

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	11/10/2021 11:52 (SGT)
Date of Accident	08/10/2021 15:30 (SGT)
Exact Location of Accident	Punggol Flyover, Singapore
Additional Location Information	TOWARDS TPE (CTE/SLE) AND JALAN KAYU
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKT5446D
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	NG CHEK HOU DANIEL
NRIC No	SXXXX223H
Email Address	aileen_daniel2002@hotmail.com
Mobile Phone No	(Phone) +65-96920320
Alternative Phone No	+65-96920320

VEHICLE PARTICULARS

Manufacturer	Volvo
Model	V40
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	1560

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPCSNW00119552103
Cover Note Number	-

DRIVER

Name of Driver	NG CHEK HOU DANIEL
NRIC No	SXXXX223H

Date Of Birth	16/10/1976
Occupation	Outdoor
Date Of Driving Pass	03/05/2013
Driving experience	8 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96920320
Alt. Phone Number	+65-96920320
Email Address	aileen_daniel2002@hotmail.com
Address	BLK 601C PUNGGOL CENTRAL #16-630
Address complement	-
Postcode	823601
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	Side Swipe
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
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	AILEEN
Gender	Female

PASSENGER 2

Name	KAYLEIGH
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	SLK9598H
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	NG CHEK HOU DANIEL
Gender	Male
Phone No	(Phone) +65-96920320
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SKT5446D
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:

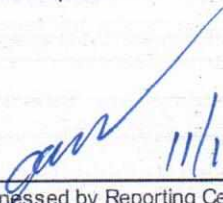
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (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

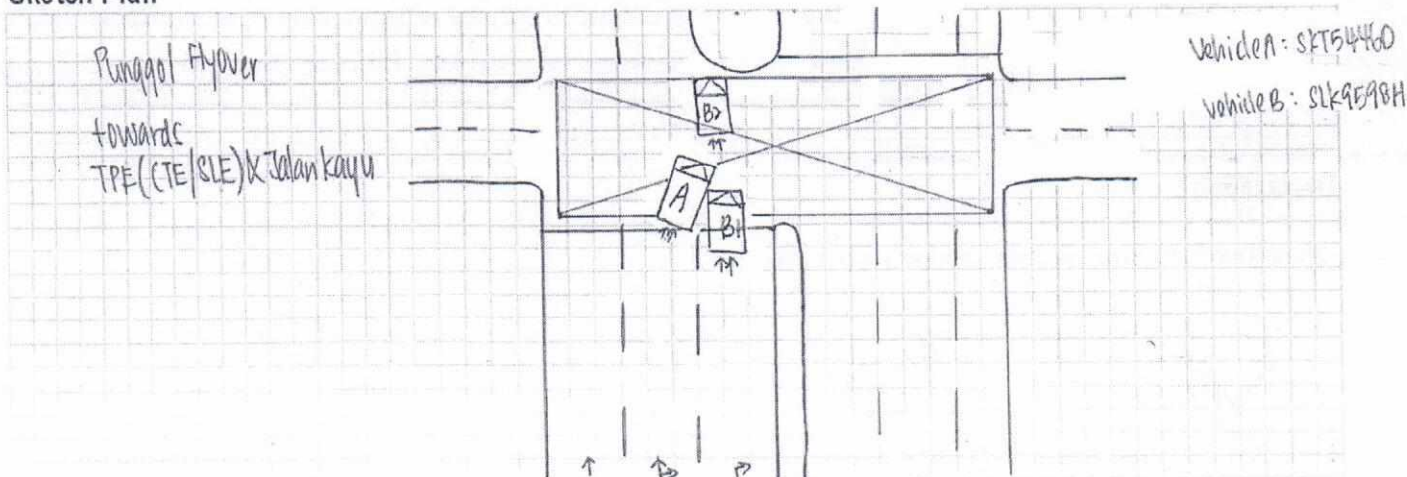
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


Policyholder's Signature / Date & Time


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


Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

On the stated date & time, I, vehicle A (SKT5446D) was travelling at the stated location on Lane 2. As the traffic light was green, I proceed to turn right. Out of sudden, vehicle B (SLK959BH) from Lane 1 collided onto the right portion of my vehicle as vehicle B (SLK959BH) was travelling straight when the lane was a right turn only.

