# **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 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.

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   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 03/05/2021 18:06 (SGT) Date of Accident 02/05/2021 22:00 (SGT) Exact Location of Accident Bishan Street 14, Singapore Additional Location Information Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SMH4565P

#### INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner **BHCC Construction Pte Ltd** Company Reg No 200311975W Email Address Helen.han@bhcc.com.sq Mobile Phone No (Phone) +65-94365317 Alternative Phone No +65-94565317

#### VEHICLE PARTICULARS

Manufacturer Porsche Model Cayenne 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 - Reporting only Vehicle Category Private car Transmission Auto CC 2995

#### **INSURANCE COMPANY**

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number DMPCSNW00017862100 Cover Note Number

# DRIVER

Name of Driver Liu Hai NRIC No. S2695637D

Date Of Birth Occupation Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	09/01/1964 Indoor 04/06/2002 18 YEARS AND 11 MONTHS Male (Phone) +65-91071878 - sinhill88@yahoo.com.sg 6 Bishan Street 25 #36-12 - 573975 No Spouse No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Side Swipe Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?  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?  PASSENGER 1  Name Gender	No 2 No - Yes 2 No Helen Female
	remaie
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Was notice of intended Prosecution given?  If yes, against whom?	No No -
CIRCUMSTANCES OF ACCIDENT	
Please refer to sketch plan.	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera? Reasons for not uploading a video of the accident Was there any audio recorded?	Yes Yes The video is with the agent. No
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour	SMR8847Y BMW - -

Vehicle Category	Private car
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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- 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.
- 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 GA 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)

l 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' lawyers/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 malling of correspondence, statements, involces, 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 haurers' 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.

Santruction (C)	3m/g		AL	
Policyholder's Signature Date 85	Driver's Signature (If drive & Time	r is not the policyholder) / Date	Witnessed by Re Personnel	
Sketch Plan	1111	0 3 MAY 2021		Angle Soh
	BA			
	11/1/			

4.0

Describe Circumstances of the Accident
on 02/05/21 around ibio hrs. I was stopping
cit the Tunction between Rishan Road & Bishan
Sti4, when the traffic light start to turn green,
I move off Slowly, Suddenly Vehicle B which was
on My left lane, ewe swerre & Cut into My
Jane, His right Portlon Collided onto the
Left portion of My Car
Angie Solt

# Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &

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

0 3 MAY 2021

Witnessed by Reporting Centre Personnel

Angle Soh













## 中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Private Car

MX4F

AN0707B

Cov. Type:C

CERTIFICATE OF INSURANCE

Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) for Vehicles (Third-Party Risks and Compensation) Rules, 1960 Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Engine No.: 053423

Cha. No.:WP1ZZZ9YZKDA07011

1. Index Mark and Registration

CERTIFICATE No.

Number of Vehicle

SMH4565P

DMPGSNW00017862100

2. Name of Policy Holder BHCC CONSTRUCTION PTE LTD

Named Drivers Ex Sect. I

\$\$3,500.00

Effective date of the Commencement of Insurance for the purposes of the Regulations. (00:00:00)

24/01/2021

Additional Ex Other than Named Drivers:

Ex Sect. I - Age <= 25 Ex Sect. I - Age >= 26

\$\$3,000.00 \$\$500.00

\* Age as at date of accident

EX ON WINDSCREEN .

\$\$350.00

4. Date of Expiry of Insurance 23/01/2022

5. Persons or Classes of Persons entitled to drive\* Any person who is driving on the Policyholder'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 Vehicle.

Limitations as to use:\*

Use for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or reward tuition driving test 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. Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled. One time Waiver of Excess for the first \$\$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD.

Issued By: KHC HOLDINGS PTE LTD Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)

👚 3 Anson Road #16-00 Springleaf Tower Singapore 079909

Q6389 6111

₱6222 1033

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