

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	20/09/2021 20:03 (SGT)
Date of Accident	18/09/2021 13:46 (SGT)
Exact Location of Accident	Cairnhill Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMH3877X
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	KOH BOON KAI ALAN
NRIC No	SXXXX944H
Email Address	min45@hotmail.com
Mobile Phone No	(Phone) +65-91878240
Alternative Phone No	+65-91814500

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Attrage
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	1193

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPCSNW00012802102
Cover Note Number	-

DRIVER

Name of Driver	LEE HUI MIN
NRIC No	SXXXX875G

Date Of Birth	21/03/1988
Occupation	Indoor
Date Of Driving Pass	15/06/2007
Driving experience	14 YEARS AND 3 MONTHS
Gender	Female
Mobile Number	(Phone) +65-91814500
Alt. Phone Number	-
Email Address	min45@hotmail.com
Address	BLK 489D CHOA CHU KANG AVENUE 5 #12-241
Address complement	-
Postcode	684489
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	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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	COLLEQUE
Gender	Female

PASSENGER 2

Name	COLLEQUE
Gender	Female

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	GBB5448A
Vehicle Manufacturer	Nissan

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	NG SOON HWEE
NRIC No	SXXXX051J
Contact Number	(Phone) +65-81624832
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' 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 & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

CARWILL ROAD

A) SMH 3877X
B) GBB 5448A



Traffic direction

Describe Circumstances of the Accident

I was on Cairnhill road on 18/09/2021 at about 13:46 pm. My car was on the slope downwards and I was waiting for the traffic light to turn green (my car was stationary at this point of time). Suddenly I felt a bang at the back of my car. The bonnet at the back rolled forward and hit the car in my car boot. The right side of the car boot was popped out. The other party vehicle did not show any obvious damage. No one was hurt during the incident.

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

ACCIDENT STATEMENT

ACCIDENT DATE: 18/09/2021 (DD/MM/YYYY), TIME: 13:46 (HH:MM)

LOCATION: Cairnhill Road

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SMH 387FX
 b) INSURANCE COMPANY: China Tai Ping
 c) POLICY NUMBER: DMPCSNW0012802102
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: Mitsubishi Attrage 1.20T
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: Leisure
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: Koh Boon Kai Alan (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S8234944H CONTACT: 91878240
 c) ADDRESS: 489D Choa Chu Kang Ave 5 #12-241
Singapore 684489

* CONTINUE TO 3. IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Lee Hui Min (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S8809875G CONTACT: 91814500
 c) ADDRESS: 489D Choa Chu Kang Ave 5 #12-241
Singapore 684489

* d) DATE OF BIRTH: 21/03/1988 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 15/06/2007

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Wife

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION:

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: GBB5448A MODEL: Nissan
 b) DRIVER'S NAME: Ng Soon Hwee
 c) NRIC/FIN/PASSPORT: S1211051T CONTACT: 81624832

9. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: _____ MODEL: _____
 b) DRIVER'S NAME: _____
 c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

Email: min45@hotmail.com
 VIDEO



Motor Private Car

MX1F

R SN

AN0509A

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.

DMPCSNW00012802102

Engine No.: 3A92UHK2750

Cha. No.:MMBSTA13AJH004462

1. Index Mark and Registration
Number of Vehicle

SMH3877X

2. Name of Policy Holder

KOH BOON KAI ALAN

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

21/01/2021
(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

20/01/2022

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.: STANDARD CHARTERED BANK(S) LIMITED AS HP OWNER

* 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: NITA PTE LTD
Authorised Officer

Authorised Signatory