

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	11/08/2021 17:58 (SGT)
Date of Accident	10/08/2021 18:00 (SGT)
Exact Location of Accident	Gambas Ave, Singapore
Additional Location Information	BEFORE WOODLANDS AVENUE 12 JUNCTION
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJQ26T
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIM HOCK SENG
NRIC No	SXXXX777F
Email Address	hs.lim551@gmail.com
Mobile Phone No	(Phone) +65-96669980
Alternative Phone No	+65-96669980

VEHICLE PARTICULARS

Manufacturer	Lexus
Model	Rx300
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 - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1998

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPCSNW00077922000
Cover Note Number	-

DRIVER

Name of Driver	LIM HOCK SENG
NRIC No	SXXXX777F

Date Of Birth	13/10/1957
Occupation	Outdoor
Date Of Driving Pass	22/11/1976
Driving experience	44 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96669980
Alt. Phone Number	+65-96669980
Email Address	hs.lim551@gmail.com
Address	BLK 583 WOODLANDS DRIVE 16 #7-464
Address complement	-
Postcode	730583
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	Collision - Head to Rear
Weather Conditions	Raining
Road Surface	Wet

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 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?	Yes
Police Station Name	Woodlands Division Headquarters
Police Station Phone No	(Phone) +65-18004660000
Police Station Address	1 Woodlands St 12 Singapore 738622
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20210810/7053

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	WITH OWNER
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBL4147Y
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle

Name of Driver	ARAVIN S/O JAYA KUMAR
Contact Number	(Phone) +65-88935201
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	LIM HOCK SENG
Gender	Male
Phone No	(Phone) +65-96669980
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SJQ26T
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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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)**

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.

Policyholder's Signature / Date & Time

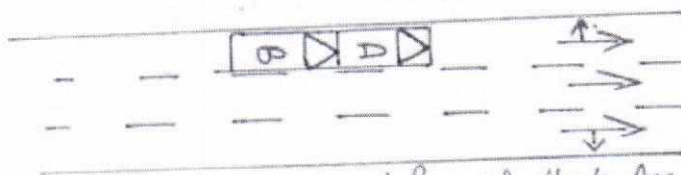
Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan

(A) SJQ 26 T.

(B) GBL 414TY.



Gambas Ave before Woodlands Ave 12 junction.

Describe Circumstances of the Accident

Pls refer to Police Report

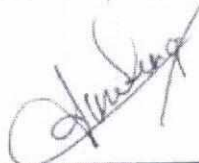
No: L/20210810/7053

Declaration

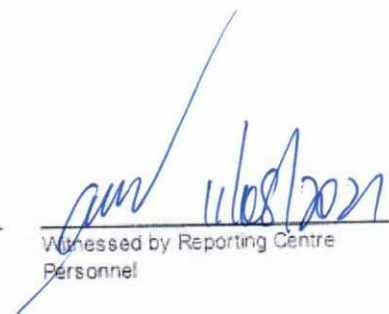
We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date &
Time



