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 <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.

	ACCIDENT STATEMENT	
Date Of Report	26/10/2020 16:26	
Date Of Accident	24/10/2020 11:00	
Exact Location Of Accident	MINISTRY OF FOREIGN AFFAIR COMPOUND	
Country/State of Loss	SINGAPORE	
DETAILS OF OWN VEHICLE		

DETAILS OF OWN VEHICLE			
Vehicle Registration Number	QX84E		
Insured/Policyholder			
Name Of Registered Owner	MINISTRY OF FOREIGN AFFAIR		
Co Reg No	S87SS0140H		
Email Address	MUHAMAD_FAHMI_CHUPARI@MFA.GOV.SG		
Mobile Phone No			
Alternative Phone No	OFFICE-63797816		
Vehicle Particulars			

venicle Particulars	
Manufacturer	HONDA

Model ODYSSEY-2.3 (A)

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?

YES

If No, Please state action to be taken

Vehicle Category GOVERNMENT

Insurance Company

Name of Insurance Company MS FIRST CAPITAL INSURANCE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy YES

Policy Number D-20096275MVQC

Cover Note Number

Driver

Name of Driver WONG YEE CHIAT

NRIC No S1468379H
Date Of Birth 07/03/1951
Occupation OUTDOOR
Date Of Driving Pass 05/03/1979

Driving Experience 41 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98317260

Fax Number

Contact Number

EMail Address NOEMAIL

BLK 82 COMMONWEALTH CLOSE #02-147 Address

Postcode

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 FIRE, EXPLOSION OR LIGHTNING

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

NO

1

Was any other material or property damaged? NO

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 1

Details of Police Action

YES Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name TANGLIN POLICE DIVISIONAL HQ ('E' DIVISION)

NO

ROAD: 21 KAMPONG JAVA ROAD, POSTCODE: 228892, COUNTRY: Police Station Address

SINGAPORE

Police Station Contact TEL NO: 1800-3910000 - FAX NO: 63964900

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT.

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

YES

NO NO

Page 2 of 18

Sketch Plan Pg. 1



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- 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)

Lunderstand, 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:
 - 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' Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name: Lim Plan

NRIC/FIN No.:

No.: 7960

Sketch Plan #2 Pg. 1

SKETCH PLAN MFA Balding DESCRIBE CIRCUMSTANCES OF THE ACCIDENT Police DECLARATION I/We declare the foregoing particulars are true in every respect. Driver's bighature

(If driver is not the policyholder)

Policyholder's Signature

Date & Time:

Reporting Centre Personnel's Signature

Name:

Sketch Plan #3 Pg. 1





1 of 2

POLICE REPORT (NP299)

Police Station Of Origin Tanglin Division HQ 21 Kampong Java Road SINGAPORE 228892

Tel No:1800-3910000

Report No. E/20201024/7013

Date/Time Report Made	Vide Re	port No.		Station Diary No.
24/10/2020 16:26				
Name Of Informant	Address			
WONG YEE CHIAT	82 COM	MONWEAL	TH CLOSE #02-1	47 SINGAPORE
	140082			
ID Type / ID No.	Contact	No.		
NRIC NO / S1468379H	Home/O	ffice:	Mobile:	
			98317260	,
Nationality	Email Address			
SINGAPORE CITIZEN	wongye	wongyeechiat@gmail.com		
Occupation	Sex	Age	Date of Birth	Race
Security Officer	Male	69	07/03/1951	Chinese
Institution/School Name	Languag	je		
	English			
Date/Time Of Incident	Location	Location Of Incident		
24/10/2020 11:00 - 24/10/2020 12:05	1 SHER	WOOD RO	AD MINISTRY OF	FOREIGN
	AFFAIR	S (MFA) SII	NGAPORE 24816	3
Brief details.				

On 24 October 2020 at about 1100hrs, I was assigned by DSO Nirmal Singh to assist in the routine ration run to purchase lunch for on duty personnel in Ministry of Foreign Affairs (MFA). By 1120hrs, I had withdraw the vehicle key, cashcard and logbook in preparation for the journey ahead.

At 1130hrs, I had proceeded to QX84E for the routine First Parade Task check before commencing the journey. I set off to my destination to Red Hill Hawker Center at 1145hrs. While driving out of MFA

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by
	SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 24/10/2020 16:26
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	

Sketch Plan #4 Pg. 1





2 of 2

POLICE REPORT (NP299)

Authentication Stamp

CONTINUATION OF REPORT

Report No. E/20201024/7013

premises, I notice a burning smell coming out from the front bonnet of the vehicle.

I decided to take action by driving up to MFA lobby B. I quickly parked the vehicle and rushed out to seek assistance. Together with PO Edward, PO Muhd Zaki and DSO Nirmal Singh and return to the vehicle to assess the condition. When we returned, the fire had already build up significantly. We used the available fire extinguishers in attempt to extinguish the fire but had failed in our attempts.

At 1155hrs, SCDF fire fighters arrived to the scene to aid us in extinguishing the fire. The fire was successfully extinguished at 1205hrs. Myself and the rest of my colleagues PO Edward Chuan, PO Mudh Zaki and DSO Nirmal Singh was uninjured during the whole incident.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.			
Signature Of Interpreter: Not applicable	Date/Time: 24/10/2020 16:26			
Officer In-Charge Of Case:	Classification Of Case:			



MS First Capital Insurance Limited Co. Reg. No. 19500010GC GST Reg. No. MZ-0001676 9 6 Raffles Quay #21-00 Singapore 048580 Tel: (65) 6222 2311 Fax: (65) 6222 3547

Claims & Motor Underwriting Dept: 36 Robinson Road #16-01 City House Singapore 068877 Tel: (65) 6507 3848 Fax: (65) 6507 3849

www.msfirstcapital.com.sg

CERTIFICATE OF INSURANCE

ORIGINAL

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)

Type of Policy.

: COMPANY CAR - PRIVATE INSURANCE

Type of Cover.

: Comprehensive

Certificate No.

: D-20096275MVQC

Vehicle No / Chassis No

: QX84E / JHMRB18406C202168

Name of Insured

: MINISTRY OF FOREIGN AFFAIRS

Period Of Insurance

: 04.09.2020 To 03.09.2021

Insured Estimated Value

: Market Value At Time Of Loss

Excess:

SGD500.00 SECTION I AN EXCESS OF SGD3,000.00 ON SECTION I & II SEPARATELY IS IMPOSED ON THOSE DRIVERS WHO ARE BELOW 22 YEARS OLD AND/OR WHO HAVE LESS THAN 2 YEARS OF DRIVING EXPERIENCE

Authorised Driver

ANY AUTHORISED DRIVERS

Persons or classes of persons entitled to drive"

Any person who is driving on the Insured's order or with their 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

Limitations as to use

Use only for social, domestic and pleasure purposes and for the Insured's business.

The Policy does not cover use for hire or reward, 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,

¹ 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)

> MS First Capital Insurance Limited (Approved Insurers)

STELLAL/D0005/MX4A

Issued at Singapore on 26,08,2020

Authorised Signature





















