SL0V217C0001-01 / LIM TAN MOTOR PTE LTD
ENTRY DATE & TIME: 12/07/2021 13:20 (SGT)
SUBMITTED BY: Tracia Leong
VERSION: 2 (13/07/2021 09:34 (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 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	12/07/2021 13:20 (SGT)
Date of Accident	12/07/2021 07:55 (SGT)
Exact Location of Accident	213 Bedok North Street 1, Singapore 460213
Additional Location Information	BLK 213 BEDOK STREET 1 OPENSPACE CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLA4654P

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHONG KUM LOONG
NRIC No	SXXXX294J
Email Address	chongkumloong@yahoo.com.sg
Mobile Phone No	(Phone) +65-97827521
Alternative Phone No	+65-97827521

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Vezel
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1500

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	509814661-03
Cover Note Number	-

DRIVER

Name of Driver	CHONG KUM LOONG
NRIC No	SXXXX294J

Date Of Birth	08/06/1971
Occupation	Outdoor
Date Of Driving Pass	25/11/2002
Driving experience	18 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97827521
Alt. Phone Number	+65-97827521
Email Address	chongkumloong@yahoo.com.sg
Address	BLK 405 SIN MING AVENUE #24-261
Address complement	-
Postcode	570405
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	Hit and run / Vandalism / Damaged whilst parked
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 vehicle 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?	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
Reasons for not uploading a video of the accident	CANNOT BE UPLOAD DUE TO FORMAT, WILL SEND IT BY EMAIL
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJN2602H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	UNKNOWN
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
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

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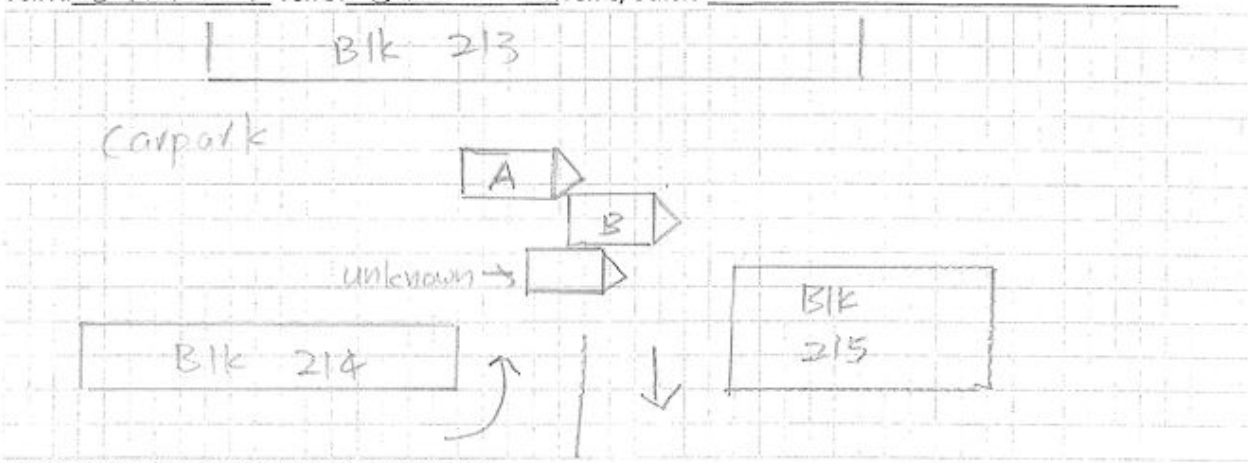
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report 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' 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 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 lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
   (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
   (e) the information so collected under (d) above may be shared / disclosed:
      (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
      (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time: 12/7/21	Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.: 7635

SKETCH PLAN

Date & Time of Accident: 12/7/21, 0755hrs Location: Blk 213, Bedok Street 1, Openspace Carpark

Veh A: SLA 4654P Veh B: SSN 2602H Veh C/Others: _____



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Accident happened Blk 213, Bedok Street 1 carpark morning at 0755am
My car was in stationery mode. After I dropped off my passenger. Suddenly car B, which was parked in front of my car suddenly reversed very fast and knocked onto the right side of my front car. This accident happened on 12/7/21 at 0755am

[ ] Own Damage Claim at Lim Tan Motor [✓] TP Claim at Lim Tan Motor
[ ] Own Damage Claim at Other Workshop [ ] TP Claim at Other Workshop [ ] Reporting Only

I/We hereby authorised Lim Tan Motor Pte Ltd to forward my/our filed GIA accident report to:-