Declaration

We declare the foregoing particulars are true in every respect.

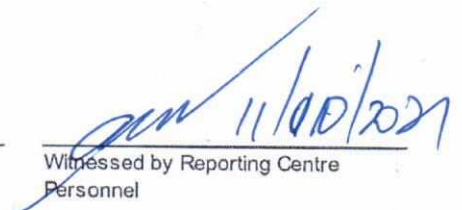


Policyholder's Signature / Date & Time



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

Witnessed by Reporting Centre Personnel

 11/10/2021

SWG

Date of Accident : 8/10/2021 Accident Time: 1530hrs (24-HR-FORMAT)
 Accident Place : Punggol Flyover towards TPE (CTE/SLE) & Jalan Kayu
 Vehicle Reg. No (Car plate No.) : SKT 5446D Vehicle Make/Model: Nolvo V40 D3
 Insurance Company : China Taiping Policy No. DMP1 SNW00119552103
 Name of Registered Owner : Company / Individual Ng Chek Hou Daniel
 ID of Registered Owner : Co Reg No: - Owner's NRIC No: S7636223H
 : Co Contact No: - Owner's Contact No: 96920320
 DRIVER'S Name : Ng Chek Hou Daniel DRIVER'S NRIC No: S7636223H
 DRIVER'S Date of Birth : 16 Oct 1976 DRIVER'S License Pass Date 03 May 2013
 Relationship bet. Owner & Driver : Spouse / Parents / Children / Sibling / Employee / Others : owner
 DRIVER'S Address : MT BIK 601C Punggol Central #16-b36 Singapore 833601
 DRIVER'S Contact No / Alt No. : 1) 96920320 2) -
 DRIVER'S Occupation : INDOOR / OUTDOOR (eg. working inside or outside of an org)
 Email Address : aileen_daniel2002@hotmail.com
 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): 03 Passenger Name: Aileen Gender: M/F
 Was the accident reported to the police? YES / NO Passenger Name: Kayleigh Gender: M/F
 Was there any video Captured by car camera: YES / NO Any Injuries: YES / NO Injured Name: Ng Chek Hou Daniel
 Injured Name: -
 Exact purpose for which vehicle was being used at the time of accident: Private use / Work purpose

Other Party Driver's Particulars (if any)

Vehicle Reg No: SLK 9598H
 Vehicle Make/Model: -
 Name DRIVER: -
 IC No DRIVER: -
 DRIVER'S Contact & add: -

Vehicle Reg No: -
 Vehicle Make/Model: -
 Name DRIVER: -
 IC No DRIVER: -
 DRIVER'S Contact & add: -

Other Party Driver's Particulars (if any)

Vehicle Reg No: -
 Vehicle Make/Model: -
 Name DRIVER: -
 IC No DRIVER: -
 DRIVER'S Contact & add: -

Vehicle Reg No: -
 Vehicle Make/Model: -
 Name DRIVER: -
 IC No DRIVER: -
 DRIVER'S Contact & add: -



中国太平
CHINA TAIPING

中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Private Car

MX1E

R SN

AN0006A

Cov. Type: C

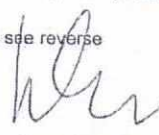
CERTIFICATE OF INSURANCE

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.	DMPCSNW00119552103	Engine No.: D4162T3286355
		Cha. No.: YV1MV845BF2247897
1. Index Mark and Registration Number of Vehicle	SKT5446D	AUTOSAFE *****
2. Name of Policy Holder	NG CHEK HOU DANIEL	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	15/06/2021 (00:00:00)	Named Drivers Ex Sect. I S\$500.00
4. Date of Expiry of Insurance	14/08/2022	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
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\$1,000 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. : DAIMLER FINANCIAL SVCS AFRICA & ASIA PACIFIC LTD 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.		

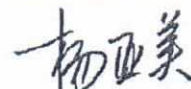
I/We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

Issued By: 
ALFA CREDIT PTE LTD
Authorised Officer



For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.



Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)
3 Anson Road #16-00 Springleaf Tower Singapore 079909

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☎ 6222 1033

🌐 www.sg.cntaiping.com