

## 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	16/07/2020 15:57
Date Of Accident	14/07/2020 18:20
Exact Location Of Accident	ALONG 45 SYED ALWI ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMD63T
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#### Insured/Policyholder

Name Of Registered Owner	ENCHANTED ACRES FARM (SINGAPORE) PTE. LTD
Co Reg No	201535119D
Email Address	FREDE@GAMEPARK.BIZ
Mobile Phone No	(LOCAL) +65-96249908
Alternative Phone No	OFFICE-96249908

#### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	S63 L AMG AUTO
Exact Purpose for which vehicle was being used at time of accident	PERSONAL
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
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	DMPCSNA00002781900
Cover Note Number	

#### Driver

Name of Driver	FREDERICK TAN BINGCONG
NRIC No	S1542038C
Date Of Birth	20/06/1962
Occupation	OUTDOOR
Date Of Driving Pass	24/02/1982
Driving Experience	38 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96249908
Fax Number	
Contact Number	
EEmail Address	FREDE@GAMEPARK.BIZ

Address	12 KITCHENER LINK #27-25
Postcode	207224
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	COLLIDED INTO PARKED VEHICLE
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)	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

I PARKED MY CAR SMD63T ALONG NO.43 SYED ALWI ROAD. I OPEN THE DRIVER DOOR SLIGHTLY TO CHECK FOR ON-COMING VEHICLES FROM REAR. SINCE TRAFFIC WAS CLEAR, I CONTINUE TO OPEN DRIVER DOOR MORE TO ALIGHT. OUT OF SUDDEN VEHICLE GBJ2534L DRIVER WAS DRIVING SO FAST WITHOUT NOTICING MY CAR DOOR WAS OPEN, COLLIDED. HE CAN HAVE AVOID THIS ACCIDENT. LUCKILY I WAS NOT INJURED.

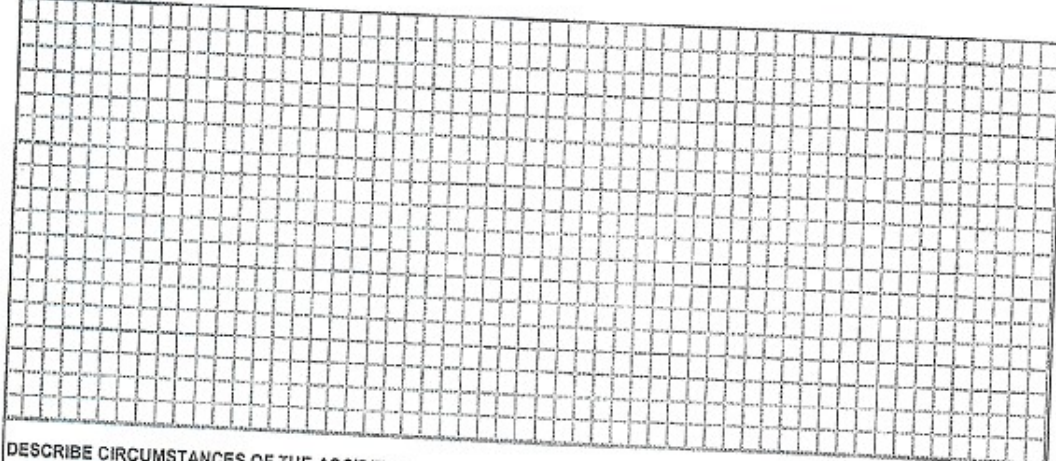
#### Attachment(s)

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	GBJ2534L
Vehicle Make/Model/Colour	NV200
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	NG AIK HUA
NRIC/Passport Number	S1681770H
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I PARKED MY CAR SMD 63T ALONG NO. 43 SYED ALWI ROAD.  
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CONTINUE TO OPEN DRIVER DOOR MORE TO ALIGHT.  
OUT OF SUDDEN VEHICLE GBJ 2534L DRIVER WAS  
DRIVING SO FAST WITHOUT NOTICING MY CAR DOOR  
WAS OPEN, COLLIDED, HE CAN HAVE AVOID THIS ACCIDENTS.  
LUCKY I WAS NOT INJURED

IMPORTANT NOTE

Under General Condition - Conduct of Claim of the Motor Policy, you have to decide within 21 days of occurrence or discovery of damage whether or not to claim under the policy. Please check your policy for more information.



