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SN08211M0004 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 22/01/2021 15:09 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (22/01/2021 15:09 (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

3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate

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,
8. 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.

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

22/01/2021 15:09 (SGT)

21/01/2021 17:00 (SGT)

AYE, Singapore

BEFORE CLEMENTI ROAD EXIT

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SKQ2858J

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No

Email Address

Mobile Phone No

Alternative Phone No

No

JASON TAN TOO KIANG (CHEN TUQIANG)

SXXXX646Z

jasonttk@ymail.com

(Phone) +65-91397113

+65-91397113

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

Volkswagen

Touran

Private use

No - Reporting only

United Overseas Insurance

Private car

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage

Fleet Policy

Policy Number Cover Note Number DHOM120047981901

Comprehensive

DRIVER

Name of Driver

NRIC No

JASON TAN TOO KIANG (CHEN TUQIANG)

SXXXX646Z

Date Of Driving Pass 15/11/1995 Driving experience 25 YEARS AND 2 MONTHS Gender Mobile Number (Phone) +65-91397113 Alt. Phone Number +65-91397113 Email Address jasonttk@ymail.com Address BLK 184 DEPOT ROAD Address complement #17-10 Postcode 109686 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 Raining
Road Surface Wet

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

I WAS DRIVING ALONG AYE NEAR CLEMENTI EXIT TOWARDS JURONG WHEN SUDDENLY THE CAR IN FRONT OF ME JAMMED BRAKE (SLJ2352B). I IMMEDIATELY STEPPED ON THE BRAKE AND MANAGE TO STOP MY CAR ON TIME AND DID NOT HIT THE CAR IN FRONT. I HAD ABOUT HALF A METRE SPACING. WITHIN A SPLIT SECOND, I SAW IN MY BACK VIEW A SILVER CAB COMING TOWARDS MY CAR AND I FELT A CRASH ON MY BACK AND MY CAR SURGED FORWARDS AND HIT THE CAR IN FRONT. THE SILVER CAB (SHB8659S) WAS VERY FAST AND FAILED TO STOP IN TIME AND CRASH INTO MY BACK, THE IMPACT SENT MY CAR FORWARD AND BUMPED THE CAR IN FRONT OF MY CAR. ALL 3 DRIVERS CAME OUT AND ACKNOWLEDGED THAT THE SILVER CAB (SHB8659S) WAS THE PARTY AT FAULT FOR CRASHING INTO MY CAR, THEREFORE CAUSING MY CAR TO SUBSEQUENTLY HIT THE CAR IN FRONT OF ME (SLJ2352B). DRIVER OF (SLJ2352B) ALSO CONFIRM THAT MY CAR DID NOT HIT HERS UNTIL THE SILVER CAB CRASHED INTO ME AND SENT MY CAR FORWARD INTO HERS.

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

No
Was there any audio recorded?

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHB8659S
Vehicle Manufacturer Kia

Vehicle Colour	
Vehicle Category	Taxi
Name of Driver	DAUD BIN BAHAROM
NRIC No	SXXXX243G
Contact Number	(Phone) +65-83997974
Address	(11010) 105-05057574
Address complement	
Postcode	
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	570 -
No. Of Passenger (Including Driver)	•

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Manufacturer Vehicle Model Vehicle Variant	Mazda - -
Vohiele Verient	•
Vehicle Variant	
Vehicle Colour	
Vehicle Category	Private car
Name of Driver	LEE LAY KUAN
NRIC No	SXXXX772I
Contact Number	(Phone) +65-96633430
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.
- This Formmust 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>.
- 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.
- 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' 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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

1	22/1/21	51am	as is not the policyholder) / F	Note Witnessed	22 (81 2021 by Reporting Centre
Time Sketch I	er's Signature / Date &	& Time	er is not the policyholder) / D	Personnel	70 JURDIN
M	A)SKQ 3 B)SHB86	18587		÷	
N	c) std 2	3528			
-	DIE -	>	8 /	V C	

Describe Circumstances of the Accident
I was driving along AYE near clerents road exit towards Jurang when suddenly
the car infront of me jammed break (SLJ 2352B). I immediately stepped on the break and managed to stop my car in time and did not hit the car infront. I had
break and managed to stop my car in time and did not hit the car infront I had
about half a metre spacing. Within a split second, I saw in my back view mirror
about half a metre spacing. Within a split second, I saw in my back view Mirror a silver cab coming towards my car and I felt a surge crash on my back and my
car surged forward and hit the car infront. The tomport rilvorcas (SHB \$6595) was
very fast and failed to stop in time and crashed into my back, thereby the impact
Con surged forward and hit the car infront. The topoet silver cab (SHB \$6595) was very fast and failed to stop intime and crashed into my back, thereby the impact sent my car forward and bumped the car infront of my car.
the party at fault for crashing into my car, therefore causing my car to subsequently
hit the car infront of me (SLJ 23528). Driver of (SLJ 23528) also confirm that separe
the party at fault for crashing into my car, therefore causing my car to subsequently hit the car intent of me (SLJ 23528). Driver of (SLJ 23528) also confirm that before my car did not hit has witil the silvercab crashed into me and sent my car forward into here
into hers.

