

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	07/09/2020 09:37
Date Of Accident	05/09/2020 11:55
Exact Location Of Accident	17 PETIR RD TWDS JELEBU RD SLIP RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMS1194M
Insured/Policyholder	
Name Of Registered Owner	SADON BIN HASSAN
NRIC No	SXXXX902E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-82934640
Alternative Phone No	OFFICE-82934640

Vehicle Particulars

Manufacturer	KIA
Model	CERATO FORTE KOUP 1.6 AT SX ABS D/AB SR
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 CAR

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSNW00022592000
Cover Note Number	

Driver

Name of Driver	MUHAMMAD HELMI BIN SADON
NRIC No	SXXXX035Z
Date Of Birth	02/05/1993
Occupation	OUTDOOR
Date Of Driving Pass	04/06/2018
Driving Experience	2 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82547083
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 268 BUKIT BATOK EAST AVE 4 #07-252
Postcode	650268
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
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?	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

REFER TO STATEMENT.

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	SMB3600J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	BUS
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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:

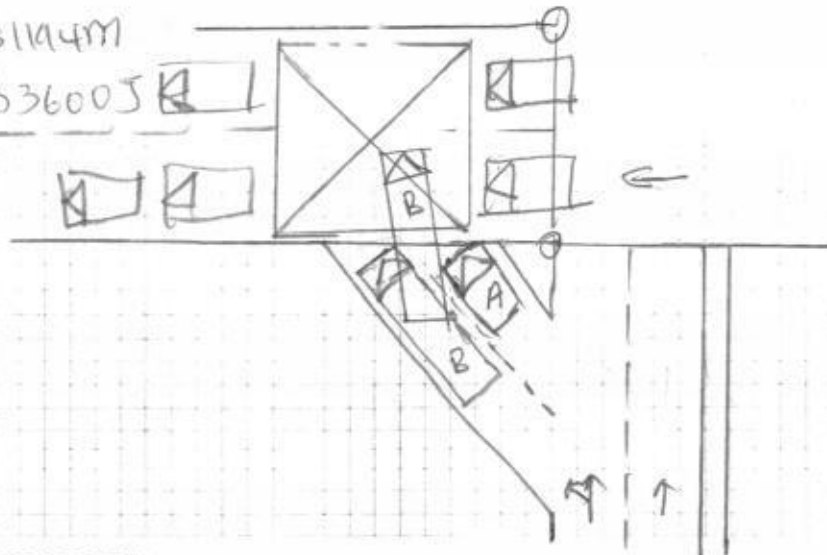
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

SKETCH PLAN

Vehicle A: Smb1194M

B: Smb3600J



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 5/9/2020 at about 11:54am, my vehicle A and B were stationary along 17 Petir Road towards Jelebu Road at the slip road waiting for the traffic from Jelebu Road to clear. When the traffic was cleared, vehicle B (Smb3600J) from my left proceeded to the main road. While moving, vehicle B suddenly cut into my lane and grazed thru my vehicle A (Smb1194M) which was still in the stationary position.

DECLARATION

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

Policyholder's Signature

Date & Time:

GIARMC SketchPlanForm_V3

Driver's Signature

(If driver is not the policyholder)

Date & Time: 05/09/2020

11:54pm

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



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 Private Car

MX1/NDF

N SN

AN0006A

Cov. Type: C

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 169)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.

DMPCSNW0022592000

Engine No. G4FCAH300804

Chs. No. KNAFW611LB6372368

1. Index Mark and Registration
Number of Vehicle

SMS1194M

AUTOSAFE

2. Name of Policy Holder

SADON BIN HASSAN

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

25/02/2020
(12:37:15)

Named Drivers Ex Sect. I \$S1,000.00
Additional Ex Other than Named Drivers:

4. Date of Expiry of Insurance

27/02/2021

Ex Sect. I - Age <= 25 \$S3,000.00

Ex Sect. I - Age >= 25 \$S500.00

* Age as at date of accident

EX ON WINDSCREEN \$S100.00

5. Persons or Classes of Persons entitled to drive*

Any person who is driving on the Policyholder's order or with his permission.
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.

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.
Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled.
One time Waiver of Excess for the first \$S500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our
Authorised Workshops for each Policy Year.

HIRE PURCHASE CO. GOLDBELL FINANCIAL SERVICES PTE. LTD. AS HP

* Limitations rendered inoperative by Section 6 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 169)
and Section 35 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 169) and Part IV of the Road
Transport Act, 1987 (Malaysia).

Please see reverse

Issued By

ALFA CREDIT PTE LTD
Authorised Officer



For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

杨亚美
Authorised Signatory

From : Premium Carz Services Pte Ltd
Tel : 6636 9100 Fax : 6636 9113

Email : aunteng@premiumcarz.com.sg

ACCIDENT STATEMENT

Date	5/9/2020
Time	11:54 AM
Location	17 Petir Road towards Jelebu Rd @ Skyway
VEHICLE (A)	SMS1194M
MODEL:	Kia Cerato Coup
Name of owner	Sadon Bin Hassan
NRIC no	51690902E
Date of birth	
Occupation	Indoor / Outdoor
Gender	Male / Female
Contact	HP: 82434640Tel: Fax:
Address	
Driving Passed date	
Email Address	
Type of claim	Own Damaged / Third Party / Reporting Only
Insurance Company	China
Type of Policy	Comprehensive / Third Party, Fire & Theft / Third Party Only
Policy number	
Name of driver	Muhammad Helmi Bin Sadon
NRIC no	59315035Z
Date of birth	2/5/1993
Occupation	Indoor / Outdoor
Gender	Male / Female
Contact	8254 7083
Address	Blk 268 Bt. Batok East Avenue 4, #07-252, S(650268)
Driving Passed date	4/6/2018
Email Address	mdrhmr@gmail.com
Relationship with the Insured	Owner / Children / Spouse / Employee / Others:
Does the driver own any other vehicle	No / if Yes : Vehicle no: Ins. Co:
Type of Collision	
Weather conditions / Road surface	Clear / Raining - Dry / Wet / Others:
Any Police Report lodged	No / Yes : Where?
Notice of Intended Prosecution Given?	No / Yes : Against who?
Anybody injured in the accident?	No / Yes : Who / Vehicle no?
Any other material or property damaged?	No / Yes
Any foreign vehicle involved?	No / Yes : Vehicle no:
Any video captured by car camera?	No / Yes
Number of passengers (including driver)	F: M:
Have you been approached by unknown person soliciting (s) / offering accident claims assistance?	YES NO
VEHICLE (B) - THIRD PARTY	SMB3600J
Name of driver	
NRIC / FIN no. / Passport number	
Contact	
Number of passengers (including driver)	
Exact Purpose Use	Private Car / Commercial / Hire & Reward
Insurance Company	
Details of Witness	Name : HP : Email :
Other Vehicles	(C) (D)
Number of passengers (including driver)	