

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	12/08/2021 12:18 (SGT)
Date of Accident	11/08/2021 12:05 (SGT)
Exact Location of Accident	Jalan Bukit Merah, Singapore
Additional Location Information	TOWARDS ALEXANDRA INFRONT OF BLOCK 113 EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKH4367T
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	CHUA GRACE
NRIC No	SXXXX629D
Email Address	graciesg@gmail.com
Mobile Phone No	(Phone) +65-97922976
Alternative Phone No	+65-97922976

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
Variant	ALTIS
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	1598

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPCSNW00127992101
Cover Note Number	-

DRIVER

Name of Driver	CHUA TEOW CHING
NRIC No	SXXXX060A

Date Of Birth	14/09/1949
Occupation	Indoor
Date Of Driving Pass	22/07/1969
Driving experience	52 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-97922976
Alt. Phone Number	-
Email Address	graciesg@gmail.com
Address	BLOCK 109B DEPOT #19-93
Address complement	DEPOT HEIGHTS
Postcode	102109
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Parent
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 - Change/cross lane
Weather Conditions	Clear
Road Surface	Dry

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?	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?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGR199H
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) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	CHUA TEOW CHING
Gender	Male
Phone No	(Phone) +65-97922976
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SKH4367T
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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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

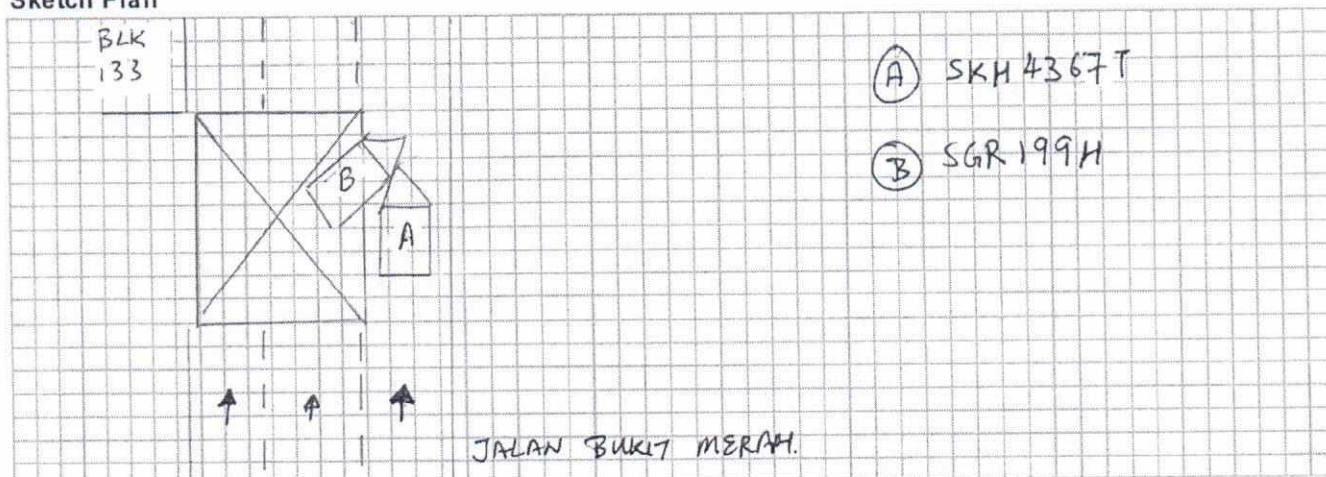
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

12/08/2021
Witnessed by Reporting Centre Personnel

Sketch Plan



ON 11/08/2021 @ 1205 HRS I WAS DRIVING STRAIGHT ALONG JALAN
BUKIT MERAH. VEHICLE B CAME OUT FROM THE CAR PARK OF BLK
133 AND VEHICLE B CUT INTO MY LANE. AND COLLIDED INTO MY
VEHICLE.

