

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 ability.
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	12/03/2018 10:24
Date Of Accident	10/03/2018 13:00
Exact Location Of Accident	WHAMPOA FLYOVER TWDS CHANGI (PIE)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLT7462G
Insured/Policyholder	
Name Of Registered Owner	AUTOMOBIL LEASING PTE LTD
Co Reg No	200701438D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-64682200

Vehicle Particulars

Manufacturer	SSANGYONG
Model	TIVOLI-1.6 G 6AT ABS 2WD (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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	MU011879
Cover Note Number	

Driver

Name of Driver	LEE KENG HENG
NRIC No	S8619245D
Date Of Birth	14/07/1986
Occupation	INDOOR
Date Of Driving Pass	08/04/2009
Driving Experience	8 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96953553
Fax Number	
Contact Number	OFFICE-96953553
Email Address	LEEJAKE86@GMAIL.COM

Address	BLK 525 HOUGANG AVE 6 #03-177
Postcode	530525
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	DRIZZLING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles 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

REFER TO 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	SKL9752K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

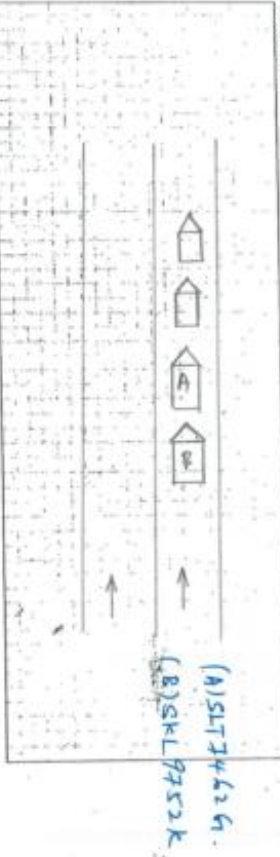
Sketch Plan

IMPORTANT NOTICE

SKETCH PLAN

1. Please report immediately the details of the accident to speed up the claims process.
2. This form must be completed by the Policyholder and/or the Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to INVESTIGATE further.
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 data recorded may be referred to the Police for investigations.
6. The report will be forwarded by the Insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIAS) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the completion 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 wherever.

Sketch Plan



Describe Circumstances of the Accident

My vehicle (A) was travelling along Chongpa Highway towards Pte Changi.

My front wheel stopped so I stopped also. After a second, vehicle (B) then turned left into my vehicle (A).

Declaration

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



Policyholder's Signature / Date & Time

[Signature] 12/03/18 8:40am

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan #2

Tokio Marine Insurance Singapore Ltd.
Company Reg No. 192992140N 105T Reg No. M21900022-46
25 Maclean Street #20-01 Tokio Marine Centre Singapore 069248
T: 65 6221 6111 / 65 6221 4315 / 65 6224 0985 E: tokiomarine@tokiomarine.com.sg W: www.tokiomarine.com
A member of the
Tokio Marine Group



Certificate of Insurance

FORM 100A

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)

