

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 Submission 15/10/2020 16:41 (SGT)
Date of Accident 14/10/2020 23:35 (SGT)
Exact Location of Accident ALONG BOON TAT ST & AMOY ST.
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJF6634G

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner BEH BOON HOCK
NRIC No S7217678B
Email Address NOEMAIL
Mobile Phone No (Phone) +65-94254183
Alternative Phone No (Phone) +94254183

VEHICLE PARTICULARS

Manufacturer Mitsubishi
Model LANCER 1.6 (A)
Variant -
Exact purpose for which vehicle was being used at time of accident -
Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only
Vehicle Category Private car

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMPCSNA00051852001
Cover Note Number -

DRIVER

Name of Driver KENNARD BEH WAI
NRIC No S9723172I
Date Of Birth 09/07/1997
Occupation Indoor

Date Of Driving Pass	24/01/2017
Driving experience	3 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Office) +65-92269092
Alt. Phone Number	-
Email Address	NOEMAIL
Address	APT BLK 680C JURONG WEST CENTRAL 1 #13-46
Address complement	-
Postcode	643680
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver 1	-
Insurance Company of Other Vehicle Owned by Driver 1	-
Vehicle Registration Number of Other Vehicle Owned by Driver 2	-
Insurance Company of Other Vehicle Owned by Driver 2	-
Vehicle Registration Number of Other Vehicle Owned by Driver 3	-
Insurance Company of Other Vehicle Owned by Driver 3	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Major/Minor Rd
Weather Conditions	Clear
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	No
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

ON 14/10/20 AT ABOUT 2335HRS I WAS TRAVELLING ALONG BOON TAT ST & AMOY ST. THE INCIDENT OCCURED ALONG A ONE-WAY T-JUNCTION. I WAS BEFORE THE STOP LINE OF THE MINOR ROAD (ON BOON TAT ST) AND SWITCHED ON MY RIGHT SIGNAL LIGHT TO INDICATE MY INTENTION OF MAKING A RIGHT TURN ONTO AMOY ST. ON MY LEFT HAND SIDE VIEW, THERE WERE 2 CARS SITUATED ON THE PARALLEL PARKING AREA ALONG AMOY STREET. AFTER CHECKING THE ROADS TO MAKE SURE THAT THERE WERE NO OTHER VEHICLE OR PEDESTRIANS IN SIGHT FROM BOTH DIRECTIONS, I THEN PROCEEDED TO MAKE A RIGHT TURN OUT SLOWLY ONTO AMOY ST. IN THE PROCESS OF ME MAKING THE TURN, THE SILVER CAB WAS APPARENTLY ACCELERATING STRAIGHT AHEAD OF AMOY ST. HOWEVER, SINCE THE OTHER PARTY DID NOT PROCEED TO SLOW DOWN, THE ACCIDENT OCCURED RESULTING IN A COLLISION BETWEEN THE LEFT SIDE OF MY CAR BUMPER WITH THE RIGHT SIDE DOOR OF THE SILVER CAB. SINCE HE DID NOT INTEND TO SLOW DOWN EVEN AFTER THE COLLISION, THE CAB CONTINUED TO PROPEL FORWARD. HENCE , THE ADDITIONAL IMPACT INDUCED A SLIGHT DAMAGE ON THE RIGHT SIDE OF THE CAB'S PASSENGER SEAT. NO PARTIES WERE PHYSICALLY INJURED.

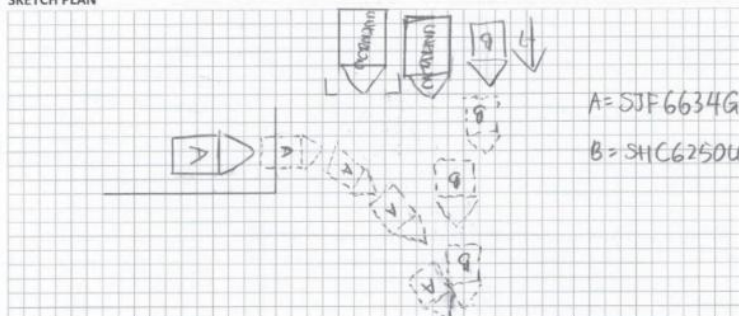
ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	-
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC6250U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 14/10/20 at about 2335HRS. I was travelling Along Boon Tat St & Amoy St. The incident occurred along a one-way T-junction. I was before the stop line of the minor road (on Boon Tat St) and switched on my right signal light to indicate my intention of making a right turn onto Amoy St. On my left hand side view, there were 2 cars situated on the parallel parking area along Amoy street.


After checking the roads to make sure that there were no other vehicle or pedestrians in sight from both directions, I then proceeded to make a right turn out slowly onto Amoy St. In the process of me making the turn, the silver cab was apparently accelerating straight ahead of Amoy St. However, since the other party did not proceed to slow down, the accident occurred resulting in a collision between the left side of my car bumper with the right side door of the silver cab. Since he did not intent to slow down even after the collision, the cab continued to propel forward.


Hence, the additional impact induced a slight damage on the right side of the cab's passenger seat. No parties were physically injured.

DECLARATION

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

Policyholder's Signature
Date & Time:

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


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

GDARMC SketchPlanForm_V3

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SKETCH PLANIMPORTANT NOTICE

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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.:

GIA RMC SketchPlanForm_V3

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

Motor Private Car

MX1F

E SN

AND411A

Cov. Type: C

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1980
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1989 (Malaysia)

CERTIFICATE No.	DMPCSNA00051852001	Engine No. - 4G1&JR8079	Cha. No. - JMYSTCS3A8U008404
1. Index Mark and Registration Number of Vehicle	SJF9634G	AUTOSAFE	*****
2. Name of Policy Holder	BEH BOON HOCK		
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	06/06/2020	Named Drivers Ex Sect. I	\$5500.00
4. Date of Expiry of Insurance	05/06/2021	Additional Ex Other than Named Drivers:	
		Ex Sect. I - Age <= 25	\$53,000.00
		Ex Sect. I - Age >= 26	\$5500.00
		* Age as at date of accident	
		EX ON WINDSCREEN	\$5100.00
<p>5. Persons or Classes of Persons entitled to drive*</p> <p>(a) The Policyholder.</p> <p>(b) Any other person who is driving on the Policyholder's order or with his permission.</p> <p>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>6. Limitations as to use*</p> <p>Use for social, domestic and pleasure purposes and for the Policyholder's business.</p> <p>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.</p> <p>Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled.</p> <p>One time Waiver of Excess for the first \$5500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.</p>			
<p>HIRE PURCHASE CO. : GOLDBELL FINANCIAL SERVICES PTE. LTD. AS HPOWNER</p> <p>* 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: Ho Li Hwa Irene
Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208364E)
3 Anson Road #16-00 Springleaf Tower Singapore 079909

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☎ 6222 1033

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