





## 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	14/09/2021 12:09 (SGT)
Date of Accident	13/09/2021 12:15 (SGT)
Exact Location of Accident	Farrer Rd, Singapore
Additional Location Information	TOWARDS LORNIE ROAD BEFORE LEEDON HEIGHTS
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMW2354R
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHEAH YOW RUEY
NRIC No	SXXXX268G
Email Address	k.r.chin72@hotmail.sg
Mobile Phone No	(Phone) +65-90999947
Alternative Phone No	+65-98892988

#### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Vellfire
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	2494

#### INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	SD20V14550/VPC/R00
Cover Note Number	-

#### DRIVER

Name of Driver	CHIN KOON RUEY (CHEN JUNYUE)
NRIC No	SXXXX498E

Date Of Birth	05/11/1972
Occupation	Indoor
Date Of Driving Pass	23/07/1994
Driving experience	27 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98892988
Alt. Phone Number	-
Email Address	k.r.chin72@hotmail.sg
Address	51 HOLLAND GREEN
Address complement	-
Postcode	276171
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	AFTER RAIN
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?	No
Was any injured conveyed to hospital by ambulance?	-
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	CHIN LIK CHING
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

#### 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	FBN239G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle

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) .....	-



## 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

Witnessed by Reporting Centre Personnel

#### Sketch Plan




**Describe Circumstances of the Accident**

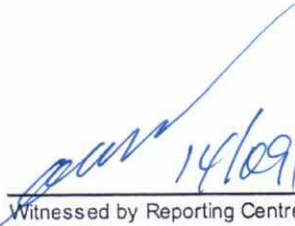
on the stated date and Time I was travelling along the stated location in my vehicle A. Suddenly I felt a impact to the rear of my vehicle. ~~was~~ when I Alighted to check I realised that I was involved in a accident, and that vehicle B FBN 2396 had collided into my rear portion with its front portion

**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

 14/09/2021  
Witnessed by Reporting Centre Personnel



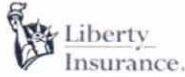
Date of Accident : 13/09/2021 Accident Time: 12:15 PM <sup>12</sup> (24-HR-Format)  
Accident Place : Farrer Rd towards Lorne Rd before Leedon Heights  
Vehicle. No. (Car Plate No.) : SMW 2354R Make/Model: toyota vellfire  
Insurance Company : Liberty Policy No: SD20VI4 550/VPC/R00  
Owner or Company Name /IC No. : cheah yow ling 57575 268G  
Owner or Company Contact No. : 90999947 Owner's Hp \_\_\_\_\_ Company Tel \_\_\_\_\_  
DRIVER'S Name / IC No. : CHIN KOON RUEY 87241498E  
DRIVER'S Date Of Birth : 05/11/1972 DRIVER'S License Pass Date 23/07/1994  
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: \_\_\_\_\_  
DRIVER'S Address : 51 Holland green 276171  
DRIVER'S Contact No./ Alt No. : 1) 98892988 2) \_\_\_\_\_  
DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)  
Email Address : K.R. chin72 @ Hotmail .sg -  
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET  
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance  
Number of Passengers (Including Driver): 2  
Was there any video Captured by car camera: YES \ NO  
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose  
Any Injury (If YES, Pls state): \_\_\_\_\_

Other Party Driver's Particular (if any)

Vehicle. No: <u>FBV 239 G</u>	Vehicle. No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

\* NEW - Passenger's name & gender:

① Chin lik Ching. Jerome -m  
M



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## 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; Road Transport (Amendment) Act 2019; The Motor Vehicles (Third Party Risks) Rules, 1959

<b>Name of Policyholder:</b>	<b>Certificate No.:</b>
CHEAH YOW LING	SD20V14550/ VPC / R00
<b>Date of Issue:</b>	<b>Effective Date of Commencement:</b>
12 Nov 2020	10 Nov 2020 00:00
<b>Registration No.:</b>	<b>Date of Expiry:</b>
SMW2354R	09 Nov 2021 23:59
<b>Chassis No.:</b>	<b>Type of Certificate:</b>
AGH300239029	MX1

**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.  
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.

**Limitations as to use:**

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

**The Policy does not cover:**

- A) Use for hire or reward.
- B) Use for racing, pace-making, reliability trials 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 Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 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.

For and on behalf of  
**LIBERTY INSURANCE PTE LTD**  
Approved Insurers

**For Information Only:**

<b>Coverage(s):</b>	Comprehensive, Unlimited Windscreen
<b>Sum Insured:</b>	MARKET VALUE AT THE TIME OF LOSS
<b>Excess:</b>	Section I - Named Drivers: S\$800, Section I - Unnamed Drivers: S\$1300, Additional Excess for Young, Elderly & Inexperienced Drivers: S\$3000, Windscreen Excess: S\$100
<b>Name of Finance Company:</b>	TOKYO CENTURY LEASING (S) PTE LTD
<b>Name of Producer:</b>	PRIME CARS CREDIT PTE LTD (A1410-2)

Liberty Insurance Pte Ltd (Registration No. 199002791D) | GST Registration No. M2-0063571-3  
51 Club Street #03-00 Liberty House Singapore 069426 | Tel. 1800-LIBERTY (542 3789)

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## Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	268G
Vehicle Details	
Vehicle No.:	SMW2354R
Vehicle to be Exported:	No
Intended Deregistration Date:	09 Oct 2021
Vehicle Make:	TOYOTA
Vehicle Model:	VELLFIRE 7-SEATER 2.5 ZG CVT
Primary Colour:	Black
Manufacturing Year:	2019
Engine No.:	2ARJ251409
Chassis No.:	AGH300239029
Maximum Power Output:	134.0 kW (179 bhp)
Open Market Value:	\$50,654.00
Original Registration Date:	10 Nov 2020
First Registration Date:	10 Nov 2020
Transfer Count:	0
Actual ARF Paid:	\$63,178.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	09 Nov 2030
PARF Rebate Amount:	\$47,383.00
Intended COE Rebate Details	
COE Expiry Date:	09 Nov 2030
COE Category:	E - Open - all except motorcycle
COE Period(Years):	10
QP Paid:	\$39,889.00
COE Rebate Amount:	\$36,232.00
<b>Total Rebate Amount:</b>	<b>\$83,615.00</b>

The information contained herein is correct as at 13 Sep 2021

OK