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



Witnessed by Reporting Centre
Personnel

VEHICLE NO:	8JQ 26T		MAKE & MODEL:	Lexus RX300		(AUTO) / MANUAL
DATE OF ACCIDENT:				10/08/2021		CC: 1998
TIME OF ACCIDENT:				1800 HRS		
LOCATION OF ACCIDENT:				Gambas Ave before Woodlands Ave 12 junction.		
EXACT PURPOSE USE DURING ACCIDENT:			EMPLOYMENT /	(PRIVATE USE)	PRIVATE HIRE	
NAME OF OWNER:			Lim Hock Seng			
TEL NO:			H/P:	9666 9980	OFFICE:	HOME:
NRIC:			S 1238777F			
ADDRESS:			8LK 583 Woodlands Drive 16 #07-464 (S) 730583			
EMAIL:			hs.lim551@gmail.com			
CLAIM TYPE:			OD / (THIRD PARTY) / REPORTING ONLY			
FLEET POLICY:			YES / (NO)			
INSURANCE COMPANY:			China Taiping			
TYPE OF COVERAGE:			Comprehensive / Third Party / Third Party Fire & Theft			
POLICY NO:			DMPCR8NW00077922000			
NAME OF DRIVER:			(AS ABOVE) / IF NO:			
NRIC:					ANY PASSENGER:	N.A.
DATE OF BIRTH:			13/10/1957		LICENCE PASSED DATE: 22/11/1976	
OCCUPATION:			(OUTDOOR) / INDOOR			
GENDER:			(MALE) / FEMALE			
CONTACT NO:			H/P:		OFFICE:	HOME:
ADDRESS:						
EMAIL:						
DOES DRIVER OWNED ANY VEHICLE:			NO / IF YES, REG NO:		INSURER:	
RELATIONSHIP:			Owner			
WEATHER CONDITION:			CLEAR / (RAINING) / OTHERS:			
ROAD SURFACE:			DRY / (WET) / OTHER:			
ANY INJURIES:			NO / IF YES, WHO?			
NAME & CONTACT:			Lim Hock Seng (H/P: 9666 9980)			
NAME & CONTACT:						
POLICE REPORT:			NO / IF YES, WHERE?		Woodlands Division HQ	
NOTICE OF INTENDED PROSECUTION GIVEN?			NO / IF YES, WHO?			
VEHICLE B REG NO:			GBL 4147Y		ANY PASSENGERS: N.A.	
NAME OF DRIVER:			Araven s/o Jaya Kumar		CONTACT NO: 8893 5201	
VEHICLE C REG NO:					ANY PASSENGERS:	
VEHICLE D REG NO:					ANY PASSENGERS:	
VEHICLE E REG NO:					ANY PASSENGERS:	
VEHICLE F REG NO:					ANY PASSENGERS:	
VEHICLE G REG NO:					ANY PASSENGERS:	
ANY WITNESS? IF YES, NAME:			WITNESS CONTACT:			
WAS THERE ANY VIDEO CAPTURE?			(YES) / NO			
WAS THERE ANY AUDIO RECORDED?			YES / (NO)			
ACCIDENT SCENE PHOTOS TAKEN?			(YES) / NO			
ACCIDENT PORTION:			Rear Portion			
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?			YES / (NO)			
WORKSHOP PARTICULAR:			N-51 Automotive Pte Ltd			
CONTACT NO:			68420051 / 67440510			
CONTACT PERSON:			JOSEPH TAN			
FAX NO:			67410510			
WORKSHOP EMAIL:			sales@n51.com.sg			



**SINGAPORE
POLICE FORCE**



L/20210810/7053

1 of 2

POLICE REPORT (NP299)

Report No. L/20210810/7053

Police Station Of Origin
Woodlands Division HQ
1 Woodlands Street 12 SINGAPORE 738622
Tel No:1800-4660000

Date/Time Report Made 10/08/2021 23:19	Vide Report No.	Station Diary No.
Name Of Informant LIM HOCK SENG	Address 583 WOODLANDS DRIVE 16 #07-464 SINGAPORE 730583	
ID Type / ID No. NRIC NO / S1238777F	Contact No. Home/Office:	Mobile: 96669980
Nationality SINGAPORE CITIZEN	Email Address HS.LIM551@GMAIL.COM	
Occupation Self employed	Sex Male	Age 63
Institution/School Name	Date of Birth 13/10/1957	Race Chinese
Date/Time Of Incident 10/08/2021 18:00	Location Of Incident GAMBAS AVENUE	

Brief details.

On 10/08/2021 at about 1800hrs, I was alone, driving my vehicle, a white Lexus RX300, (SJQ26T) along Gambas Ave at lane 4 as I wanted to turn left into Woodlands Ave 12.

It was raining heavily, and traffic was heavy.
My vehicle stopped as it was red light. I then suddenly felt an impact from the rear and looked into my rearview mirror and saw a black van (GBL4147Y) had collided into the rear of my vehicle.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 10/08/2021 23:19
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**



L/20210810/7053

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20210810/7053

I made a check on my vehicle and saw there were two cracks and scratches on the rear left side and right side of my bumper area.

The van's emblem was damaged and the bonnet was dented upwards.

No one was injured, no Police or ambulance was at scene. No government property was damaged.

I am lodging this report for insurance purposes.

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:

Authentication Stamp

Signature Of Informant:
The identity of the person making this
report has been authenticated by Singpass.
No signature is required.

Date/Time:
10/08/2021 23:19

Classification Of Case:



中国太平
CHINA TAIPING

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

Motor Private Car

MX1E

E SN

AN0420A

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.

DMPCSNW00077922000

Engine No.: 8ARW936420

Cha. No.: JTJZAMCA302048609

1. Index Mark and Registration
Number of Vehicle

SJQ26T

2. Name of Policy Holder

LIM HOCK SENG

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

01/07/2020

Named Drivers Ex Sect. I

S\$750.00

Additional Ex Other than Named Drivers:

Ex Sect. I - Age <= 25

S\$3,000.00

Ex Sect. I - Age >= 26

S\$500.00

4. Date of Expiry of Insurance

15/10/2021

* Age as at date of accident

EX ON WINDSCREEN

S\$100.00

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 S\$1,000 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.: TOKYO CENTURY LEASING (S) 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

Issued By



Authorised Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

杨亚美

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

www.sg.cntaiping.com