Lunin Sum / LBJ: (3)

ST0J21AC0002 / TAN LIM MOTOR PTE LTD ENTRY DATE & TIME: 12/10/2021 16:16 (SGT) SUBMITTED BY: William Lam VERSION: 1 (12/10/2021 16:16 (SGT))

# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- 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 Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

12/10/2021 16:16 (SGT) 11/10/2021 17:33 (SGT) Near Cold Storage Jelita, Singapore Holland Road after Jalan Jelita Singapore

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SDH6699E

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No

**Email Address** 

Mobile Phone No

Alternative Phone No

No

Wong Cheun Yue, Marcus

S85255471

marcus.wcy@gmail.com

(Phone) +65-90042400

+65-90042400

VEHICLE PARTICULARS

Manufacturer

Model

Variant

Exact purpose for which vehicle was being used at time of

accident

Are you claiming under your own insurance policy for repair to

your vehicle?

Vehicle Category

Transmission

CC

Mercedes

E300

AMG Coupe

Private use

No - Claiming third party

Private car

Auto

1991

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage

Fleet Policy

Policy Number

Cover Note Number

Allianz Insurance Singapore Pte. Ltd.

Comprehensive

No

SP2000384993-01

DRIVER

Name of Driver

Wong Cheun Yue, Marcus S85255471

Accident report ST0J21AC0002

Page 1 of 15

08/09/1985 Date Of Birth Occupation Indoor 26/10/2015 Date Of Driving Pass Driving experience 6 YEARS Gender Male (Phone) +65-90042400 Mobile Number +65-90042400 Alt. Phone Number marcus.wcy@gmail.com **Email Address** 20 Tanah Merah Kechil Link Address #08-39 Address complement 465426 Postcode 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 Clear Dry Road Surface OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 3 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) Has the driver been approached by unknown person(s) No soliciting/offering accident claims assistance? DETAILS OF POLICE ACTION

Was the accident reported to the police?

Was notice of intended Prosecution given?

No
If yes, against whom?

#### CIRCUMSTANCES OF ACCIDENT

#### Refer to sketch plan

#### ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

No
Was there any audio recorded?

No

# DETAILS OF OTHER VEHICLE PROPERTY 1

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 SGD4721Y 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 Wong Cheun Yue, Marcus Gender Male (Phone) +65-90042400 Phone No Address Address Complement Post Code Approximate Age Years Old Back and neck pain Injuries Sustained SDH6699E Injured person in which vehicle? Yes Were seat belts worn? Was this injured conveyed to hospital by ambulance? No

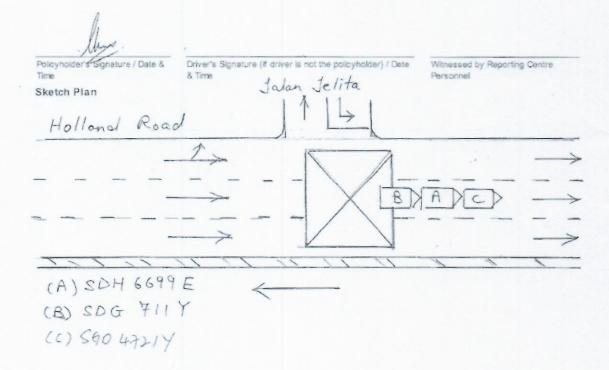
#### SKETCH PLAN

#### 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.
- 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.
- 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.
- 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)

Lunderstand, 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;
- (ii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (iv) administering my claims (including the malling 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.



	nces of the Accident
	12021 at about 1732 hrs at along Holland Road
after Jalo	n Jelita. I was travelling on the centre hane
and when	my front vehicle slow down and stop due
to heavy	traffic hence I tollow cuit and came to a
	halt. Moment later, I felt a great impact
from the	Rear and the great impact forced my Vehicle (
forward a	to hit outo the Rear Portion of Whiche (C).
	alighted, I realised that it was Vehicle (B)
who hit	outo my Rear Portion of my Vehicle (A)
	damages to my vehicle. (10tal 3 vehicles
involved	in this Chain Collision.
C F	1) SDH 6699 E
CC	3) SDG 711 Y
(0	SGD 4721 / ( )
/	
lote: Please note the	at your insurer may have 14 days time frame for you to submit an Own Damage Claim under your
	sive policy. Please check your policy for more information.

#### 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

#### > Back to OneMotoring

**Enquire PARF/COE Rebate for Registered Vehicle** 

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	5471
Vehicle No.:	SDH6699E
Vehicle to be Exported:	No
Intended Deregistration Date:	13 Oct 2021
Vehicle Make:	MERCEDES BENZ
Vehicle Model:	E300 AMG COUPE AUTO
Primary Colour:	Black
Manufacturing Year:	2018
Engine No.:	27492031424468
Chassis No.:	WDD2383482F053999
Maximum Power Output:	180.0 kW (241 bhp)
Open Market Value:	\$60,624.00
Original Registration Date:	27 Jun 2018
First Registration Date:	27 Jun 2018
Transfer Count:	1
Actual ARF Paid: Intended PARF Rebate Details	\$81,124.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	26 Jun 2028
PARF Rebate Amount: Intended COE Rebate Details	\$60,843.00
COE Expiry Date:	26 Jun 2028
COE Category:	E - Open - all except motorcycle
COE Period(Years):	10
QP Paid:	\$38,600.00
COE Rebate Amount:	\$25,806.00
Total Rebate Amount:	\$86,649.00
The information contained baroin is correct as at 13 Oct 2021	

The information contained herein is correct as at 13 Oct 2021

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Depreciation

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