My/Our workshop via email : _____
My/Our email : _____

DECLARATION

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

Policyholder's Signature Date & Time: 12/7/21

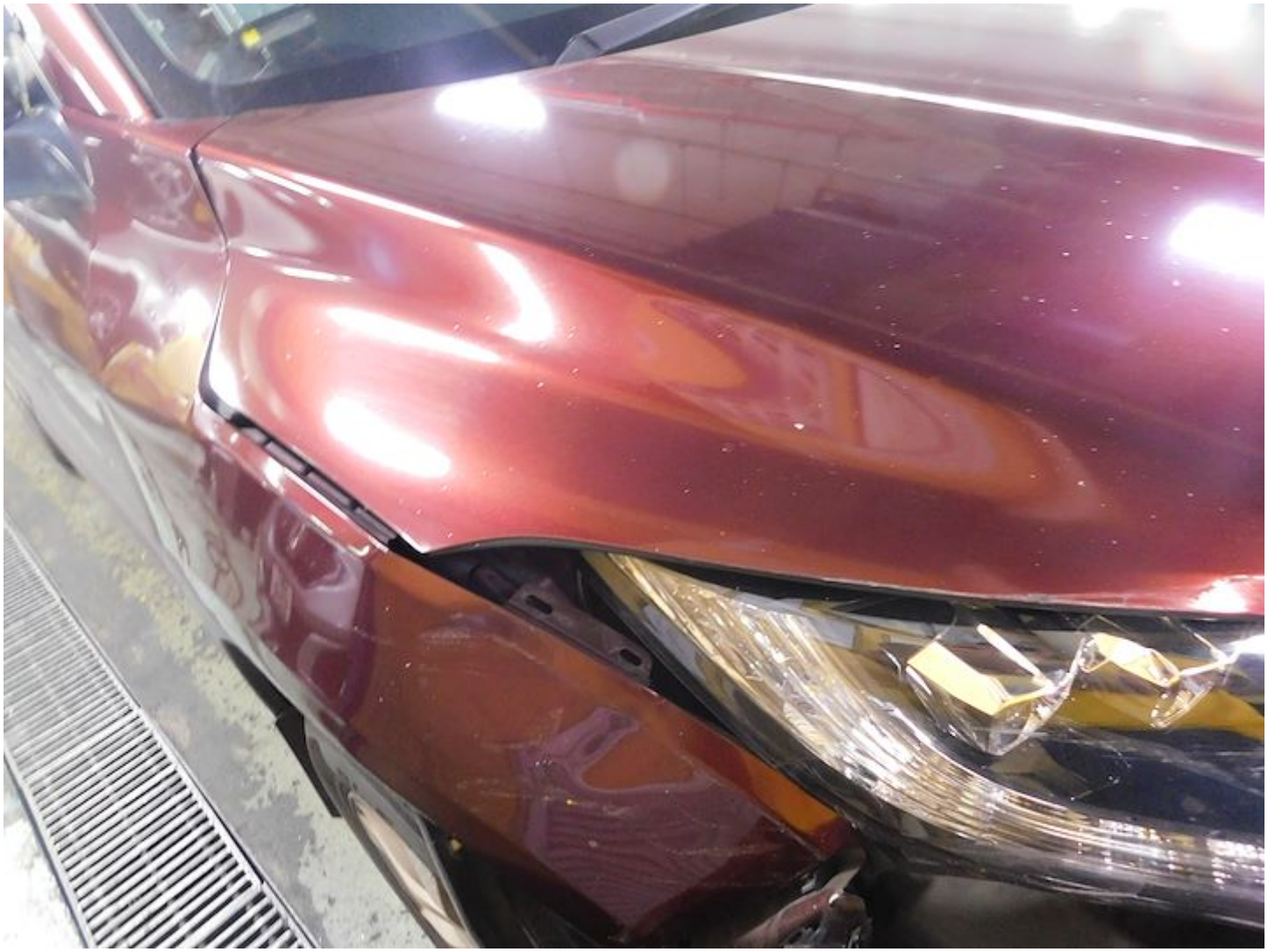
Driver's Signature (If driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.: 763J

