

## 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	17/06/2020 16:43
Date Of Accident	17/06/2020 11:20
Exact Location Of Accident	YISHUN AVE 6 & YISHUN AVE 9.
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKZ450S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHONG CHUN HEE
NRIC No	S1466851I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96476151
Alternative Phone No	OFFICE-96476151

### Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL
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	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D20MTPV01000818
Cover Note Number	

### Driver

Name of Driver	TAY AH MOOI
NRIC No	S1134753C
Date Of Birth	22/04/1955
Occupation	INDOOR
Date Of Driving Pass	13/10/1992
Driving Experience	27 YEARS AND 8 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97856359
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 318C YISHUN AVE 9 #13-144
Postcode	763318
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - CROSS JUNCTION
Weather Conditions	RAINING
Road Surface	WET

#### 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?	YES
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)	2
Passenger 1	NAME: : ZHONG ZIQIAN GENDER: : MALE

#### 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

I WAS TRAVELLING ALONG YISHUN AVE 6 ON THE LEFT LANE OF 2 LANE, WHEN I CAME TO A STOP AT THE JUNCTION WITH YISHUN AVE 9. I STOPPED AT THE JUNCTION DUE TO TRAFFIC RED LIGHT AND WAITED FOR THE TRAFFIC LIGHT TO TURN GREEN. WHEN MY VEHICLE PASSED THE STOP LINE, SUDDENLY ON M/TAXI, CAME FROM MY RIGHT FROM YISHUN AVE 9 BEAT THE TRAFFIC RED LIGHT AND THUS COLLIDED WITH MY VEHICLE.

#### 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	SHC5800P
Vehicle Make/Model/Colour	
Details Of Properties	VEH B
Vehicle Category	TAXI
Name of Driver	LIM KUAN CHONG
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage  
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1	
Name	TAY AH MOOI
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SKZ450S
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	
Address	
Postcode	

DETAILS OF INJURED PERSON 2	
Name	ZHONG ZIQIAN
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

**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.

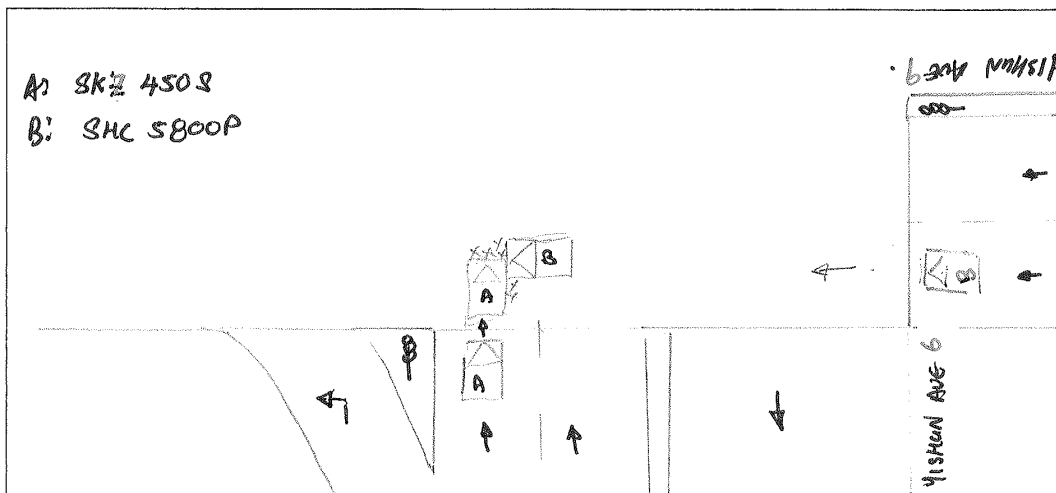
Policyholder's Signature  
Date & Time:

Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

## Accident Sketch Plan Pg. 1

### SKETCH PLAN




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS TRAVELLING ALONG YISHUN AVE 6 ON THE LEFT LANE OF 3 LANE, WHEN I CAME TO A STOP AT THE JUNCTION WITH YISHUN AVE 9. I STOPPED AT THE JUNCTION DUE TO TRAFFIC RED LIGHT AND WAITED FOR THE TRAFFIC LIGHT TO TURN GREEN. WHEN THE TRAFFIC LIGHT CHANGES TO GREEN LIGHT, I PROCEEDED TO MOVE OFF, WHEN MY VEHICLE PASSED THE STOP LINE, SUDDENLY ONE M/TAXI, CAME FROM MY RIGHT FROM YISHUN AVE 9 BEAT THE TRAFFIC RED LIGHT AND THUS COLLIDED WITH MY VEHICLE.

