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SN0820CE0002 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 14/12/2020 11:41 (SGT)

SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (14/12/2020 11:41 (SGT))



# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Please report <u>correctly</u> the details of the accident to speed up the claims process.

 This Form must be completed by the Policyholder and/or the Authorised Driver
 Information provided must be as truthful and accurate 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. Any false reporting may be referred to the Police for Investigation.

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 Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss

14/12/2020 11:41 (SGT) 11/12/2020 21:37 (SGT) Holland Rd, Singapore BEFORE DEMPSEY ROAD Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number

**SDS112M** 

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No

Email Address Mobile Phone No

Alternative Phone No 1

Alternative Phone No 2

No

ALAN SOH CHIAN BEOW

SXXXX920E

soh.hwa.yang@gmail.com

(Phone) +65-96172718

+65-82289230

+65-96172718

VEHICLE PARTICULARS

Manufacturer

Model

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?

Vehicle Category

Lexus

Nx300

No - Reporting only

Private car

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage

Fleet Policy

Policy Number

Cover Note Number

MSIG

Comprehensive

A 29135887 AL2

DRIVER

Name of Driver

SOH HWA YANG

Occupation Indoor Date Of Driving Pass 04/09/2020 Driving experience 3 MONTHS Gender Male Mobile Number (Phone) +65-82827182 Alt. Phone Number Email Address soh.hwa.yang@gmall.com Address 102 GRANGE ROAD Address complement #14-03 Postcode 249592 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 Insurance Company of Other Vehicle Owned by Driver GENERAL INFORMATION OF THE ACCIDENT Type of Accident Side Swipe Weather Conditions Clear Road Surface Dry OTHER INFORMATION.

Was any foreign vehicle involved in the accident?

No
Number of vehicles involved in the accident

Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other material or property damaged?

Number of Passengers (Including Driver)

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

## PLEASE REFER TO SKETCH PLAN

## ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

No

## **DETAILS OF OTHER VEHICLE PROPERTY 1**

 Vehicle Registration Number
 SFQ6688R

 Vehicle Manufacturer

 Vehicle Model

 Vehicle Variant

 Vehicle Colour

 Vehicle Category
 Private car

 Name of Driver
 TAN LYE HUAT

 NRIC No
 SXXXX852C

 Contact Number
 (Phone) +65-96688525

Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	
No. Of Passenger (Including Driver)	0

#### SKETCH PLAN

### 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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.
- 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &	Driver's Signs	14/12/20	20 09:51	Witnessed by Reporting Centre
Time Sketch Plan	ALOWC	HOLLOWD BOA	TOME PLOODING THE PLOTE CONTROL OF	DAMPSEY ROAD
	BAR			A) SDS 112 M
1611/-				—B) SFQ 6688 R

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## ACCIDENT'STATEMENT

ACCIDENT DATE: 11. 1-12/ 2020 (DD/MM/	(YYY), TIME: (21:37)(HH:MM)-
LOCATION: Along Holland Rd , 300 m	
DETAILS OF VEHICLE  GIVEHICLE NUMBER: 505 112 M  BINSURANCE COMPANY: MS + 6	
d)POLICY NUMBER: A 29135887 A d)POLICY TYPE: (COMPREHENSIVE / THIRD e)MAKE & MODEL: LEXUE NX300	
f)TYPE:(SALOON / COUPE / MPV / VAN / LO g)VEHICLE CATEGORY: (PRIVATE / COMME h)PURPOSE OF USING AT ACCIDENT TIME:	RCIAL / MOTORCYCLE) . travelling to CULTAR @ Demploy Hill fo
I) ARE YOU CLAIMING UNDER YOUP OWN IS  IF NO, PLEASE STATE (THIRD PARTY CLAIM).  2. INSURED / POLICY HOLDER  A) NAME: ALRN SOH CHIANABEA	REPORTING ONLY)
DINRIC/FIN/PASSPORT: SIZE 0920 E CIADDRESS: 102 GRANGE R.D., UNI	CONTACT: 96/72719
Who of passenges, DRIVER  CONTINUE TO 3.d IF DRIVER ALSO POLICY  DRIVER  ONAME: SOH HWA YANG	HOLDER (MALE / FEMALE)
(1) diver) diver) diname: SOH HWA YANG  binRIC/FIN/PASSPORT: S9743556C  claddress: 102 GRANGE RD, UNIT #	CONTACT: \$218 9230
ODATE OF BIRTH: (15/11/1971)(DOCCUPATION: (INDOOR / OUTDOOR)  FIDATE OF DRIVING PASC 04/00	D/MM/YYYY) : .
4. WAS DRIVER AN EMPLOYEE OF THE INSU IF NO, RELATIONSHIP OF THE DRIVER W 5. d) WEATHER CONDITION: (CLEAR / RAINING	TH INSURED: SO
6. WAS ANYBODY INJURED (YES / NO) 7. a) REPORTED TO POUCE (YES / NO)	
IF YES, PLEASE STATE WHICH POUCE STATIC B. THIRD PARTY VEHICLE HO OF PASCENGER O) VEHICLE NUMBER: S FQ 66 88'R	MODEL: AUDI A3
Including driver) b) DRIVER'S NAME: TAN LYE HUAT  ( ) NRIC/FIN/PASSPORT: 57 41 6/152 C  9. THIRD PARTY VEHICLE	CONTACT: 966F 8525
Induding driver)   NRIC/FIN/PASSPORT:	MODEL:
(_)	
	· · · · · · · · · · · · · · · · · · ·

email = soh-hwa-yang @ gmail-com VIDBO YES



urance (Singapore) Pte. Ltd. i Way, # 21-01, SGX Centre 2, Singapore 058807 827 7888, Fax +65 6827 7800 lo. 200412212G GST Reg. No. 20-0412212G

## Certificate of Insurance

ROAD TRANSPORT ACT 1987 (MALAYSIA), ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE)

E MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

rm M.X.1 dividual Ownership

Lexus DriveElite 360 Comprehensive

3700002

irtificate No. A 29135887 AL2

Excess: SGD1,500

Windscreen Excess: SGD100

2020

Index Mark and Registration Number of Vehicle

SDS112M

Name of Policyholder

Soh Chian Beow

Effective Date of the Commencement of Insurance for the purposes of the Act

23/09/2020

Date of Expiry of Insurance

22/09/2021

Persons or Classes of Persons entitled to drive\*

Soh Chian Beow

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or 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.

#### Limitations as to use\*

Use only for social domestic and pleasure purposes and for the Policyholder'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.

- 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.
- l Claims related repair can be carried out at Borneo Motors (S) Pte Ltd or y workshop of your choice. Windscreen Excess is waived at Borneo Motors (S) r windscreen related claims. This Policy includes Courtesy Car benefit.

s Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the ritificate must be returned to the insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a itutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles ird-Party Risks and Compensation) Act (Cap. 189).

REBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles arty Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act

MSIG insurance (Singapore) Pte. Ltd. Approved Insurers

ney

for Chief Executive Officer