GIARMC SketchPlanForm_V3 2

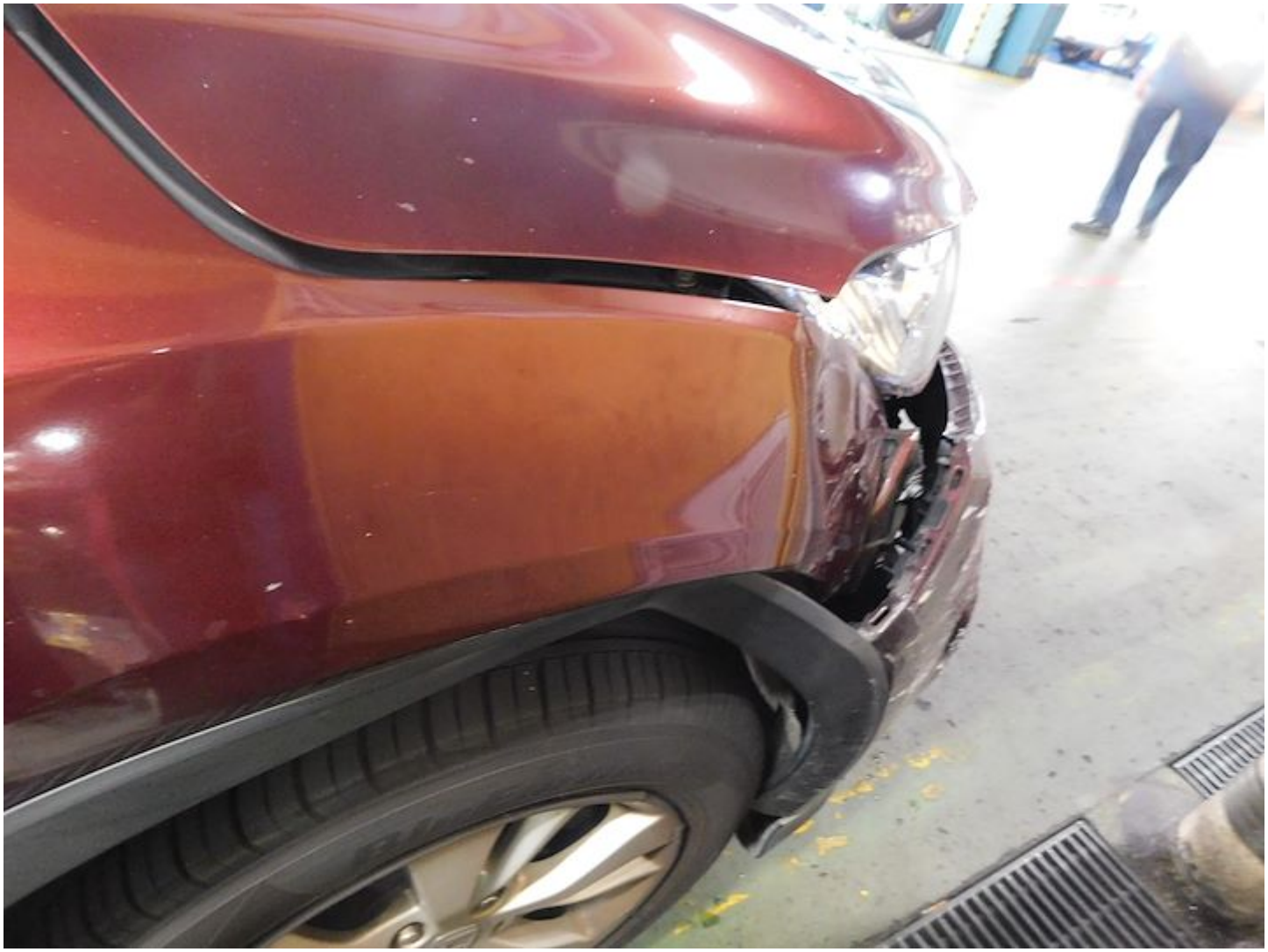
IMAGES

IMAGES #2

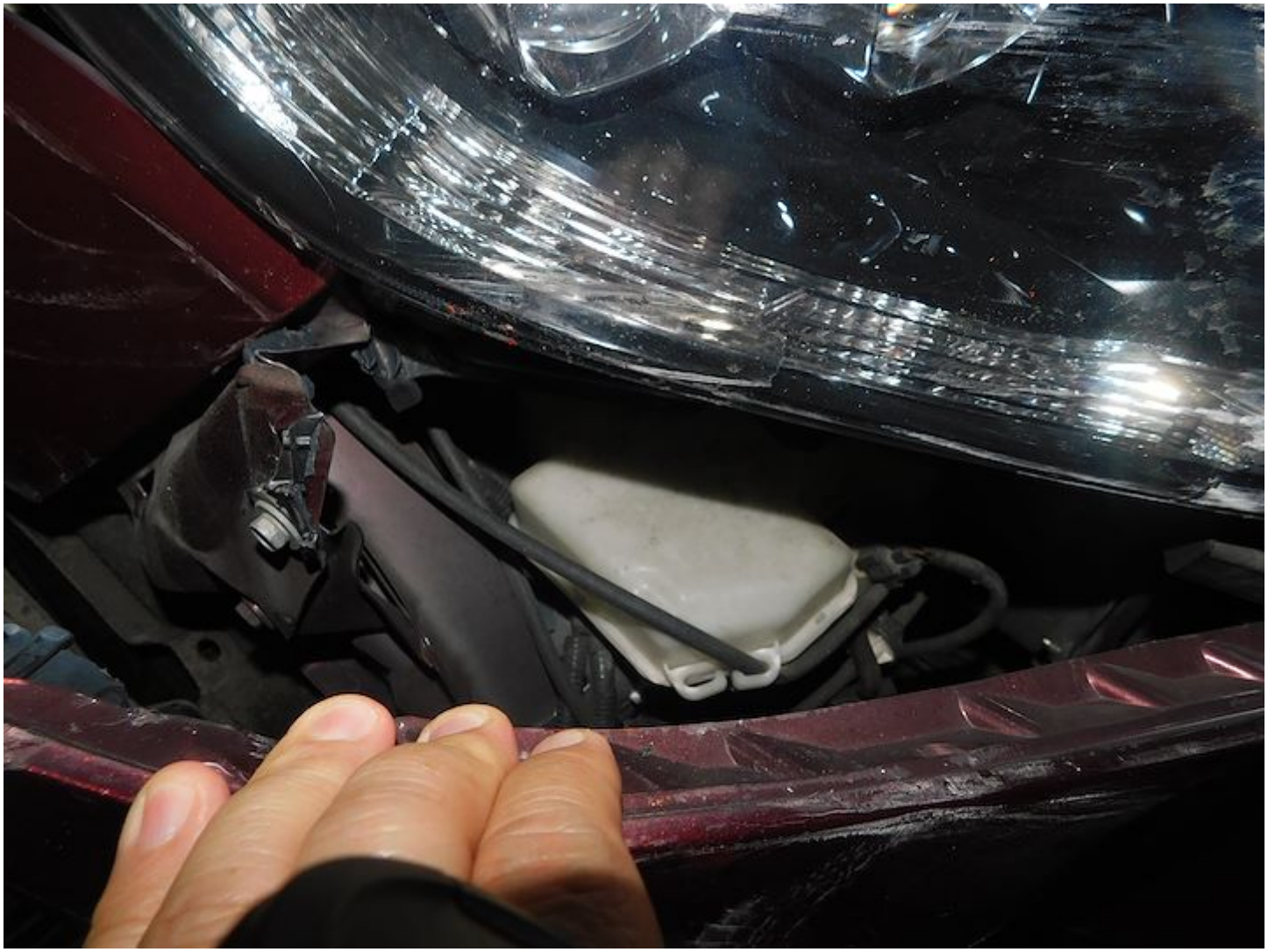


IMAGES #3

IMAGES #4



IMAGES #5

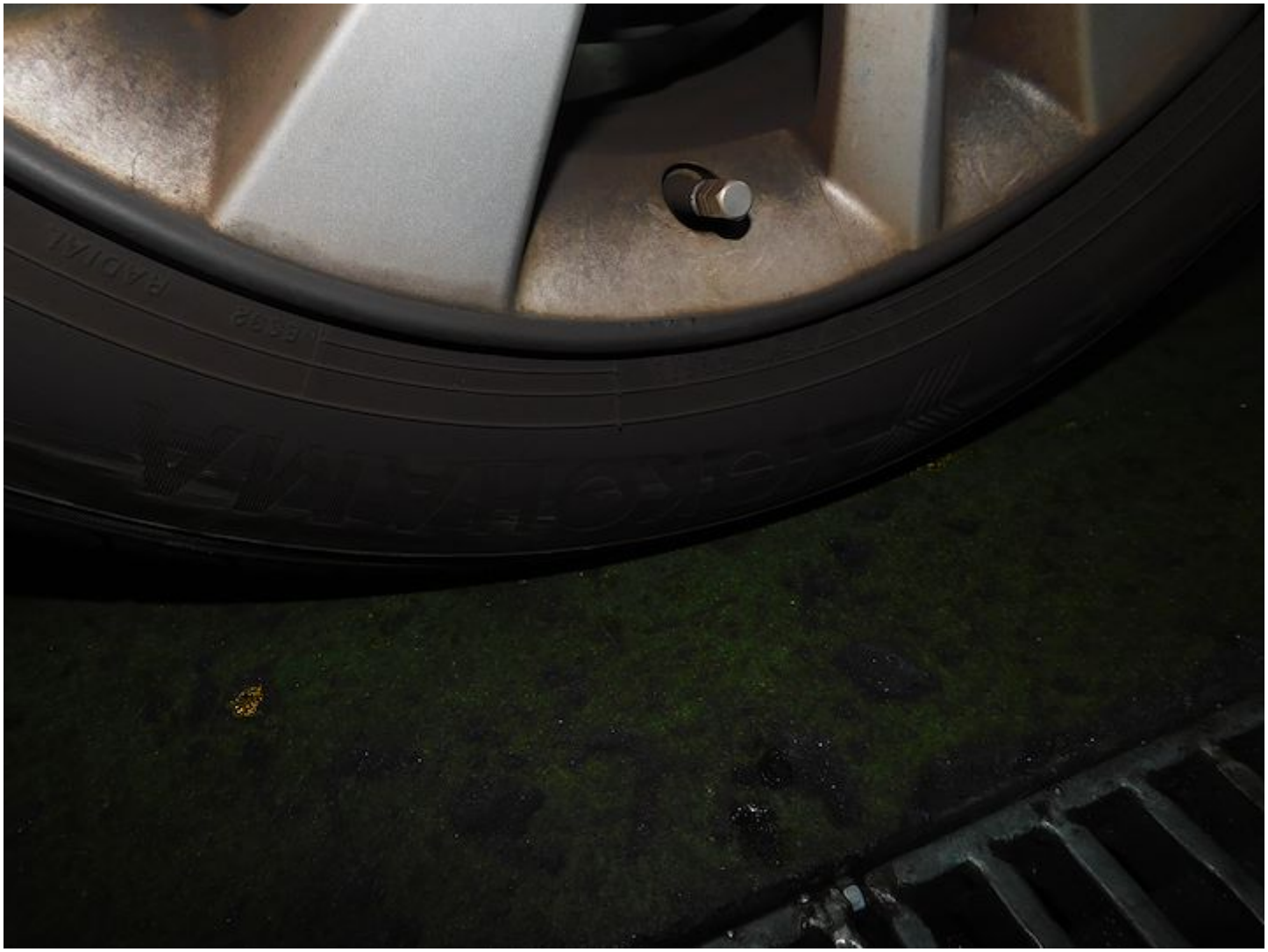


IMAGES #6

IMAGES #7

IMAGES #8

IMAGES #9



IMAGES #10

IMAGES #11

IMAGES #12

IMAGES #13

IMAGES #14

IMAGES #15

IMAGES #16

PRIVATE HIRE

GENERAL INSURANCE ASSOCIATION RECORDS MANAGEMENT CENTRE

GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S66SS0020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the **same** Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : SL0V217C0001 Vehicle Registration No: SLA 4654P

Name(as shown in NRIC) : Chong kum Loong NRIC/FIN/Passport No : SXXXX 294J

(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate

Address : Blk 405, Sin Ming Avenue #24-261 Singapore(570405)

Contact (Tel) : Mobile No. : 97827521

Email Address : chongkumloong@yahoo.com.sg

