

# 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 ..... 12/07/2021 18:27 (SGT)  
Date of Accident ..... 12/07/2021 08:00 (SGT)  
Exact Location of Accident ..... 215 Bedok North Street 1, Singapore 460215  
Additional Location Information ..... BLK 215 BEDOK NORTH AVE 1 CARPARK  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SJN2602H

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... KOE TAI SENG  
NRIC No ..... S2004541H  
Email Address ..... VICTORHO@GREATLAND-EAGLE.COM  
Mobile Phone No ..... (Phone) +65-97471288  
Alternative Phone No ..... +65-97471288

### VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... Vios  
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? ..... Yes  
Vehicle Category ..... Private car  
Transmission ..... Auto  
CC ..... 1329

### INSURANCE COMPANY

Name of Insurance Company ..... China Taiping Insurance (Singapore) Pte. Ltd.  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... DMPCSNW00022782100  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... KOE TAI SENG  
NRIC No ..... S2004541H

Date Of Birth .....	25/11/1950
Occupation .....	Indoor
Date Of Driving Pass .....	29/05/1976
Driving experience .....	45 YEARS AND 2 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-97471288
Alt. Phone Number .....	+65-97471288
Email Address .....	VICTORHO@GREATLAND-EAGLE.COM
Address .....	BLK 622 BEDOK RESERVOIR ROAD
Address complement .....	#08-1514
Postcode .....	1647
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 .....	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 .....	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

ON 12TH JULY 2021, AROUND 0800AM AT BLK 215 BEDOK NORTH AVE 1 CARPARK, I WAS DRIVING MY VEHICLE SJN2602H (A), I HAD JUST DROPPED OFF MY GRAND-DAUGHTER FOR HER CLASS. AS I WAS ABOUT TO REVERSE VEHICLE SLA4654D (C) OUT OF NO WHERE WAS PARKED BEHIND MY VEHICLE. AS MY VEHICLE HAS STARTED ROLLING OUT OF PANIC I MISTAKENLY STEPPED ON THE ACCELERATOR AND KNOCKED INTO SJF7624D (B) AND CAUSED DAMAGES TO THE LEFT OF THE VEHICLE. AS I DID NOT STOPPED IN TIME AND I HAD ALSO REVERSE INTO SLA4654D (C) WHICH CAUSED DAMAGES TO THE FRONT RIGHT SIDE. I HAVE NO PASSENGER IN MY VEHICLE EXCLUDING DRIVER.

VEHICLE (A) - SJN2602H  
 VEHICLE (B) - SJF7624D  
 VEHICLE (C) - SLA4654D

#### 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 .....	SJF7624D
Vehicle Manufacturer .....	Toyota

Vehicle Model .....	Sienta
Vehicle Variant .....	-
Vehicle Colour .....	Blue
Vehicle Category .....	NA / Unknown
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 .....	SLA4654D
Vehicle Manufacturer .....	Honda
Vehicle Model .....	Vezel
Vehicle Variant .....	-
Vehicle Colour .....	Red
Vehicle Category .....	Private hire
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 PLANIMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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.

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

x   
 Driver's Signature  
 (If driver is not the policyholder)  
 Date & Time: 12/7/21

Joanne Chan Mei Sim (CSO)  
 Tel : 6592 8879  
 Fax : 6442 6337  
  
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 12/7/21 AROUND 08:00AM AT BLK 215 REDOK NORTH AVE 1 CARPARK,  
I WAS DRIVING MY VEHICLE SEN 2602H (A), I HAD JUST DROPPED OFF  
MY GRAND-DAUGHTER FOR HER CLASS.  
As I WAS ABOUT TO REVERSE VEHICLE NUMBER SLA4654D (C) OUT OF  
NOWHERE WAS PARKED BEHIND MY VEHICLE. As MY VEHICLE HAS STARTED ROLLING  
OUT OF PANIC I MISTAKENLY STEPPED ON THE ACCELERATOR AND KNOCKED INTO  
SSF7624D (B) AND CAUSING DAMAGES TO THE LEFT OF THE VEHICLE. As I  
DID NOT STOP IN TIME I HAD ALSO REVERSE INTO (C) WHICH CAUSED DAMAGES  
TO THE FRONT RIGHT SIDE  
I HAVE NO PASSENGER IN MY VEHICLE EXCLUDING DRIVER.  
(A) SEN 2602H (B) SSF7624D (C) SLA4654D.