Declaration

Time

We declare the foregoing particulars are true in every respect.

PolicyNolder's Signature / Date &

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

Witnessed by Reporting Centre

Personnel

ACCIDENT'STATEMENT

100	ACCIDENT STATEMENT 17
ACCIDE	NY DATE: 21. 1 . 1 . 12821 (DD/MM/YYY), TIME: 1
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2	DETAILS OF VEHICLE SKE 2858 J DINSURANCE COMPANY: United Overses (Assume Limited DINSURANCE COMPANY: United Overses (Assume Limited DINSURANCE COMPANY: United Overses (Assume Limited DIPOLICY NUMBER: DH OM 12004 798 1901 DIPOLICY TYPE: (COMPREHENSIVE) THIRD PARTY / THIRD PARTY FIRE &THEFT) DIPOLICY TYPE: (COMPREHENSIVE) THIRD PARTY / THIRD PARTY FIRE &THEFT) DIPOLICY TYPE: (COMPREHENSIVE) THIRD PARTY / THIRD PARTY FIRE &THEFT) DIPOLICY TYPE: (COMPREHENSIVE) THIRD PARTY / THIRD PARTY FIRE &THEFT) DIPOLICY TYPE: (COMPREHENSIVE) TOURAN TOULOGO DIPOLICY TYPE: (COMPREHENSIVE) TOURAN TOULOGO DIPOLICY TYPE: (COMPREHENSIVE) TOURAN
\$ 60 B	CIADDRESS: 184 deportional HT
HNO of passanger	CONTINUE TO 3.d IF DRIVER ALSO POUCY HOLDER DRIVER (MALE / FEMALE) DINRIC/FIN/PASSPORT: CIADDRESS:
4.	*d)DATE OF BIRTH: (16 / 12 / 1976)(DD/MM/YYYY) e)OCCUPATION: (INDOOR) OUTDOOR) 1)DATE OF DRIVING PASS 15 MCURED'S COMPANY? (YES //NO)
5.	a) WEATHER CONDITION: (CLEAR (RAINING) OTHERS
7. 8. 4 Ho of passenger	DRIVER'S NAME: DAND BIN BAHAROM \$395.79.74
(2) 9. Who of passanger.	C) NRIC/FIN/PASSPORT: \$ 1482243 C CONTACT: 8317 71:17 THIRD PARTY VEHICLE DI VEHICLE NUMBER: SLJ 23528 MODEL: Mezda MPV Silver MODEL: Mezda MPV Silver
(Including driver)	e) DRIVERS WATER CONTACT: 7603 343

email = JASON TIK & YMAIL. COM VIDEO



United Overseas Insurance Limited

3 Anson Road #28-01 Springlesf Tower Singapore 079909

Tel (65) 6222 7733 Fax (65) 6327 3869 / 6327 3870 Email: ContactUs@upl.com.sg uol.com.sg

Ca. Reg. No. 197100152R.

Certificate of Insurance

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)

ORIGINAL

CERTIFICATE NO.

DH0M120047981901

Excess:

\$750/-NAMED DRIVERS - OPTION 2

\$1500/-OTHERS

COMPREHENSIVE

\$3000/-APPL TO <25 YRS & OR <3YRS EXP

\$100/-WINDSCREEN DAMAGE CLAIM

Type of Cover Vehicle Number

SK02858J

Name of Insured

JASON TAN TOO KIANG

Restricted Driver(s)

NOT APPLICABLE

Period of Insurance 18 November 2020 to 17 November 2021

Engine#

CAYAG0890

Chassis#

WVGZZZ1TZFW012474

PRIVATE CAR - INDIVIDUAL OWNERSHIP [MX 1] AUTHORISED DRIVER

(1) The Insured

(2) Any other person who is driving on the Insured's order or with his permission

(3) In the event of the death of the Insured

(a) any member of the Insured's family or a paid driver who has been driving the car during the lifetime of the Insured and permission to drive had not been withdrawn prior to the death of Insured and

(b) any other person who has been given permission to drive the vehicle prior to the death and such permission had not been withdrawn by the Insured

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 or racing pace-making reliability trial or speed-testing or the carriage of goods (other than samples) in connection with any trade or business or use for any purposes in connection with the Motor Trade

The carriage of passengers pursuant to car pooling arrangements and payments or any of them made by the passengers thereunder towards the running expenses of any vehicle described in the Schedule shall not be deemed to constitute use for hire or reward

Provided that the person 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

*Limitation 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).

UNITED OVERSEAS INSURANCE LTD

For the Company

Date: 19/10/2020 FSCPP