GBE460E, in front of my car. The driver suddenly braked his vehicle as there was another vehicle, a white lorry bearing the registration number of GBF3783Z, sliding down from 61 Toh Guan Road East. The white lorry was sliding down the ramp and there was no driver on board. The white lorry then hit onto a Tower Transit Bus, bearing the registration number of SG5037A, which was on the oncoming lane.

After the collision, the white lorry was diverted to our direction and it hit onto my car as well as the blue lorry. After the collision, police assistance was called upon. There was a passenger on the bus who was injured and he was conveyed to hospital by the ambulance.

I wish to add that my car suffered damages such as a dented front bumper but I was not injured by the accident. I was unclear of the full details of the damages on the other vehicle.



Police Report



**SINGAPORE  
POLICE FORCE**



T/20200324/2042

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

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Report No. T/20200324/2042

CONTINUATION OF REPORT

**Sketch Plan**

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

J/  
Sgt 2 TAN LITEK

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
24/03/2020 12:05

Officer In Charge Of Case:  
TP / GIT /

Sgt 2 MUHAMMAD NOOR BIN ABDUL  
SINGAPORE POLICE FORCE  
Contact No: 65476201

Classification Of Case:

Authentication Stamp  
NP168

SIGNATURE