Date of Accident : 12/7/2021 Time of Accident : 0755 hrs

Place of Accident : Blk 213 Bedok Street 1, Openspace Carpark

Insurance Company : NTUC

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

The workshop have upload wrong car photo and will remove the wrong accidant car photo.

SIGN HERE

Policyholder / Driver's Signature
Date: 13/7/21

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Date:

GIARMC addendumform_V3

income

insure differently

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)
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number	: 5098148661-03	Cover : Comprehensive
1. Index mark and Registration Number of Vehicle		: SLA4654P
Chassis Number		: RU1310254?
2. Name of Policyholder		: CHONG KUM LOONG
3. Effective Date of Insurance		: 01 Mar 2021
4. Expiry Date of Insurance		: 28 Feb 2022

5. Persons or Classes of Persons entitled to drive#
   (a) The Policyholder
   (b) Any other person who is driving on the Policyholder's order or with his/her 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
6. Limitations as to Use#
   (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business
   (b) Use for the carriage of passengers or goods in connection with the Policyholder's or Hirer's business;

This Policy does not cover
   (a) Use for racing, pace-making, reliability trial or speed-testing
   (b) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle

\# Limitations rendered inoperative by Section 8 of the Motor Vehicle (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

EXCESS (ALL CLAIMS)	: S$2,000
WINDSCREEN EXCESS	: S$100
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: HL BANK
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : GRABCAR PTE. LTD. (0000060172G)
Date of Issue : 25 Jan 2021 21:26 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive