# **©** 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 <u>completed by the Policyholder and/or the Authorised Driver</u>
- 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 22/07/2021 17:20 (SGT) Date of Accident 21/07/2021 22:30 (SGT) **Exact Location of Accident** Serangoon Ave 2, Singapore Additional Location Information Traffic light junction Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

No - Claiming third party

Vehicle Registration Number SLV6473X

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner Sing Moh Electrical Engineering Pte Ltd

Company Reg No 1XXXXX810H **Email Address** limkp@singmoh.com Mobile Phone No (Phone) +65-96362619 Alternative Phone No +65-96362619

VEHICLE PARTICULARS

Manufacturer Honda Model Vezel Variant

Exact purpose for which vehicle was being used at time of Private use

Are you claiming under your own insurance policy for repair to your vehicle? Vehicle Category

Private car Transmission Auto CC 1496

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.

Type of Coverage Comprehensive No

Fleet Policy

Policy Number DMPCSNW00002962102 Cover Note Number

DRIVER

Name of Driver Lim Zhiming NRIC No SXXXX539B 
 Date Of Birth
 17/03/1999

 Occupation
 Indoor

 Date Of Driving Pass
 01/08/2018

Driving experience 2 YEARS AND 11 MONTHS

Gender Male

Mobile Number (Phone) +65-84822131

Alt. Phone Number

Email Address zhimingggg@gmail.com

Address Blk 313B Anchorvale Road #11-102

Address complement

Postcode 542313 Is the driver the policyholder? No

If No, Relationship of the Driver with the Insured Employee's son

Does Driver Own Other Vehicles?

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 Collision - Head to Rear

Weather Conditions Clear Road Surface Dry

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 vehicle or property damaged?

Number of Passengers (Including Driver)

2

Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

PASSENGER 1

Name Zoen Lee Gender Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?

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?

Was there any video captured by Car Camera?

No
Was there any audio recorded?

No

#### **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Category Private car



Name of Driver NRIC No Contact Number

Address

Address complement

Postcode

Insurance Company Name

Nature Of Damage

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

Phua Yang Tat SXXXX442Z

(Phone) +65-88126619

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#### SKETCH PLAN

#### IMPORTANT NOTICE

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- 5. Any false reporting may be referred to the Police for investigation.
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- 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)

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
- (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' 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 &

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

Witnessed by Reporting Centre

Personnel Angle Soh

Sketch Plan

Scranjaon

Anglis S

Describe Circumstances of the Accident
On the 22 July 2021 at about 223 ones. I was adding
the velicite (SLV6473X) Block Hands Vecal and stropped of the
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and my velicle inted language. I come about an opiced a
the marda (SLUT1658X) bit me from behind. We see with
then come some and exchanged posticulars. I wished to state that
then are some and exchanged particulars. I wished to stock that I want working at the tracker light for a period at time softer
the other party hit we.
de2.saprA

## Declaration

IWe declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

Driver's-6 gnature (# driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel Applie Sol

Angie Soh



CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD

Motor Private Car

MX4F

R SN

AN0044A 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, 1959 (Malaysia)

CERTIFICATE No.

DMPCSNW00002962102

Engine No.: L15B4406242

Cha. No.:RU11206242

1. Index Mark and Registration

SLV6473X

**AUTOSAFE** 

Name of Policy Holder

Number of Vehicle

SING MOH ELECTRICAL ENGINEERING PTE LTD

Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment

09/01/2021

Named Drivers Ex Sect. I

S\$500.00

(00:00:00)

Additional Ex Other than Named Drivers:

4. Date of Expiry of Insurance

08/01/2022

Ex Sect. I - Age <= 25 Ex Sect. 1 - Age >= 26 S\$3,000.00 \$\$500.00

\* Age as at date of accident

EX ON WINDSCREEN .

S\$100.00

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.

6. Limitations as to use:

N

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: CHOO WOON YIT Authorised Officer

Authorised Signatory

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

\*3 Anson Road #16-00 Springleaf Tower Singapore 079909

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