

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 22/01/2021 12:24 (SGT)
Date of Accident 16/01/2021 09:25 (SGT)
Exact Location of Accident Singapore
Additional Location Information NICOLL HIGHWAY TOWARDS SPORTING HUB
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number EN8288B

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TO CHI CHUNG
NRIC No SXXXX709H
Email Address dominic90668154@hotmail.com
Mobile Phone No (Phone) +65-90668154
Alternative Phone No +65-90668154

VEHICLE PARTICULARS

Manufacturer Nissan
Model Sunny
Variant -
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 - Claiming third party
Vehicle Category Private car

INSURANCE COMPANY

Name of Insurance Company Direct Asia
Type of Coverage ThirdParty
Fleet Policy No
Policy Number -
Cover Note Number -

DRIVER

Name of Driver TO CHI CHUNG
NRIC No SXXXX709H
Date Of Birth 24/02/1956
Occupation Indoor

| | |
|--|---------------------------------------|
| Date Of Driving Pass | 21/06/1997 |
| Driving experience | 23 YEARS AND 7 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-90668154 |
| Alt. Phone Number | +65-90668154 |
| Email Address | dominic90668154@hotmail.com |
| Address | 57 HAVELOCK ROAD #08-154 SPORE 161057 |
| Address complement | - |
| Postcode | - |
| Is the driver the policyholder? | Yes |
| If No, Relationship of the Driver with the Insured | - |
| 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 | Chain Collision |
| Weather Conditions | Clear |
| Road Surface | Dry |

OTHER INFORMATION

| | |
|---|-----|
| Was any foreign vehicle involved in the accident? | No |
| Number of vehicles involved in the accident | 3 |
| Was anybody injured in the Accident? | No |
| Was any injured conveyed to hospital by ambulance? | - |
| 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? | Yes |
| Police Station Name | Traffic Police |
| Police Station Phone No | (Phone) +65-65470000 |
| Alt. Police Station Phone No | (Fax) +65-65474900 |
| Police Station Address | 10 Ubi Avenue 3 Singapore 408865 |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN

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 | GW886G |
| Vehicle Manufacturer | - |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Goods vehicle |
| 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) | - |




DETAILS OF OTHER VEHICLE PROPERTY 2

| | |
|---|----------|
| Vehicle Registration Number | SHC4576T |
| 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) | - |

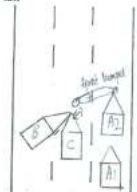
SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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4. The issue and acceptance of the 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 QA 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.
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 the accident shall be collectively referred to as the "Insurers"), the Insurers' law firm/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/paired packages); and/or
(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law firm/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 firm/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

| | | |
|---|---|---|
|  Policyholder's Signature / Date & Time |  Driver's Signature (If driver is not the policyholder) / Date & Time |  Witnessed by Reporting Centre Personnel |
|---|---|---|

Sketch Plan



A) EN 8288B
 B) GM 886G
 C) SHC 4576T

Describe Circumstances of the Accident

* Refer to the attached Police Report NO: T/20210113/2090.

Declaration

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

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel































SINGAPORE POLICE FORCE

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3
Report No: T202101182090

REPORT OF A TRAFFIC ACCIDENT


| | | |
|--|------------------|--------------------|
| Date/Time Report Made: 18/01/2021 14:48 | Vide Report No.: | Station Diary No.: |
|--|------------------|--------------------|

| | |
|---|--|
| Informant's Particulars | |
| Name of Informant: TO CHI CHUNG | Address: APT BLK 57 HAVELOCK ROAD #08-154 HAVELOCK VIEW SINGAPORE 161097 |
| ID Type / ID No.: NRIC NO / S2613709H | Contact No.: Home/Office: Mobile: 90666154 |
| Nationality: SINGAPORE CITIZEN | Email: |
| Sex: Male Age: 64 Date of Birth: 24/02/1956 | Type of Informant: Driver |
| Race: Chinese | Language: English Institution / School Name: |
| Occupation: Real estate agent | Driving Licence Information: Class: Date of Expiry: |

| | | | | |
|--|-------------------------------------|--|------------------------------------|--|
| General Information of the Accident | | | | |
| Type of Accident: Non-injury Others | Drink Drive: No | Date/Time of Accident: 18/01/2021 09:25 | Type of Location: Straight Road | |
| Location: NICOLL HIGHWAY | | | | |
| Weather: Clear | Road Surface: Dry | Road Speed Limit: | | |
| Traffic Flow: One Way | Traffic Control: Not Controlled | Traffic Volume: Moderate | | |
| Type of Collision: | Anyone conveyed by ambulance: No | | | |

