

## 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	01/07/2020 16:55
Date Of Accident	30/06/2020 15:10
Exact Location Of Accident	SIMEI AVE SLIP ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDX68G
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHUA CHENG CHOO
Passport No/FIN	SXXXX836G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93838061
Alternative Phone No	OFFICE-93878680

### Vehicle Particulars

Manufacturer	JAGUAR
Model	XJ 3.0
Exact Purpose for which vehicle was being used at time of accident	PTE USE
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN1936211900
Cover Note Number	

### Driver

Name of Driver	TAN CHOON SWEE
Passport No/FIN	SXXXX600D
Date Of Birth	25/02/1959
Occupation	INDOOR
Date Of Driving Pass	23/04/1977
Driving Experience	43 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93878680
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	560 YISHUN AVE 6 #13-23
Postcode	768966
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 - 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?	
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 THE MENTIONED DATE AND TIME, WHEN GBK61S BRAKE SUDDENLY, I WAS UNABLE TO STOP IN TIME THUS MY VEHICLE SDX68G HAD BANG ONTO ITS REAR PORTION.

#### 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	GBK61S
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)	

## Sketch Plan

### SKETCH PLAN


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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:

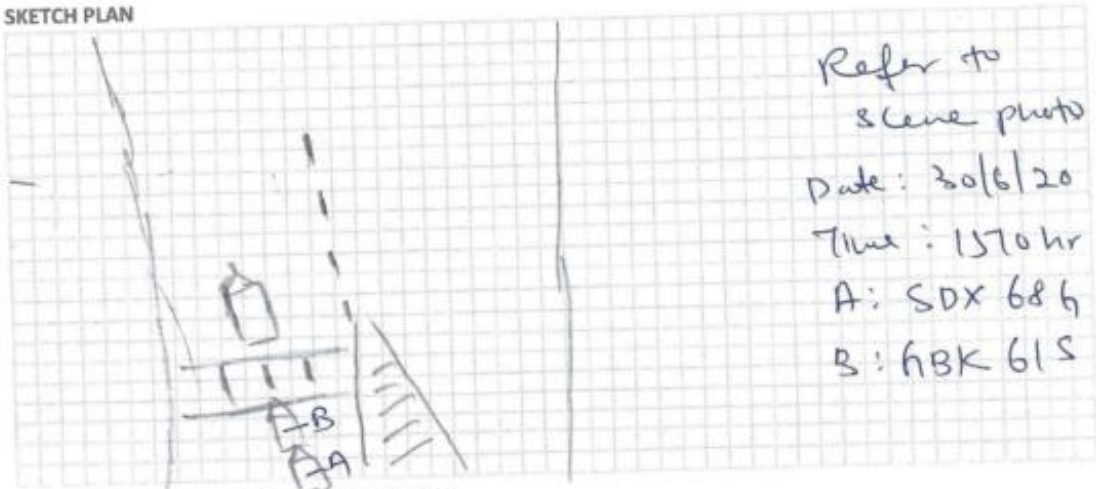
  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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



## Sketch Plan #2

### SKETCH PLAN



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the mentioned date and time  
When GBK 615 braked suddenly I was  
unable to stop in time thus my vehicle  
SDX 686 had bang onto it's rear.

### 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.:



Guidelines Sketch Plan Form\_V0



# 中国太平保险(新加坡)有限公司 CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

3 Atrium Road #15-05 Springvale Tower Singapore 379929  
Tel: 6359 4111 Fax: 6359 1093  
Website: www.ctaiping.com  
Co. Reg No. 72228364E

ORIGINAL

THE SCHEDULE

Policy AN0596A Class of Policy MOTOR PRIVATE CAR Policy Number ..... SMPCHW1936211900  
Account AN0596A Issued on ..... 17/09/2019 in SINGAPORE  
Agent 6002627 Acceptance Date 16/09/2019

Period of insurance from 1535 hours on 16/09/2019 to 2400 hours on 15/09/2020

Insured's Name .... CHUA CHENG CHOO  
Address .....  
BLK 560 YISHUN AVENUE 6  
#13-23  
SINGAPORE 768966

Business/Occupation... DIRECTOR

Sum .....	Base Annual Premium .....	\$82,916.90	
	Less 15% Loyalty Discount .....	\$8437.54-	
	Less 20% Autosafe Scheme .....	\$8495.87-	
	No Claim Discount .....	50.00%	
	Incentive Discount 10% .....	\$8991.75-	
	Total Annual Premium .....	\$899.17-	
		\$8892.57	Premium Due \$8892.57
			Premium GST \$862.48
			Total Due \$8955.05

No. 001 MOTOR PRIVATE CAR  
ORIGINAL REGISTRATION DATE: 19/5/2014  
Registration SDX68G Make/Model .. JAGUAR XJ 2.0TSS SWB SR  
Type of Cover Comprehensive No. of seats 5 Body Type ..... SALOON  
Engine No. ... 261113165816204PT Capacity cc's 1999 Yr of Manuf/Regn 2013/2014  
Chassis No. ... SAJAC12M2KPV65898

Sum Insured..Market value at the time of loss Certificate Ref. MX1x  
Named Drivers Ex Sect. I ..... \$8750.00  
Additional Ex Other than Named Drivers:  
Ex Sect. I - Age <= 25 ..... \$83,000.00  
Ex Sect. I - Age >= 26 ..... \$8500.00  
\* Age as at date of accident  
EX ON WINDSCREEN ..... \$8100.00  
Named Drivers THE INSURED TAN CHOO SWE

Following clauses and endorsements apply to this policy  
Subject to Endts. 2, 25, 57, 72, N & W(unltd).

