

## 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 ..... 27/08/2021 11:44 (SGT)  
Date of Accident ..... 25/08/2021 09:00 (SGT)  
Exact Location of Accident ..... AYE, Singapore  
Additional Location Information ..... AYE Towards Tuas (After Buona Vista Flyover)  
Country/State of Loss ..... Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SMK289Y

#### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... Goh Geok Peng  
NRIC No ..... SXXXX585H  
Email Address ..... skypad123@gmail.com  
Mobile Phone No ..... (Phone) +65-97270969  
Alternative Phone No ..... +65-97270969

#### VEHICLE PARTICULARS

Manufacturer ..... Honda  
Model ..... Jazz  
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 ..... 1300

#### INSURANCE COMPANY

Name of Insurance Company ..... Tokio Marine Insurance Singapore Ltd  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... MQ000803  
Cover Note Number ..... -

#### DRIVER

Name of Driver ..... Tan Yun Liang  
NRIC No ..... SXXXX075B

Date Of Birth .....	20/12/1997
Occupation .....	Indoor
Date Of Driving Pass .....	25/11/2016
Driving experience .....	4 YEARS AND 9 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-97270969
Alt. Phone Number .....	-
Email Address .....	skypad123@gmail.com
Address .....	Blk 55 Telok Blangah Drive #04-56
Address complement .....	-
Postcode .....	100055
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 .....	Chain Collision
Weather Conditions .....	Raining
Road Surface .....	Wet

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	No
Number of vehicles involved in the accident .....	6
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

Refer Sketch Plan

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	No
Was there any video captured by Car Camera? .....	No
Was there any audio recorded? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SHD6653K
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Taxi
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 ..... SLJ9799A  
 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 3

Vehicle Registration Number ..... SJZ6403B  
 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 4

Vehicle Registration Number ..... SLD4835T  
 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 5

Vehicle Registration Number ..... SJL4593Y  
 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 .....	Tan Yun Liang
Gender .....	Male
Phone No .....	(Phone) +65-97270969
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	-
Injured person in which vehicle? .....	SMK289Y
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No







**Describe Circumstances of the Accident**


On 25/08/2021 at about 09:00AM. I was travelling along AYE towards Tuas (After Buona Vista Flyover). The front vehicle slowed down and stopped, I followed. Suddenly, I felt an impact from my rear and my vehicle moved forward to hit the front vehicle. I was involved in a six vehicles car collision.

**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





**Chung & Ee  
Medical Clinic**

10 Telok Blangah Crescent #01-151 S 090010  
Tel: 6996 3782 Fax: 6996 3729  
Co. Reg. No.: 201704956N



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**MEDICAL CERTIFICATE**

MC No: OD0000040969

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NAME: TAN YUNLIANG

NRIC: S9746075B

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This is to certify that the above-named patient is Unfit for Duty for a period of 2 day(s)  
from **25-08-2021** to **26-08-2021** inclusive.

Note: This certificate is not valid for absence from court or other judicial proceedings.

Dr. Chung Wing Hong


MCR No.: M17710E

MBBS (Singapore)

MRCP (United Kingdom)

MMed Internal Medicine (Singapore)

GDFM (Singapore)