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

SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 11-Aug-2021

ACCIDENT TIME: 1205

LOCATION: JALAN BUKIT MERAH TWDS ALEXANDRA. IN FRONT OF BLK 133 EXIT

VEHICLE NUMBER: SKH4367T

INSURED NAME: CHUA GRACE

NRIC / FIN: S7916629D

CONTACT: 9792 2976

MAKE: TOYOTA

MODEL: COROLLA ALTIS 1.6 ELEGANCE
(AUTO)

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

() Yes, If No, Pls Select: (☒) Third Party () Reporting Only

INSURANCE COMPANY: CHINA TAIPING

TYPE OF POLICY: Comprehensive

POLICY NUMBER: DMPCSNW00127992101

EXPIRY DATE: 23-Jun-2022

NAME DRIVER: CHUA TEOW CHING

NRIC / FIN: S0597060A

CONTACT: 9792 2976

DATE OF BIRTH: 14-Sep-1949

DRIVING PASS DATE: 22-Jul-1969

OCCUPATION: Indoor

GENDER: Male

EMAIL ADDRESS: graciesg@gmail.com

ADDRESS OF DRIVER: 109B DEPOT ROAD
#19-93 DEPOT HEIGHTS
SINGAPORE 102109

Relationship Of The Driver With The Insured: Children

Number Of Passenger Include Driver: 1 Driver

NAME	NRIC/FIN/BC	GENDER	INJURED
CHUA TEOW CHING	S0597060A	Male	<input checked="" type="checkbox"/>

INJURY DETAILS: 1 Driver, 0 Passenger(s)

Insurance Company Of Driver's Own Vehicle:

Weather Conditions: Clear

Road Surface: Dry

Was Any Foreign Vehicle Involved In This Accident? No

Convey By Ambulance: No

Was There Any Video Capture By Car Camera? No

Was There Accident Reported To The Police? No Police Report Number: nil

Details Of 3rd Party	Name	NRIC	Contact	No.of Paxs(incl' driver)
Veh B SGR199H				Not Sure



Motor Private Car

MX1F

R SN

BR0120A

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.

DMPCSNW00127992101

Engine No.: 1ZR0E00499

Cha. No.:MR053REH604598454

1. Index Mark and Registration
Number of Vehicle

SKH4367T

2. Name of Policy Holder

CHUA GRACE

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

24/07/2021
(00:00:00)

Named Drivers Ex Sect. I S\$500.00

Additional Ex Other than Named Drivers:

Ex Sect. I - Age <= 25 S\$3,000.00

Ex Sect. I - Age >= 26 S\$500.00

* Age as at date of accident

EX ON WINDSCREEN S\$100.00

4. Date of Expiry of Insurance

23/07/2022

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 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\$500 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.: GOLDBELL FINANCIAL SERVICES PTE. LTD. AS HP

* 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: ACORN INTERNATIONAL NETWORK PTE
Authorised Officer

Authorised Signatory

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	629D
Vehicle Details	
Vehicle No.:	SKH4367T
Vehicle to be Exported:	Yes
Intended Deregistration Date:	12 Aug 2021
Vehicle Make:	TOYOTA
Vehicle Model:	COROLLA ALTIS 1.6 ELEGANCE (AUTO)
Primary Colour:	Silver
Manufacturing Year:	2019
Engine No.:	1ZR0E00499
Chassis No.:	MR053REH604598454
Maximum Power Output:	96.0 kW (128 bhp)
Open Market Value:	\$20,881.00
Original Registration Date:	24 Jul 2019
First Registration Date:	24 Jul 2019
Transfer Count:	1
Actual ARF Paid:	\$21,234.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	23 Jul 2029
PARF Rebate Amount:	\$15,925.00
Intended COE Rebate Details	
COE Expiry Date:	23 Jul 2029
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$28,589.00
COE Rebate Amount:	\$22,717.00
Total Rebate Amount:	\$38,642.00

The information contained herein is correct as at 12 Aug 2021

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