## AUTOSAFE SCHEME (W)

In consideration of a premium discount given, the insured, in the event of any accident/windscreen damage, must send his/their vehicle to the Company's authorised workshop for repairs if he/she/they wish to seek indemnity under Section I of this Policy.

Subject otherwise to the terms, conditions and exceptions of this policy.

One Time Waiver of Excess Clause - Own Damage Claim (Insured and Named Drivers only)  
Notwithstanding anything contained to the contrary, we will waive up to the first \$81,000.00 (for Insured and Named Drivers only) under the Excess for the first claim lodged under this Policy year in respect of damage to the motorcar covered under this Policy for repairs carried out by our

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Identification Card

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. [REDACTED]



 Name  
TAN CHOON SWEE

 Race  
CHINESE

Date of birth  
25-02-1959

Sex  
M

Country/Place of birth  
SINGAPORE



Identification Card



Driving License

**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**

Licence Number: [REDACTED]  
Name: **TAN CHOON SWEE**

Birth Date: **25 Feb 1959**  
Issue Date: **09 Apr 2003**



 000362567G

Driving License



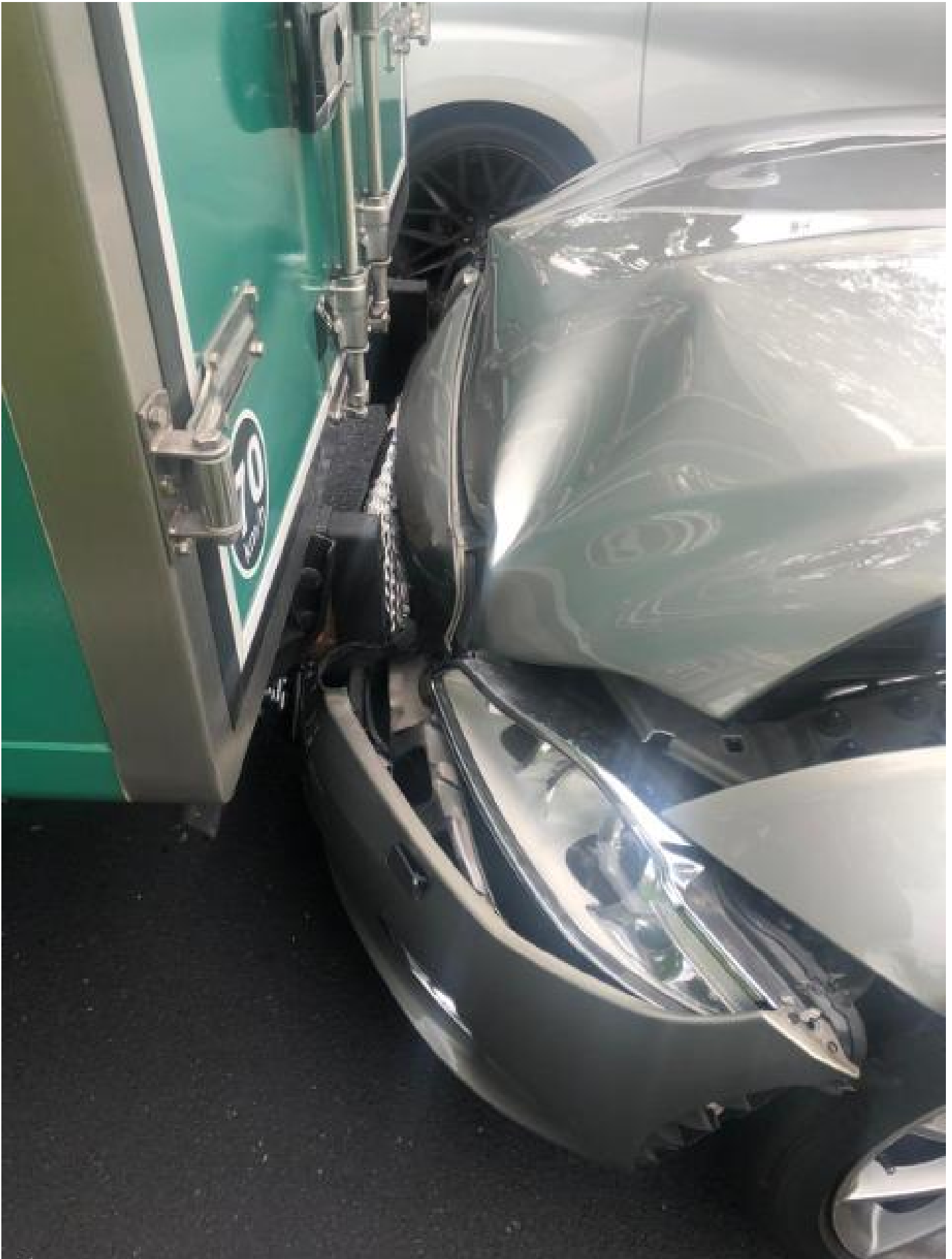
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