

## 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	02/09/2021 16:18 (SGT)
Date of Accident	02/09/2021 07:50 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PIE TWDS CHANGI AIRPORT BEFORE TPY LORONG 6
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKS6848B
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	HO SIEW FAH CATHERINE
NRIC No	SXXXX204I
Email Address	GCB_1961@HOTMAIL.COM
Mobile Phone No	(Phone) +65-97563348
Alternative Phone No	(Home) +65-97563348

#### VEHICLE PARTICULARS

Manufacturer	Volkswagen
Model	Jetta
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	1390

#### INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5090193655-04
Cover Note Number	-

#### DRIVER

Name of Driver	HO SIEW FAH CATHERINE
NRIC No	SXXXX204I



Date Of Birth	10/05/1960
Occupation	Indoor
Date Of Driving Pass	18/05/1984
Driving experience	37 YEARS AND 4 MONTHS
Gender	Female
Mobile Number	(Phone) +65-97563348
Alt. Phone Number	(Home) +65-97563348
Email Address	GCB_1961@HOTMAIL.COM
Address	BLK 744 JURONG WEST ST 73 #10-27
Address complement	-
Postcode	640744
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	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	4
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	ALVIN
Gender	Male

#### 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 TO ATTACHED

#### 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	SGS7077A
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 2

Vehicle Registration Number	SLJ8663P
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	SMW5801Y
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	HO SIEW FAH CATHERINE
Gender	Female
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SKS6848B
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

##### INJURED 2

Name of injured person	ALVIN
Gender	Male


Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	-
Injured person in which vehicle? .....	SKS6848B
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No




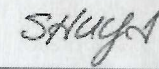
**SKETCH PLAN**

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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.

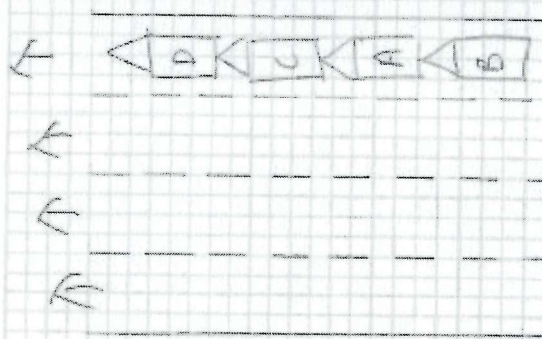
  
Policyholder's Signature / Date & Time

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

  
Witnessed by Reporting Centre Personnel

**Sketch Plan**

PIE towards chaj'i



① SKS 6848 B

② S68 7077 A

③ SLJ 863 P

④ SMW 5801 Y





## Describe Circumstances of the Accident

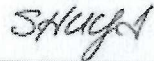
On the stated date and time, I was driving along the towards Changi on lane 1 when I suddenly came to a stop. I also apply my brake to stop my vehicle. I then felt a very great impact from my vehicle rear position. This impact caused my vehicle to surge forward and hit into the front vehicle. When I got down my vehicle, I realised that I was involved in a 4 car collision. My son was inside my vehicle when this accident happen. (Alvin Leong) Both of us felt discomfort and proceed to go for a check and was given 2 days MC.

## Declaration

I/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



For Insurance Reporting And  
Claim Purposes Only



**REPUBLIC OF SINGAPORE**

**IDENTITY CARD NO. S14332041**

Name

**HO SIEW FAH CATHERINE**



何笑花

Race

**CHINESE**

Date of Birth

**10-05-1960**

Sex

**F**

Country of Birth

**SINGAPORE**







2941011

For Insurance Reporting And  
Claim Purposes Only



NRIC No. **S1433204I**

Blood Group	Date of issue
<b>B+</b>	<b>27-01-1997</b>

Address

**APT BLK 744 JURONG WEST STREET 73**  
**#10-27**  
**SINGAPORE 640744**



For Insurance Reporting And  
Claim Purposes Only

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S14332041**  
Name:

**HO SIEW FAH CATHERINE**

Birth Date: **10 May 1960**

Issue Date: **01 Dec 2003**



001027381F



**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)**

**PASS DATE**

**Class 3**

**Motor Cars and Motor Tractors the weight of  
which unladen does not exceed 2500 kilograms**

**18 May 1984**

*For Insurance Reporting And  
Claim Purposes Only*

**NP 428A**





## 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)  
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)  
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

**Certificate Number:** 5090193655-04

**Cover :** drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SKS6848B**  
Chassis Number : WVWZZZ16ZEM063928
2. Name of Policyholder : HO SIEW FAH CATHERINE
3. Effective Date of Insurance : 29 Apr 2021
4. Expiry Date of Insurance : 28 Apr 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/her 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#  
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

**This Policy does not cover**

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

# Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: YES (FREE)
ROADSIDE ASSISTANCE AND WELLNESS COVER	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: YES
PRIMARY DRIVER	: HO SIEW FAH CATHERINE
NAMED DRIVER (1)	: KELVIN LEONG TING WEI
NAMED DRIVER (2)	: LEONG WING LOCK
HIRE PURCHASE COMPANY	: STANDARD CHARTERED BANK (SINGAPORE) LIMITED
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : TELESales-DIRECT MARKETING (00000601661)  
Date of Issue : 23 Apr 2021 10:53 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



> Back to OneMotoring

### Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Singapore NRIC
Owner ID:	204I
<b>Vehicle Details</b>	
Vehicle No.:	SKS6848B
Vehicle to be Exported:	No
Intended Deregistration Date:	02 Sep 2021
Vehicle Make:	VOLKSWAGEN
Vehicle Model:	JETTA 1.4 TSI A/T ABS D/AIRBAG 2WD
Primary Colour:	White
Manufacturing Year:	2014
Engine No.:	CAXE89399
Chassis No.:	WVWZZZ16ZEM063928
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$19,152.00
Original Registration Date:	29 Apr 2015
First Registration Date:	29 Apr 2015
Transfer Count:	0
Actual ARF Paid:	\$9,152.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	28 Apr 2025
PARF Rebate Amount:	\$5,948.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	28 Apr 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$67,601.00
COE Rebate Amount:	\$24,711.00
<b>Total Rebate Amount:</b>	<b>\$30,659.00</b>

The information contained herein is correct as at 02 Sep 2021

OK