

## 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             | 26/08/2020 11:18 |
| Date Of Accident           | 25/08/2020 17:30 |
| Exact Location Of Accident | SENGKANG EASTWAY |
| Country/State of Loss      | SINGAPORE        |

### DETAILS OF OWN VEHICLE

|                             |  |
|-----------------------------|--|
| Vehicle Registration Number | SLD1735T   |
| <b>Insured/Policyholder</b> |  |
| Name Of Registered Owner    | TAN SIOW YING, VALENTINA (CHEN SHAOYING VALENTINA) |
| NRIC No                     | SXXXX212B  |
| Email Address               | VALENT23@YAHOO.COM.SG                              |
| Mobile Phone No             | (LOCAL) +65-83289423                               |
| Alternative Phone No        | OFFICE-83289423                                    |

### Vehicle Particulars

|  |                                    |
|--|------------------------------------|
| Manufacturer   | HONDA                              |
| Model  | JAZZ 1.5 VTIR CVT ABS D/AIRBAG 2WD |
| Exact Purpose for which vehicle was being used at time of accident           | PRIVATE USE                        |
| 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 HIRE                       |

### Insurance Company

|                           |   |
|---------------------------|---|
| Name of Insurance Company | CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. |
| Type Of Coverage          | COMPREHENSIVE                                 |
| Fleet Policy              | NO  |
| Policy Number             | DMHCSNW00003072000                            |
| Cover Note Number         |   |

### Driver

|                      |  |
|----------------------|--|
| Name of Driver       | TAN SIOW YING, VALENTINA (CHEN SHAOYING VALENTINA) |
| NRIC No              | SXXXX212B  |
| Date Of Birth        | 23/04/1979   |
| Occupation           | OUTDOOR  |
| Date Of Driving Pass | 21/07/2000   |
| Driving Experience   | 20 YEARS AND 1 MONTH                               |
| Gender               | FEMALE   |
| Mobile Number        | (LOCAL) +65-83289423                               |
| Fax Number           |  |
| Contact Number       | OFFICE-83289423                                    |
| Email Address        | VALENT23@YAHOO.COM.SG                              |

|   |                                 |
|---|---------------------------------|
| Address   | BLK 12 ST GEORGE'S ROAD #03-250 |
| Postcode  | 320012                          |
| 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?   | 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: : PASSENGER<br>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

Please refer to Sketch Plan

#### Attachment(s)

|   |                  |
|---|------------------|
| Are accident photos available for attachment? | YES              |
| Was there any video captured by Car Camera?   | YES              |
| Remarks/ Reasons:                             | VIDEO WITH AGENT |
| Was there any audio recorded?                 | NO               |

#### DETAILS OF OTHER VEHICLE PROPERTY 1

|                             |             |
|-----------------------------|-------------|
| Vehicle Registration Number | SKQ8041J    |
| 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)

**DETAILS OF INJURED PERSON 1**

|   |  |
|---|--|
| Name  | TAN SIOW YING, VALENTINA (CHEN SHAOYING VALENTINA) |
| Approximate Age                                     |  |
| Injuries Sustain                                    |  |
| Injured person in which vehicle?                    | SLD1735T   |
| Were seat belts worn?                               |  |
| Was this injured conveyed to hospital by ambulance? | NO   |
| Address   | BLK 12 ST GEORGE'S ROAD #03-250                    |
| Postcode  | 320012   |

**SKETCH PLAN**

**IMPORTANT NOTICE**

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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:

26 AUG 2020



Driver's Signature

(If driver is not the policyholder)

Date & Time:

26 AUG 2020



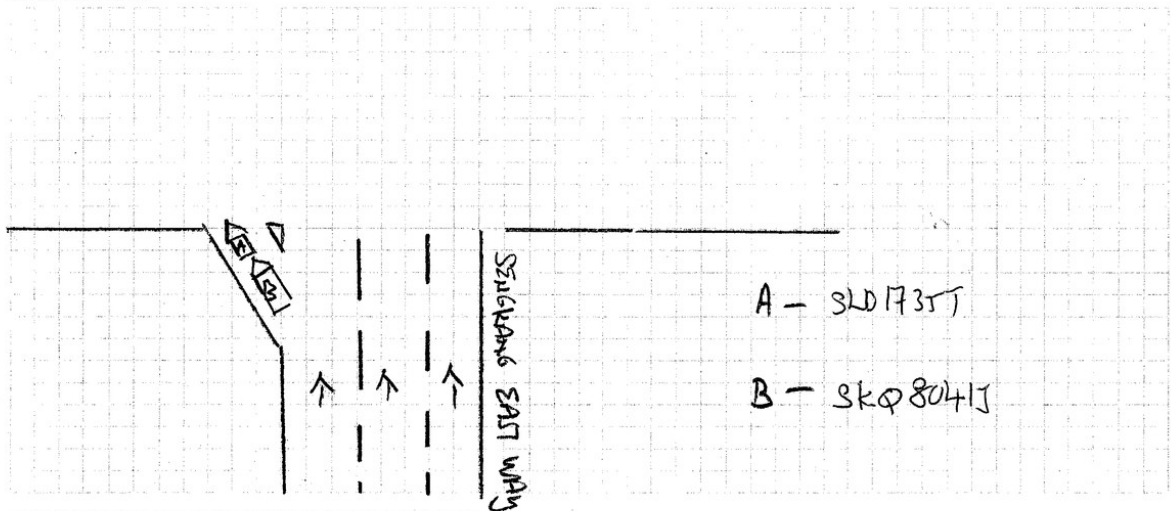
Reporting Centre Personnel's Signature

Name: Tracia Leong

NRIC/FIN No.: -

26 AUG 2020

### SKETCH PLAN



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

On 25/8/20 @ about 5.30pm. While slowing down to give way to the main road; suddenly I felt an impact from my rear. Vehicle B did not stop and hit onto me. I have video to support my statement.