Policy No.: MU511973 (Private Car)	Chassis No.: KP12081V5HPT76646
1. Index Mark and Registration Number of Vehicle	
2. Name of Policyholder	AUTOMOBILE LEASING PTE LTD
3. Effective date of the Commencement of Insurance for the purpose of the Act	08/11/2017 (14:27:00)
4. Date of Expiry of Insurance	08/11/2018
5. Person or Class of Persons entitled to drive* Any person who is driving on the policyholder's order or with their permission	
* Conditions of the Policy are subject to compliance with the Insurance Act and Regulations in force in the State, and particularly with the provisions of the Motor Vehicle Insurance Act and its Regulations. The policyholder is required to ensure that the Motor Vehicle is registered under the Motor Vehicle Act and its Regulations under the Motor Vehicle Act and that the Motor Vehicle is insured under the Motor Vehicle Act and its Regulations.	
6. Limitations as to use* Use only for social, domestic and pleasure purposes and for the Policyholder's business. This policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed-testing or the carriage of goods (other than samples) in connection with any trade or business or use for any purpose in connection with the Motor Vehicle. * Limitations stipulated respectively by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 86 of the Road Transport Act, 1987 (Malaysia), are not to be exceeded under these headings. The policyholder and the Policyholder are required to comply 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). Please refer to the Policy Schedule for full details, terms and conditions of the insurance.	
IMPORTANT NOTICE This Certificate is not negotiable. Should it be lost, it is to be replaced by a duplicate issued by the Insurer. The Insurer is not bound to issue a duplicate unless the original is produced or if the Certificate has been lost and destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Section 109(a) of the Road Transport Act, 1987 (Malaysia).	
ADDITIONAL INFORMATION	
Insurance Plan:	Comprehensive Approved Workshop Plan
Limit for total loss or theft:	Prevailing Market Value
Policy Excess:	Cash Damage Claims: S\$20,000.00 (Original Excess: S\$20,000.00) Additional Excess for Uninsured Driver(s): S\$20,000.00 Additional Excess for Young or Inexperienced Driver(s): S\$20,000.00 Windscreen Excess: S\$20,000.00 UNSUBSIDIARY
Financial Interest:	1) Additional Excess for YTD (Vehicle 24 hrs old and/or less than 2 yrs old) (Maximum: S\$20,000.00) 2) Additional Excess for Uninsured Driver is increased to S\$1,000.00 per 1.
Additional Terms:	

TOHIO MARINE INSURANCE SINGAPORE LTD.

Authorized Signatory

Sketch Plan #3



Sketch Plan #4

VRL Application

Register New Vehicle (Acknowledgement)

Vehicle Particulars

Vehicle No:	SL 17462G	Vehicle Scheme:	Normal
Vehicle Type:	R11 - Private Hire (Self Drive) Season Wagon/Jump/Land Rover		
Vehicle Attachment 1:	No Attachment	Vehicle Attachment 3:	-
Vehicle Make:	SSANGYONG	Vehicle Model:	TIVOLI 1.6G 6AT ABS 2WD
Chassis No:	KPT3081V5HP176946	Engine No:	17391003097561
Motor No:	-	Trailer Chassis No:	-
Propellant:	Petrol	Passenger Capacity:	4
Engine Capacity:	1597 cc	Power Rating:	-
Maximum Power:	94.1 kW (128 bhp)	Maximum Laden Weight:	1810 kg
Output:		Secondary Colour:	-
Unladen Weight:	1300 kg	Original Registration Date:	09 Nov 2017
Primary Colour:	Black	Open Market Value:	\$17,697.00
First Registration Date:	09 Nov 2017	Merchum PAOF Benefit:	\$8,848.00
Manufacturing Year:	2017	Additional Registration Fee Rate:	First \$17,697.00 (100%)
PAOF Eligibility:	Yes		
No. of Transfers:	0		
Actual APF Paid:	\$17,697.00		
Owner Particulars			
Owner Name:	AUTOMOBIL LEASING PTE LTD		
Owner ID Type:	Company		
Owner ID:	200701438D		
Registered Address:	Private Residential (Condo Apt or House) / Shopping / Office		
Type:	Complete		
Registered Block/House No:	1094		
Registered Street Name:	LOWER DELTA ROAD		
Registered Lot No:	-		
Registered Building Name:	MOTORWAY BUILDING		
Registered Postal Code:	169205		
COC No / Expiry Date:	2017110101003208N / 08 Nov 2027		
COC Bid Category:	A - Car up to 1600cc & 97kW (130bhp)		
QP Paid:	\$41,617.00		
Transaction Details			
Business Transaction Ref. No:	20171109131504437202		
Business Transaction Date:	09 Nov 2017		
Business Transaction Time:	15:35:04		

IV: 11 27849280

Message

The above vehicle has been successfully registered.
Please note that \$2,500.00 will be deducted from your GIBCO account.

https://trialink.vrl.ha.gov.sg/ha/vrl/action/acknowledgeNewReg?FUNCTION_ID=F01... 9/11/2017

Accident Photo



Accident Photo



Accident Photo



