#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Contact Number EMail Address

- 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	14/09/2020 13:49
Date Of Accident	13/09/2020 10:45
Exact Location Of Accident	PAYA LEBAR DROP OFF POINT
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLG2939A
Insured/Policyholder	
Name Of Registered Owner	LIN WEILIANG @ MASARAT LOUIS LIN
NRIC No	SXXXX079A
Email Address	LOUISRONG61@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97867666
Alternative Phone No	OTHERS-97867666
Vehicle Particulars	
Manufacturer	VOLKSWAGEN
Model	POLO-1.4 GTI (A)
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	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT/00437885
Cover Note Number	07/12/2019 - 06/12/2020
Driver	
Name of Driver	LIN WEILIANG @ MASARAT LOUIS LIN
NRIC No	SXXXX079A
Date Of Birth	20/07/1983
Occupation	INDOOR
Date Of Driving Pass	15/10/2003
Driving Experience	16 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97867666
Fax Number	

OTHERS-97867666

LOUISRONG61@GMAIL.COM

Address 118 EDGEFIELD PLAINS

#02-304

Postcode 820118

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

-

2

NO

**General Information of the Accident** 

Type Of Accident COLLISION - OPENING DOOR OF VEHICLE

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

Was any body injured in the Accident?

Was any injured conveyed to hospital by NO

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 4

Passenger 1 NAME: : SUCI

GENDER: : FEMALE

Passenger 2 NAME: : UNKNOWN PASSENGER

GENDER: : FEMALE

Passenger 3 NAME: : UNKNOWN PASSENGER

NO

GENDER: : FEMALE

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

**Circumstances of Accident** 

REFER TO THE SKETCH PLAN BY DRIVER

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 SHC1977P

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 Pg. 1

#### **SKETCH PLAN**

#### **IMPORTANT NOTICE**

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- 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. 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

1	
Date of accident: 13 0 My Vehicle A: 5434 SKETCH PLAN	12020 Time: 1045 Location: Pava Lebar drop off JLG 293 Wehicle B: JHC 1977 Vehicle C:
- Comment	) (B)
DESCRIBE CIRCUMSTANCES	DE THE ACCIDENT
and hit in mirror is de	er from Taxi open left back door hight morror and the portion in front the
Claim OD TP at Ah Lin	Motor Gain OD at other workshop Reporting Only
Remarks: Please forward a	copy of my efile accident report to:
My workshop : Email address :	
0	
Email address : Louiss	ong 6/ Egmail-com
Note: Please take note that	your insurer have 14 days timeframe for you to submit own damage claim under cwith your own insurer for more information.
DECLARATION	
/We declare the foregoing particu	ars are true in every respect.
Lat.	
Policyholder's Signature	Driver's Signature Reporting Centre Personnel's Signature
Date & Time:	Name:
EIARMC SketchPlanForm_v/3	NRIC/FIN No.: V  ARLIM MOTOR COMPANY



Contact us at

Hotline: (65) 6532 2888

F-mail: CustomerService@DirectAsia.com

#### CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act") Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore) Road Transport Act, 1987 (Malaysia)

Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

MT/00437885/02

Type of Coverage / Driver Plan Car Comprehensive (Value Plan)

1) Vehicle Registration No. SLG2939A

Chassis No. WVWZZZ6RZCY543780

2) Name of Policy Holder Lin, Weiliang

3) Effective Date / Time of Commencement

of Insurance for the Purpose of the Act 07/12/2019 00:00

4) Date/Time of Expiry of Insurance 06/12/2020 23:59

5) Persons or Classes of Persons Entitled to Drive

Any person who is named on the policy who is driving on the Policyholder's permission.

The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.

#### 6) Limitations as to use

Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business. Private car-pooling arrangements where you commute with passengers and split the fuel expense is covered under the standard policy. Grab Hitch will only be covered if this is the declared usage stated on your Policy Schedule. Only two rides are permitted a day. Other forms of commercial car-pooling or any ride hailing services (e.g. Grab, Go-Jek etc.) are not allowed.

\*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.

Sum Insured Market Value

**Own Damage Excess** S\$ 800.00 (before any applicable GST) Windscreen Excess S\$ 100.00 (before any applicable GST) Choice of workshop DirectAsia approved workshops

Finance company / Hire Purchase DBS BANK Main driver Lin, Weiliang Named driver None

08/11/2019

Important Note: This policy is on a named driver basis. The Policyholder has to be named as the Main Driver or Named Driver to be covered. Any unnamed drivers will not be covered.

I/We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the

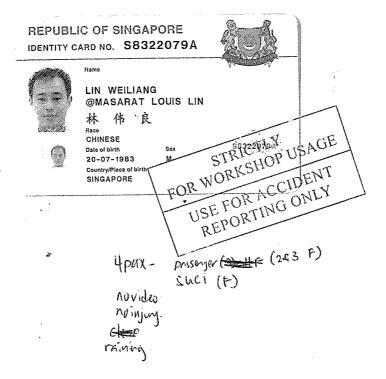
Motor Vehicles (Third-Party Risks and Com pensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia). Direct Asia Insurance (Singapore) Pte. Ltd.

Edip Okur (Chief Underwriting Officer)

Issued on:

Company Registration, 200822611G

### Identification Card Pg. 1



301 porty

97867666



#### Identification Card Pg. 2

9/14/2/020

E-Application of Qualified Driving Licence (QDL)





e-Services

FAQS | CONTACT US | E-FEEDBACK | SITEMAP

# E-APPLICATION OF QUALIFIED DRIVING LICENCE (QDL)

LOGOUT

#### STEP 1: APPLY QDL

STEP 2: DECLARATION

STEP 3: INPUT MAILING ADDRESS AND PARTICULARS

STEP 4: PAYMENT TERMS AND CONDITION

Dear LIN WEILIANG (NRIC: \$8322079A),

Welcome to the e-application of QDL page!

#### Your Licence and Test Information

Our records shows that you possess the following class of qualified driving licence (QDL) with expiry date, :

- i. Class 2
- ii. Class 2A
- iii. Class 2B
- iv. Class 3

You have passed Practical Test(s) for following class(es).

- Class 2 Practical Test at SSDC on 04 May 2004.
- Class 2A Practical Test at SSDC on 28 Jan 2003.
- Class 2B Practical Test at SSDC on 27 Dec 2001.
- Class 3 Practical Test at CDC on 15 Oct 2003.

Our records show that you have already made replacement of your Singapore Qualified Driving Licence 2 times. Subsequent replacement can only be done over the service counter at Traffic Police located at 10 Ubi Avenue 3.

You are not eligible for any QDL licence transaction.

Prerequisites for Singapore Qualified Driving Licence Application









