

NOTIFICATION OF ACCIDENT & PRE-REPAIR INSPECTION

To : First Capital Insurance Pte Ltd
Claims Department

Re :
Vehicle No. SJX2948H

From: M/s Loh Heng

Sub : 3rd Party Claim

This is to inform you that vehicle no. SHC2380D, which is insured under your company was involved in an accident on 15-June 2020.

The vehicle is at the workshop LOH HENG Tel:64532237 and is available for your inspection before work is carried out.

Please acknowledge receipt of this Notification by return fax to **64556384** and reply Within 2 days whether you wish to inspect the vehicle or waive inspection.

Yours faithfully,
LOH HENG

Danny Loh(Person to contact)
HP : 90111432



Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006529-2

Print Date/Time : 17 Jun 2020 / 14:55:58

Receipt Date/Time : 17 Jun 2020 / 14:55:58

Tax Invoice/Receipt

Receipt No. : ITNET-00000-200617-002560

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SHC2380D				
As at 15 Jun 2020/18:15:00				
Insurance Co: MS FIRST CAPITAL INSURANCE LIMITED				
1	Insurance Enquiry - SHC2380D			
	Enquiry Fee	7.00	0.49	7.49
	20200617145252820381			
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
Paid By				
	426569XXXXXX2076	eNETS Credit Card		7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

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	16/06/2020 16:58
Date Of Accident	15/06/2020 18:15
Exact Location Of Accident	ALONG MANDALAY ROAD TOWARDS NO.51 MANDALAY ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJX2948H
Insured/Policyholder	
Name Of Registered Owner	KWEK KOK HUA
NRIC No	SXXXX180E
Email Address	OLIVER.KWEK@GMAIL.COM
Mobile Phone No	(LOCAL) +65-93360048
Alternative Phone No	OFFICE-93360048

Vehicle Particulars

Manufacturer	AUDI
Model	A4 1.8 TFSI MU
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	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT/00379812/03
Cover Note Number	

Driver

Name of Driver	KWEK KOK HUA
NRIC No	SXXXX180E
Date Of Birth	11/04/1966
Occupation	OUTDOOR
Date Of Driving Pass	02/06/1986
Driving Experience	34 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93360048
Fax Number	
Contact Number	OFFICE-93360048
Email Address	OLIVER.KWEK@GMAIL.COM

Address	NIL
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	COLLISION - HEAD TO REAR
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)	2
Passenger 1	NAME: : DAUGHTER GENDER: : FEMALE

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 SKETCH PLAN

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	SHC2380D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

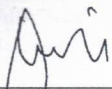
SKETCH PLAN

IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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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.**
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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:

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



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

Sketch Plan Pg. 2

SKETCH PLAN



- A - my car, RJK2148H
- B - other party's car (Taxi) SHC2380D
- C - parked big truck
- D - parked car on double yellow lines.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 15/6/2020, at about 6.15pm, I was driving along Mandalay Rd and was turning into 51 Mandalay Rd. As I was about to turn in, I noticed that there was a truck exiting the compound. Therefore, I slowly came to a stop right before the edge of the turn. However, when my vehicle was stationary, a taxi (SHC2380D) collided onto the rear of my vehicle. After which we both alighted and exchanged particulars.

As C was reversing to parallel park, both A & B waited. Therefore, after C parallel parked, A drove off and the speed was slow as it was from stationary. B followed too closely behind and when A stopped to let a truck exit from the GATE of 51 Mandalay Rd, B slammed into the rear of car B.

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.:

GIARDAC Sketch Plan Form V5

RESTRICTED

Annex D

NOTICE OF REPORTING

1 This is to confirm that Kwek Kok Hua, NRIC: S1780180E, add: 51 Mandalay Road #12-03 Singapore 308231, HP: 93360048 had reported to the Police a non-injury traffic accident which occurred on 15/6/2020 along Mandalay Road, outside Monarchy Apartment at about 1815hrs.

- a) Complainant's Vehicle:
Vehicle No: SJX2948H (Audi, black [lava grey])
- b) Other Party Involved:
Vehicle No: SHC2380D
Name: Chia Chor Seng
NRIC: S6905196J
HP: unknown

On 15/6/2020 at about 1815hrs, Kwek Kok Hua was driving his vehicle SJX2948H together with his daughter at the front passenger seat along Mandalay Road and was turning into No. 51 Mandalay Road, as he was about to turn in, Kwek Kok Hua noticed that there was a truck exiting the compound. Therefore, Kwek Kok Hua slowly came to a stop right before the edge of the turn. However, when Kwek Kok Hua vehicle was stationary, a taxi (SHC2380D) collided onto the rear of Kwek Kok Hua vehicle. Afterwhich, both alighted and exchanged particulars. All parties were not injured and no Police or ambulance was called in.

2 If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: Sgt (2) Janson Chew Moulmein NPP
Date: 15/06/2020 Time: 1900hrs Blk 101 Jalan Rajah
Police Post/Unit: Moulmein NPP #01-01
Singapore 321101
Tel: 1800-6250 8999

oliver.kwek@gmail.com

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