Location : Sengkang East Way

## DECLARATION

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

Valentin.

---

Policyholder's Signature

Date &amp; Time:

26 AUG 2020

Valentine.

Driver's Signature

(If driver is not the policyholder)

Date & Time:

26 AUG 2020

hary

Reporting Centre Personnel's Signature

Name: **Tracia Leong**

NRIC/FIN No.: -

26 AUG 2020

Identification Card Pg. 1

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7912212B




Name  
TAN SIOW YING, VALENTINA  
(CHEN SHAOYING,  
VALENTINA)  
陈 小 英  
Race  
CHINESE  
Date of birth  
23-04-1979  
Country of birth  
SINGAPORE


Sex  
F

S7912212B

3402196



NRIC No. S7912212B



Date of issue  
06-09-2003

Address  
APT BLK 12 ST. GEORGE'S ROAD  
#03-250  
SINGAPORE 320012


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

Licence Number: **S7912212B**

Name:  
**TAN SIOW YING, VALENTINA**  
**(CHEN SHAOYING, VALENTINA)**

Birth Date: **23 Apr 1979**  
Issue Date: **09 Oct 2003**

**000907275E**



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


|   | PASS DATE   |
|---|-------------|
| Class 2B Motorcycles =< 200 CC  | 11 Feb 2010 |
| Class 3 Motor cars =< 3000 kg with =< 7 passengers, exclusive of the driver; and motor tractors/vehicles =< 2500 kg | 21 Jul 2000 |

S7912212B

S / No. 9000095676

NP 428A

Licence No: S7912212B





中国太平  
CHINA TAIPING

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

Motor Hire Car

MZ406L/B

N SN

AN0570A

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.   | DMHCSNW00003072000  | Engine No.: L15B31021100<br>Cha. No.:JHMGK5850GX202742  |
| 1. Index Mark and Registration Number of Vehicle  | SLD1735T  | AUTOSAFE<br>=====   |
| 2. Name of Policy Holder  | TAN SIOW YING, VALENTINA (CHEN SHAOYING, VALENTINA)   |   |
| 3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment  | 21/06/2020  | Excess Sect I . S\$1,250.00<br>Excess Sect. I (Outside Singapore) S\$2,500.00<br>Excess Sect. II S\$1,250.00<br>Excess Sect.II (Outside Singapore). S\$2,500.00<br>EX ON WINDSCREEN . S\$100.00 |
| 4. Date of Expiry of Insurance  | 05/06/2021  |   |
| 5. Persons or Classes of Persons entitled to drive*   | <p>As per Named Driver(s) stated below.<br/>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.</p> <p>TAN SIOW YING, VALENTINA</p>   |   |
| 6. Limitations as to use:*  | <p>(1) Use for the carriage of passengers or goods in connection with the Policyholder's business.<br/>(2) Use for social domestic pleasure purposes and business purposes of any person to whom the vehicle is hired.</p> <p>The Policy does not cover<br/>(1) Use for racing, pace-making, reliability trial or speed-testing.<br/>(2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.</p> |   |
| <p>HIRE PURCHASE CO. : HONG LEONG FINANCE LTD AS HP OWNER<br/>* 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.</p> |   |   |

**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: M PRO CONSULTANCY  
Authorised Officer

Authorised Signatory

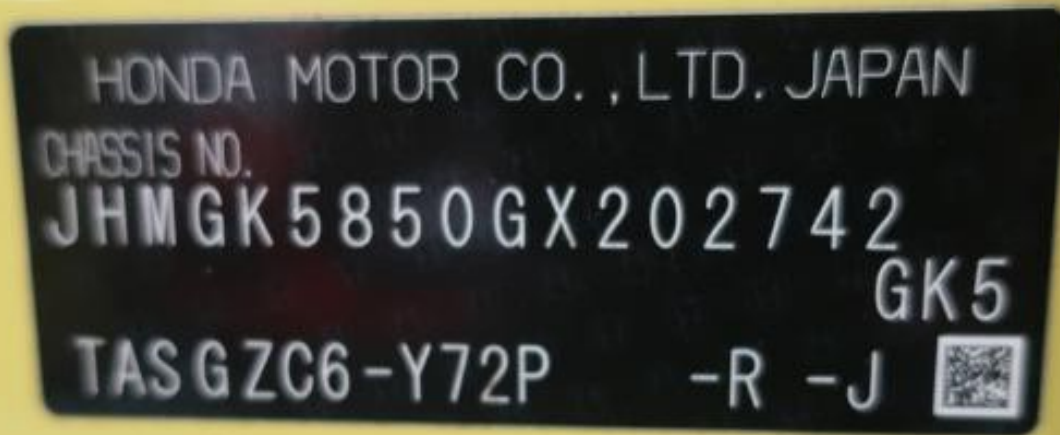
China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)  
3 Anson Road #16-00 Springleaf Tower Singapore 079909

☎ 6389 6111

☎ 6222 1033

🌐 www.sg.cntaiping.com

Chassis Number



Accident Photo



Accident Photo



Accident Photo



Accident Photo