Policyholder's Signature  
Date & Time



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



Reporting Centre Personnel's Signature  
Name: RAMESH  
NRIC / Fin No:

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




Licence Number: **S1542038C**  
Name: **FREDERICK TAN BINGCONG**

Birth Date: **20 Jun 1962**  
Issue Date: **17 May 2003**



000485715G

**REPUBLIC OF SINGAPORE**  
**IDENTITY CARD NO. S1542038C**





Name: **FREDERICK TAN BINGCONG**

**陳 秉 聰**

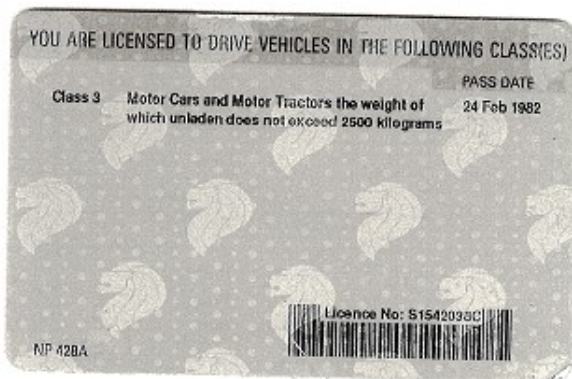
Race: **CHINESE**

Date of birth: **20-06-1962** Sex: **M**

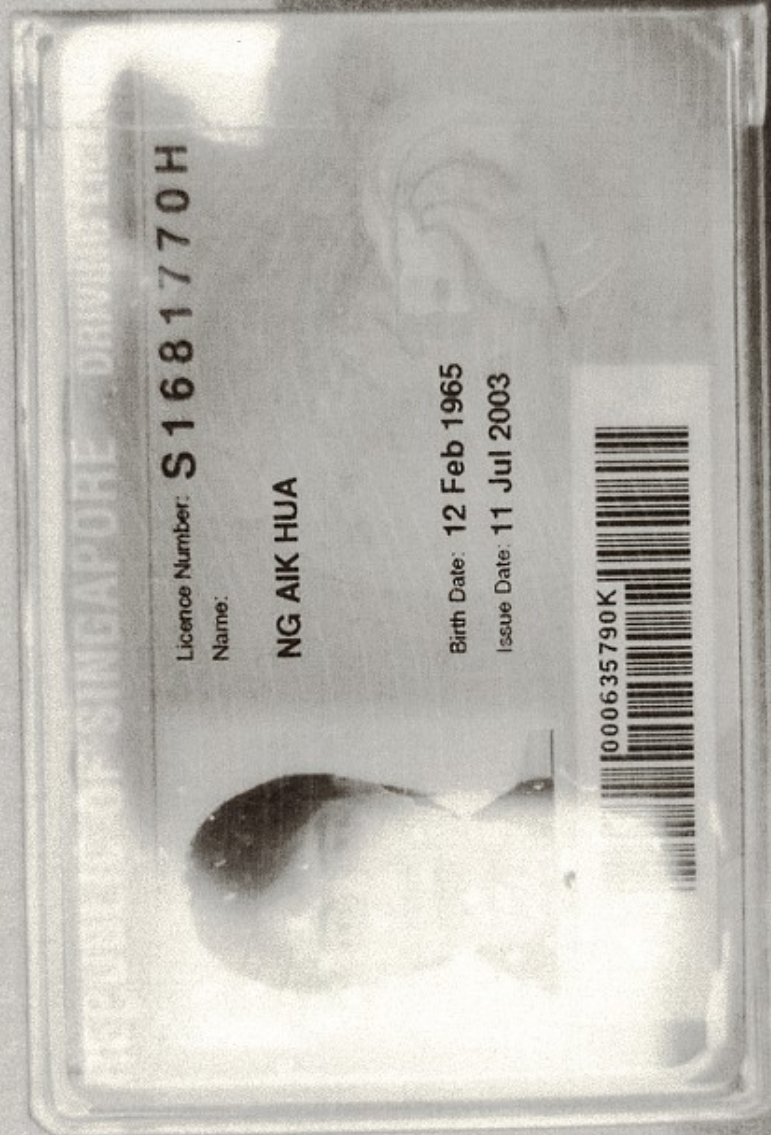
Country/Place of birth: **SINGAPORE**



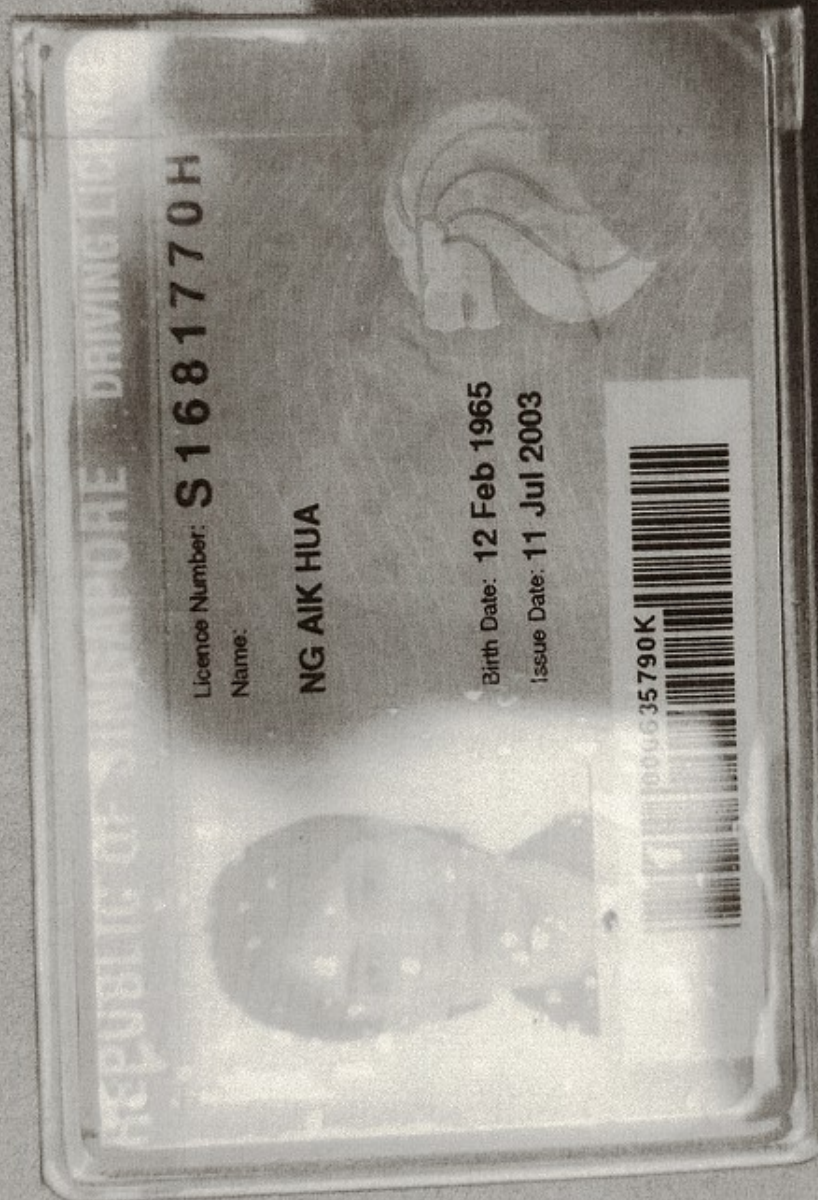
SMD63T Identification Card Pg. 1















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

Motor Private Car

MX1/B

N SN

AN0600A

Cov. Type: C

### 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)

CERTIFICATE No.

DMPCSNA00002781900

Engine No.: 17798060044166

Cha. No. WDD2221872A380714

1. Index Mark and Registration  
Number of Vehicle

SMD63T

2. Name of Policy Holder

ENCHANTED ACRES FARM (SINGAPORE) PTE LTD

3. Effective date of the Commencement of  
Insurance for the purposes of the Regulations,  
Ordinance or Enactment

20/12/2019

Named Drivers Ex Sect. I

S\$7,500.00

Excess Sect. I (Outside Singapore)

S\$15,000.00

Additional Ex Other than Named Drivers:

4. Date of Expiry of Insurance

19/12/2020

\* Age as at date of accident

EX ON WINDSCREEN

S\$1,000.00

5. Persons or Classes of Persons entitled to drive\*

As per Named Driver(s) stated below.

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.

FREDERICK TAN BINGCONG

LONG YEOP SENG

6. 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 racing 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.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia), are not to be included under these headings.

**I/We hereby Certify** that the policy to which this Certificate relates is issued in accordance 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 see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By:

Gan Li Jia Jesca

Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)  
1 Anson Road #16-00 Springleaf Tower Singapore 079909

☎6389 6111

☎6222 1033

🌐www.sg.cntaiping.com



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: R. Am ESM  
NRIC/FIN No.:

Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo

