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SN08212A0004 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 10/02/2021 16:51 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (10/02/2021 16:51 (SGT))



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 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.
 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 10/02/2021 16:51 (SGT) Date of Accident 10/02/2021 08:20 (SGT) **Exact Location of Accident** Jln Toa Payoh, Singapore Additional Location Information TOWARDS PIE (TUAS) Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMK9773G

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner HONG CHAN CHUEN NRIC No SXXXX765I **Email Address** kongzq@hotmail.com Mobile Phone No (Phone) +65-97869761 Alternative Phone No. +65-97869761

VEHICLE PARTICULARS

Manufacturer Toyota Model Harrier 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 Private car

Private use

No - Claiming third party

INSURANCE COMPANY

Name of Insurance Company MSIG Type of Coverage Comprehensive Fleet Policy No Policy Number A 29143967 AT2 Cover Note Number

DRIVER

Name of Driver HONG CHAN CHUEN NRIC No SXXXX765I

Date Of Driving Pass Driving experience	23/03/1998 22 YEARS AND 11 MONTHS
Gender Mobile Number	Male
Mobile Number	(Phone) +65-97869761
Alt. Phone Number	+65-97869761
Email Address Address	kongzq@hotmail.com
	88 CORPORATION ROAD #06-17
Address complement	•
Postcode	649823
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	<u></u>
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 Assident	
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	2
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	Î
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?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No
DETAILS OF OTHER	R VEHICLE PROPERTY 1
Vehicle Registration Number	XE2054X
Vehicle Manufacturer	2.000 ga 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Vehicle Model	
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	
Contact Number	~
Address	₽
Address complement	₩
Dostroda	

Nature Of Damage	
Details of property damaged in accident	
No. Of Passenger (Including Driver)	

INJURED PERSONS DETAILS

INJURED 1

Name of injured person
Address
Address Complement
Post Code
Approximate Age Years Old
Injuries Sustained
Injured person in which vehicle?
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?

HONG CHAN CHUEN

BACK AND NECK PAIN SMK9773G Yes

No

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.
- 3. 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.
- 6. 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 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 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
- $(v) \ complying \ w \ ith \ applicable \ law \ \ in \ administering, \ processing, \ handling \ and/or \ dealing \ w \ ith \ my \ claims.$

(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 & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

 B XE 2054X

Describe Circumstances of the Accident
On 10.02.2021 at about 08:20hrs, I was travelling along
Julan Toa Payon Towards PIE (Twas). As I was heading straight,
all of a suddling we wide XE 2054X had swering oxforms Lane
and called onto my left adeportion. The 's all.

Declaration

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

Mitnessed by Reporting Centre Personnel

Date of Accident	: 10.02.2021 Accident Time: 08:20 No(24-HR-Format)
Accident Place	: Jalan Py Toward PIE (tuas)
Vehicle. No. (Car Plate No.)	SMK 97736 Make/Model: Papota Harrier Mozde
Insurace Company	: MS/6 Policy No: A 29/43967 AT2
Owner or Company Name /IC No.	: Hone Chan Chuen (569277651
Owner or Company Contact No.	: 97869761 Owner's Hp Company Tel
DRIVER'S Name / IC No.	: Same as above
DRIVER'S Date Of Birth	: 57.09.1969 DRIVER'S License Pass Date 23.03.1998
Relationship of Owner & Driver	: Spouse \ Parents \ Children \ Sibling \ Employee\ Others: WW
DRIVER'S Address	: 86 Compation Rd \$06-17 5(649823)
DRIVER'S Contact No./ Alt No.	:1)2)
DRIVER'S Occupation	: INDOOR \ OUTDOOR (e.g. working inside or outside office)
Email Address	: Kongza@hrtmail.com
Weather & Road Surface	CLEAR & DRY RAINING & WET \ AFTER RAIN & WET
Reporting Type	: Reporting Only Claim Other Party \ Claim Own Insurance
Number of Passengers (Including Dr	iver): Pare v on lo
Was there any video Captured by car Exact purpose for which vehicle was Any Injury (If YES, Pls state):	r camera YES NO being used at the time of accident Private use \ Work purpose
	arty Driver's Particular (if any)
Vehicle, No: XE 2054X	((Tokla) Vehicle. No:
Vehicle Make\Model:	Vehicle Make\Model:
Name Driver:	Name Driver:
IC No. Driver/Contact:	IC No. Driver/Contact:

* NEW - Passenger's name & gender:

Singapore) Pte. Ltd.

21-01, SGX Centre 2, Singapore 068807

32-0412212G 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 AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)

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

Form M.X.1 Individual Ownership Toycia DriveElite 360 Comprehensive

Certificate No. A 29143967 AT2

Excess: SGD700 Windscreen Excess: SGD100

- Index Mark and Registration Number of Vehicle SMK9773G
- Name of Policyholder Hong Chan Chuen
- 3. Effective Date of the Commencement of Insurance for the purposes of the Act 30/04/2020
- Date of Expiry of Insurance 29/04/2021
- 5. Persons or Classes of Persons entitled to drive*

Hong Chan Chuen Hong Yi Ning

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.
- 6. 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.

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

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

I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurers

for Chief Executive Officer

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	7651
Vehicle No.:	SMK9773G
Vehicle to be Exported:	No
Intended Deregistration Date:	28 Feb 2021
Vehicle Make:	TOYOTA
Vehicle Model:	HARRIER M GRADE
Primary Colour:	White
Manufacturing Year:	2019
Engine No.:	8ARZ158213
Chassis No.:	JTEZB3GH20J004488
Maximum Power Output:	170.0 kW (227 bhp)
Open Market Value:	\$30,806.00
Original Registration Date:	30 Apr 2019
First Registration Date:	30 Apr 2019
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$35,129.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	29 Apr 2029
PARF Rebate Amount: Intended COE Rebate Details	\$26,346.00
COE Expiry Date:	29 Apr 2029
COE Category:	E - Open - all except motorcycle
COE Period(Years):	10
QP Paid:	\$41,000.00
COEDI	£22.1//.00
COE Rebate Amount:	\$32,166.00

The information contained herein is correct as at 10 Feb 2021