**Chung & Ee Medical Clinic**  
 10 Telok Blangah Crescent  
 #01-151 Singapore 090010  
 Tel: 6996 3782 Fax: 6996 3729

25/08/2021

Date































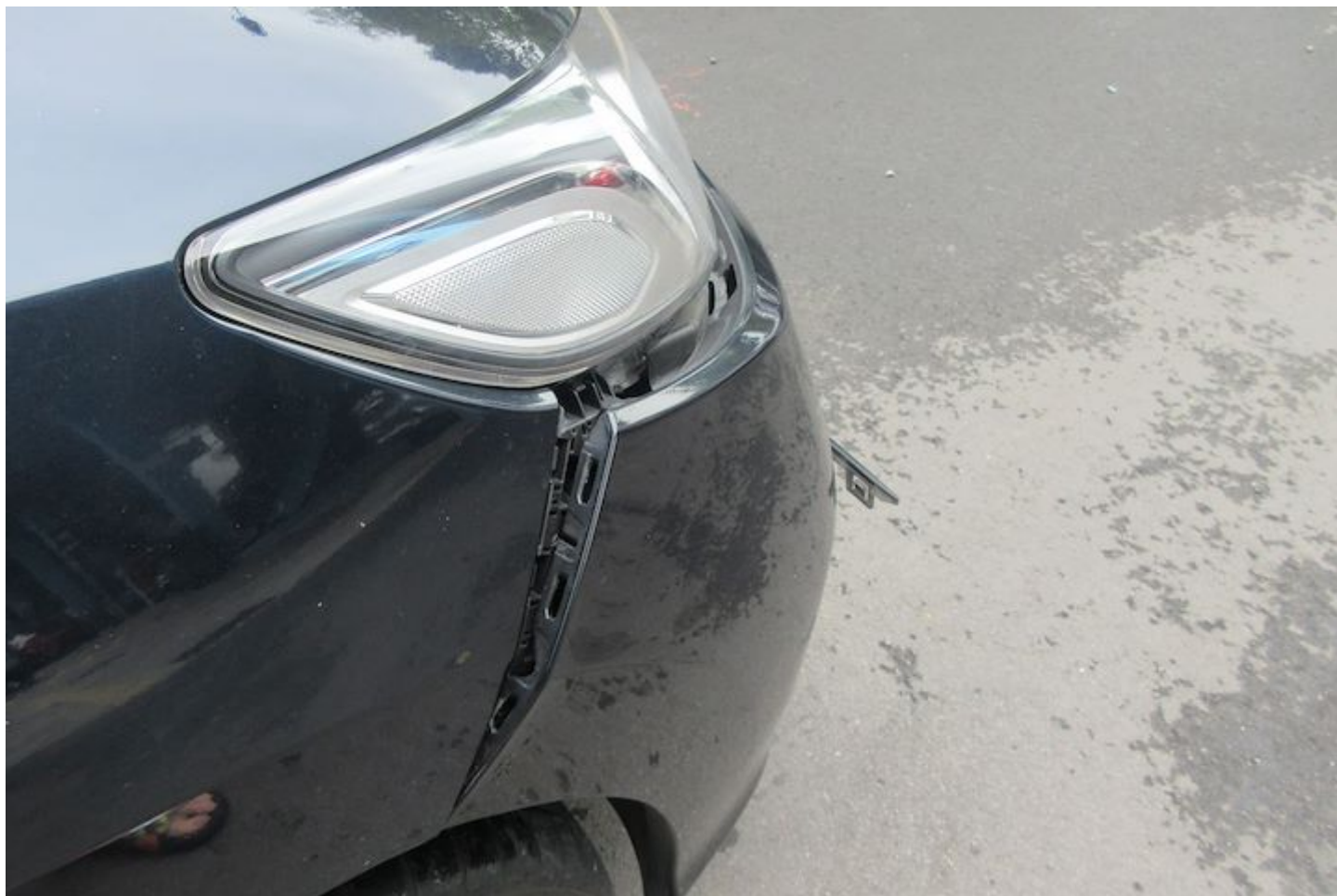














## Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No.: M2-0000023-4)

20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tms@tokiomarine.com.sg W: www.tokiomarine.com

A member of the  
Tokio Marine GroupTOKIO MARINE  
INSURANCE GROUP

## Certificate of Insurance

FORM MX1

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)

Policy No.: MQ000803 (Private Car)

- |   |                       |                                |
|---|-----------------------|--------------------------------|
| 1. Index Mark and Registration Number of Vehicle  | SMK289Y               | Chassis No.: JHMGK3850KS212084 |
| 2. Name of Policyholder   | GOH GEOK PENG         |                                |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act          | 27/03/2021 (00:00:00) |                                |
| 4. Date of Expiry of Insurance  | 26/03/2022            |                                |
| 5. Persons or Class 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

## 6. Limitations as to use\*

Use only for social domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed-testing or 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.

\* 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

## IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost/destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

## ADDITIONAL INFORMATION

Account No: 1457DDA

Insurance Plan:	Comprehensive Approved Workshop Plan		
Limit for total loss or theft:	Prevailing Market Value		
Policy Excess:	Own Damage Claims	SGD 500.00	(Original Excess: SGD 500.00)
	Additional Excess for Unnamed Driver(s)	SGD 500.00	
	Additional Excess for Young or Inexperience Driver(s)	SGD 3,500.00	
	WindScreen Excess	SGD 100.00	
Financial Interest:	NIL		

TOKIO MARINE INSURANCE SINGAPORE LTD.

Authorised Signature

興利企業(私人)有限公司  
HENLY ENTERPRISES CO. (PTE) LTD  
NO. 18 UBI ROAD 1 #02-07  
(UBI CAR MALL)  
SINGAPORE 408616  
TEL: 6460012 (5 Lines)