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:

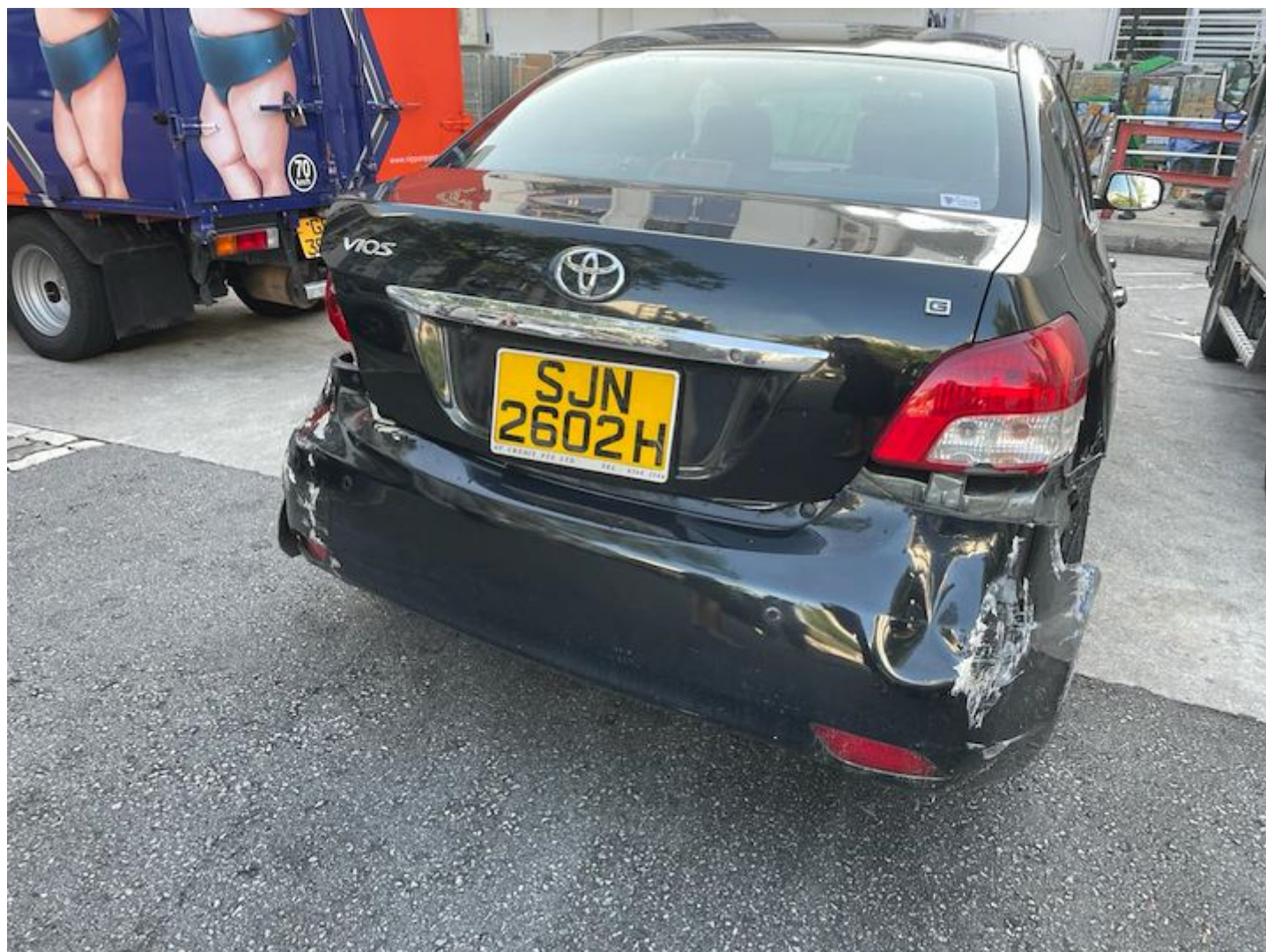
Joanne Chan Mei Sim G80  
Tel: 6592 8873  
Fax: 6442 5577  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



GMARAC SketchPlanForm\_V3

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中国太平保险(新加坡)有限公司  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Private Car

MX1F

N SN

AN0056A

Cov. Type:C

**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, 1992 (Malaysia)

CERTIFICATE No.	DMPCSNWC022782100	Engine No.: 1NZX840409	
		Cha. No.: MR033HY9305091919	
1. Index Mark and Registration Number of Vehicle	SJN2602H	AUTOSAFE	*****
2. Name of Policy Holder	KOE TAI SENG @ KOH TAI SENG		
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	10/02/2021 (00:00:00)	Named Drivers Ex Sect. I	\$5500.00
4. Date of Expiry of Insurance	09/02/2022	Additional Ex Other than Named Drivers:	
		Ex Sect. I - Age <= 25	\$53,000.00
		Ex Sect. I - Age >= 26	\$5500.00
		* Age as at date of accident	
		EX ON WINDSCREEN	\$5100.00
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 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*			
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 \$5500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.			
HIRE PURCHASE CO.: GV CREDIT PTE LTD			
* 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:

DARLENG 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

6389 6111

6222 1033

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