## DECLARATION

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

  
Policyholder's Signature  
Date & Time:

Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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



Sompo Insurance Singapore Pte. Ltd.

59 Raffles Place, #05-01/06 Singapore Land Tower Singapore 048625  
Tel: 6461 6555 Fax: 6221 3302 Website: www.sompo.com.sg  
Co. Reg. No. 1989054001 GST Reg. No. M20090306

### 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)**

**Cert No./Policy No.** : D20MTPV01000818  
**Insured** : CHONG CHUN HEE  
**Motor Car (Registration No.)** : SKZ450S  
**Cover** : Comprehensive - ExcelDrive GOLD  
**Policy Commencement Date** : 06 JANUARY 2020 00:00  
**Policy Expiry Date** : 05 JANUARY 2021 23:59  
**Maximum Liability (Section I)** : Market value at time of loss - Excl. COE  
**Excess\*** : \$500 - Section I  
(Waived up to S\$1,000 if accident repair is done at ExcelDrive Workshops for the first claim per policy year)  
**Voluntary Excess\*** : Buy Up : \$600 - Section I  
**Windscreen Excess\*** : S\$100.00 - Waived if Repair at ExcelDrive Workshop  
**Loss of Use** : Per Policy Schedule

\* Subject to GST wherever applicable

Persons or Classes of Persons entitled to drive\*

1. The Insured.
2. Any other person who is driving on the Insured's order or with his permission.
3. In the event of the death of the insured,
  - a. any member of the insured's family, or a paid driver who has been driving the Motor Car during the life of the insured and permission to drive had not been withdrawn prior to the death of the insured; and
  - b. any other person who has been given permission to drive the Motor Car prior to the death and such permission had not been withdrawn by the Insured.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Car 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 Car. And provided further that the Motor Car is registered under the Road Traffic Act (Chapter 276) and its registration under the Road Traffic Act (Chapter 276) has not been cancelled at the time of the accident, loss or damage.

#### Limitations As To Use

Use only for social, domestic and pleasure purpose and for the Insured's business. The Policy does not cover use for hire or reward, racing, pace-making, speed testing, reliability trial, the carriage of goods other than samples in connection with any trade or business or use for any purposes in connection with the Motor Trade.

#### ExcelDrive Workshops and Accident Reporting

It is a condition precedent to liability that the Insured shall call at the Company's Accident Reporting Center with the Motor Car within 24 hours of the accident or by the next working day thereof.

All accident repairs to the Motor Car must be carried out at ExcelDrive Workshops, otherwise the claim is not payable under the Policy. For ExcelDrive Prestige Plan, accident repairs to the Motor Car can be carried out at any workshop other than ExcelDrive Workshops.

For the list of Accident Reporting Centres and ExcelDrive Workshops, please visit our website at [www.sompo.com.sg](http://www.sompo.com.sg) or call our Emergency Hotline: (65) 6226 3323.

I/We HEREBY CERTIFY that the policy to which this Certificate relates is issued in accordance with (1) the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia); and (2) the Policy terms, conditions and exceptions of the Private Car Policy ref MTP.27

Sompo Insurance Singapore Pte. Ltd.

Authorised Signatory

Date/Time of Issue : 31 DECEMBER 2019 10:05

#### IMPORTANT NOTICE

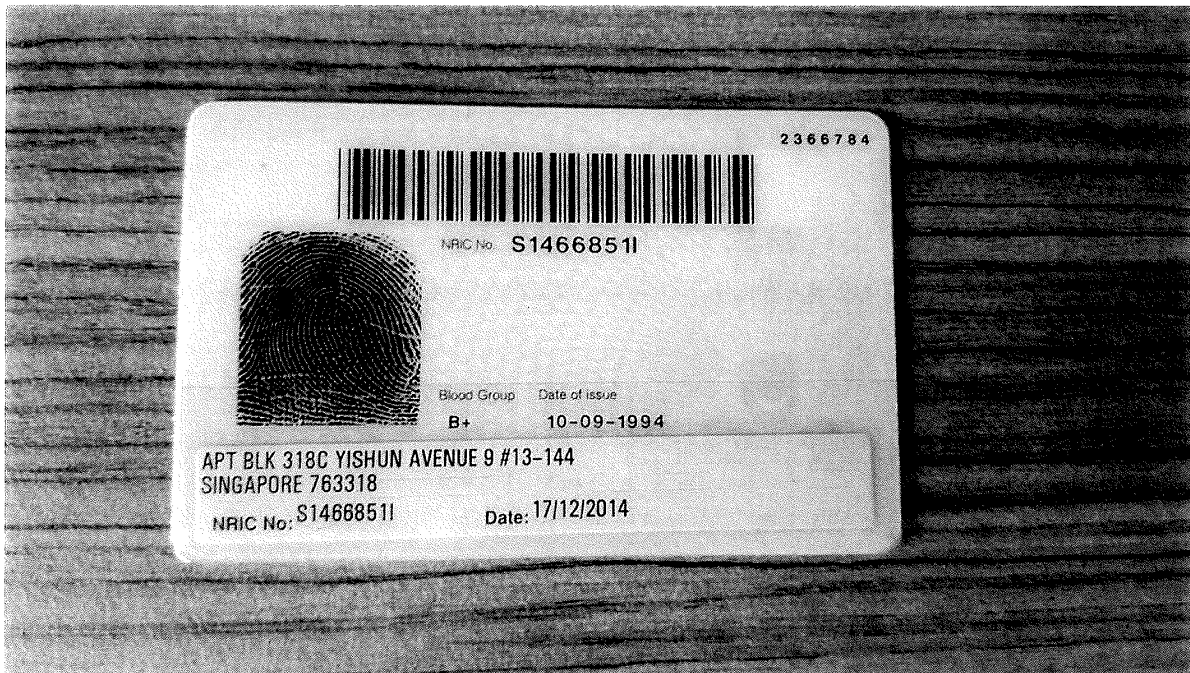
- o Keep the Certificate in your Motor Car.
- o Under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189), it shall be unlawful for any person to use or cause to permit any other person to use a motor vehicle without a valid policy of insurance under the Act.
- o On the sale of the Motor Car or if for any reason the Insurance is terminated during its currency, the Insured must surrender 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).
- o This Policy will cease to be valid once the Motor Car has been sold to another person. The Policy is not transferable to the new owner of the Motor Car.

Intermediary Code & Name : 11A14006 & ACCORD INSURANCE AGENCY CI Code: 22A\_D\_4DLOO42L1D06IA



Usage for Insurance Motor Accident Reporting  
and Claims Purposes Only

Vehicle no: SCZ 450 S  
Date of Accident: 12/06/2020




**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Number: **S 1 1 3 4 7 5 3 C**

Name: **TAY AH MOOI**

Birth Date: **22 Apr 1955**

Issue Date: **01 Nov 2003**

 000970033D

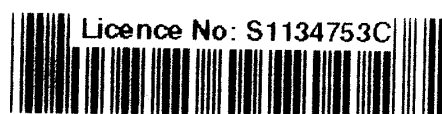
For use in Motor Vehicle / Accident Reports  
and Claims Purposes Only

SK24505  
11/06/2020

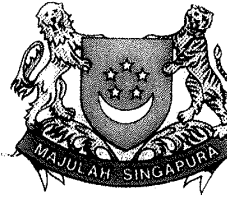
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	PASS DATE
<b>Class 3</b> Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	13 Oct 1992

NP 428A



**REPUBLIC OF SINGAPORE**  
**IDENTITY CARD NO. S1134753C**



Name

**TAY AH MOOI**



**郑 亚 妹**

Race

**CHINESE**

Date of Birth

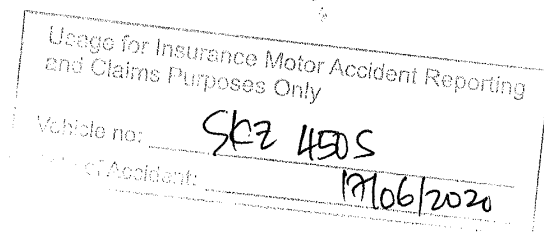
**22-04-1955**

Sex

**F**

Country of Birth

**SINGAPORE**



2366900



NRIC No. **S1134753C**



Blood Group

**B+**

Date of issue

**10-09-1994**

**APT BLK 318C YISHUN AVENUE 9 #13-144**  
**SINGAPORE 763318**

NRIC No: S1134753C

Date: 17/12/2014

Accident Photo



Accident Photo



Accident Photo



Accident Photo

