# **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 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 30/08/2021 12:45 (SGT) Date of Accident 28/08/2021 16:50 (SGT) Exact Location of Accident Singapore YIO CHU KANG ROAD TOWARDS UPPER SERANGOON ROAD Additional Location Information BEFORE ANG MO KIO AVE 3 Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Vehicle Registration Number **SGR1919R** 

Manufacturer

#### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner NG HOCK SIONG NRIC No S7029638A Email Address SEANNG70@YAHOO.COM.SG Mobile Phone No (Phone) +65-84682392 Alternative Phone No +65-84682392

# VEHICLE PARTICULARS

Mazda Model Cx-3 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 Direct Asia Insurance (Singapore) Pte Ltd Type of Coverage Comprehensive Fleet Policy Nο Policy Number MT/00722396/01 Cover Note Number

# DRIVER

Name of Driver NG HOCK SIONG



NRIC No S7029638A Date Of Birth 29/08/1970 Occupation Outdoor Date Of Driving Pass 11/04/2000 Driving experience 21 YEARS AND 4 MONTHS Gender Mobile Number (Phone) +65-84682392 Alt. Phone Number +65-84682392 Email Address SEANNG70@YAHOO.COM.SG Address BLK 3 BISHAN ST 15 #17-15 Address complement Postcode 573911 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 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? No Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 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 THE STATEMENT 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	SKX2805A
Vehicle Manufacturer	_
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	_
Vehicle Category	Private car
Name of Driver	_
Contact Number	_
Address	_

Address complement		 	 _
Postcode		 	 _
nsurance Company Name		 	 _
Nature Of Damage			_
Details of property damaged i	n accident	 	 _
No. Of Passenger (Including I			

# SKETCH PLAN

#### IMPORTANT NOTICE

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- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
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- 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. 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.
- 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' 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 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' 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 Personnel

Sketch Plan

A: SGR 1919 R
B: SKX 2805 A
Y10 Chu Kang Road
Towards Upper
Serang oon Road
Lifere Ang We Kio
Ave 3

ESCRIBE CIRCUMSTA	ANCES OF THE ACCIDENT	
	ionary position at Yio Chu Kang Roa 3 at 2 <sup>nd</sup> lanes of 4 lanes as the traf	
Suddenly, I felt an impa amages.	act. Veh b collided onto the rear port	tion of my vehicle and caused
Veh "B" admitted his fa	ault and apologized and got me to c	laim against his insurance policy.
		<u> </u>
		U
DECLARATION  I/We declare the foregoing particul	ars are true in every respect.	
, The declare the foregoing particular	and the state of temperature	
A		
CH	$\mathcal{O}_{\mathcal{I}}$	
Policyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
Date & Time:	(If driver is not the policyholder) Date & Time:	Name: NRIC/FIN No.:

Date & Time:









































Contact us at

Hotline: (65) 6532 2888

E-mail: CustomerService@DirectAsia.com

# CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act") Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore) Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No. : MT/00722396/01

Type of Coverage / Driver Plan : Car Comprehensive (Value Plus Plan)

1) Vehicle Registration No. : SGR1919R

Chassis No. JM6DK2W7AH0127524

2) Name of Policy Holder : NG HOCK SIONG

3) Effective Date / Time of Commencement

of Insurance for the Purpose of the Act : 30/11/2020 00:00

4) Date/Time of Expiry of Insurance : 29/11/2021 23:59

5) Persons or Classes of Persons Entitled to Drive

- (a) Any named person under the policy who is driving on the Policyholder's permission.
- (b) Any authorised person, provided such person is aged 30 and above and holds a valid driving licence of 2 years or more, who is driving on the Policyholder's permission

The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.

#### Limitations as to use\*

Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business. Private car-pooling arrangements where you commute with passengers and split the fuel expense is covered under the standard policy. Grab Hitch will only be covered if this is the declared usage stated on your Policy Schedule. Only two rides are permitted a day. Other forms of commercial car-pooling or any ride hailing services (e.g. Grab, Go-Jek etc.) are not allowed.

\*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.

Sum Insured : Market Value

Own Damage Excess : S\$ 800.00 (before any applicable GST)
Windscreen Excess : S\$ 100.00 (before any applicable GST)

Choice of workshop : DirectAsia approved workshops

Finance company / Hire Purchase

Main driver : NG HOCK SIONG

Named driver : None

Important Note: This policy does not cover the Policyholder/drivers below the age of 30 and Policyholder/drivers who hold a valid driving licence of less than 2 years with the exception of the main/named drivers above.

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 Com pensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia).

Issued on: 31/10/2020

Direct Asia Insurance (Singapore) Pte. Ltd.

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Direct Asia Insurance (Singapore) Pte Ltd 20 Anson Road #08-01 Twenty Anson Singapore 079912 www.DirectAsia.com