| | | | | | | |
|------------------------------------|-------------|----------------|-----------------------|---------------|--------------------------------|----------------------|
| Details of Vehicle Involved | | | | | | |
| Vehicle No. EN8268B | Type Car | Make NISSAN | Model SUNNY 1.8EXM | Colour Red | Condition Seriously Damaged | No of Passenger 0 |

| | | | | |
|-------------------------------------|--|---------------------------------|-------------------------|---------------------------|
| Details of Vehicle Insurance | | | | |
| Vehicle No. EN8268B | Insurance Company DIRECT ASIA INSURANCE (SINGAPORE) PTE. LTD. | Insurance No. MT/00687412/01 | Effective 28/08/2019 | Expiry Date 27/03/2021 |

 **SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408665
Tel No: 65470000


Barcode: F302101182090
2 of 3
Report No: T202101182090

CONTINUATION OF REPORT

| Details of Person Involved | | | |
|-----------------------------------|--------------|--|-----------------------------------|
| Any Pedestrian Involved: No | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | |
| Driver: | | | |
| Name | TO CHI CHUNG | ID No. | 52613709H |
| Related Vehicle | NIL | Contact No. | 90668154 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |

Brief Details
ON STATED DATE TIME AND LOCATION

I WAS DRIVING ALONG NICOLL HIGHWAY TOWARDS SPORTING HUB BEARING PLATE NUMBER (ENS2988) ON LANE 1, WHILE ON LANE 2 WAS TAXI PLATE NUMBER (SHC4576T) AND ON LANE 3 A LORRY PLATE NUMBER (0W686G), SO THIS LORRY WAS ABOUT TO CHANGE LANE FROM LANE 3 TO LANE 2 BUT THE LORRY OUT OF A SUDDEN THE LORRY JUST SWERVED IN DANGEROUSLY EVEN WITH A SIGNAL LIGHT ON AND HIT ONTO TAXI, CAUSING WHOLE FRONT BUMPER FELL OFF, DUE TO THE IMPACT THE TAXI BUMPER FLEW OF ONTO MY LANE CAUSING A SCRATCHES ON MY LEFT HAND SIDE OF MY CAR BODY AND SIDE MIRROR, SO I DECIDED TO MAKE MY WAY TO TPQ TO LODGE POLICE REPORT ACCORDINGLY.

 **SINGAPORE
POLICE FORCE**




Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1-00210118/20983
3 of 3
Report No: 700210118/20983

CONTINUATION OF REPORT

Sketch Plan
Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

| | |
|---|---|
| Signature Of Officer Recording The Report: TP / SC MUHAMMAD SYAFIQ BIN ABDULLAH | Signature Of Informant:  |
| Signature Of Interpreter: Not applicable | Date/Time: 18/01/2021 14:46 |
| Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No: 65476151 | Classification Of Case:  SINGAPORE POLICE FORCE |
| Authentication Stamp xxxx | Signature:  |



Contact us at
Hotline: (65) 6512 2888
E-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.

| | |
|---|--|
| Certificate No. | MT/00687412/01 |
| Type of Coverage / Driver Plan | Car Third-Party Only (Value Plan) |
| 1) Vehicle Registration No. | ENR288B |
| Chassis No. | JN1CFAN1620103362 |
| 2) Name of Policy Holder | To Chi Chung |
| 3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act | 28/01/2020 00:00 |
| 4) Date/Time of Expiry of Insurance | 27/03/2021 23:59 |
| 5) Persons or Classes of Persons Entitled to Drive | <p>(A) Any person who is named on the policy who is driving on the Policyholder's permission.</p> <p>The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.</p> <p>6) Limitations as to use*</p> <p>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.</p> <p>*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.</p> |
| Sum Insured | Market Value |
| Own Damage Excess | S\$ 0.00 (before any applicable GST) |
| Windscreen Excess | Not Applicable (before any applicable GST) |
| Choice of workshop | DirectAsia approved workshops |
| Finance company / Hire Purchase | |
| Main driver | To Chi Chung |
| Named driver | None |
| 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 Compensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia).

Issued on: 21/02/2020

Direct Asia Insurance (Singapore) Pte. Ltd.

Gary W. Denson (Chief Executive Officer)

Direct Asia Insurance (Singapore) Pte Ltd
20 Anson Road #08-01 Twenty Anson Singapore 079912
www.DirectAsia.com

Company Registration No. 200827412C