SS1Y21AC0008 / SME MOTOR PTE LTD ENTRY DATE & TIME: 12/10/2021 15:20 (SGT) SUBMITTED BY: Chia Pei Ying VERSION: 1 (12/10/2021 15:20 (SGT))

# **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 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 12/10/2021 15:20 (SGT) Date of Accident 09/10/2021 13:30 (SGT) Exact Location of Accident 2 Jln Grisek, Singapore 419488 Additional Location Information Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SKI 7777

#### INSURED/POLICYHOLDER

Is company? No

Name Of Registered Owner SIM KOK LIANG NRIC No S7806422F

Email Address hulksim78@yahoo.com.sg Mobile Phone No (Phone) +65-96682679

Alternative Phone No +65-96682679

#### VEHICLE PARTICULARS

Manufacturer Toyota Model Camry 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 Private car Transmission

Private use

No - Claiming third party

Auto 2500

## **INSURANCE COMPANY**

Name of Insurance Company HL Assurance Pte Ltd Type of Coverage Comprehensive Fleet Policy Policy Number MP312016 Cover Note Number

## DRIVER

Name of Driver SIM KOK LIANG S7806422F

Date Of Birth 04/03/1978 Occupation Indoor Date Of Driving Pass 19/11/1996 Driving experience 24 YEARS AND 11 MONTHS Gender Mobile Number (Phone) +65-96682679 Alt. Phone Number +65-96682679 Email Address hulksim78@yahoo.com.sg Address 2 JALAN GRISEK Address complement Postcode 419488 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 Hit and run / Vandalism / Damaged whilst parked Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No DETAILS OF POLICE ACTION Was the accident reported to the police? Yes Police Station Name **Bedok Division Headquarters** Police Station Phone No (Phone) +65-18002440000 Alt. Police Station Phone No (Fax) +65-64443009 Police Station Address 30 Bedok North Road Singapore 469676 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT: G/20211011/7124. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Nο Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SLJ9943A Vehicle Manufacturer Vehicle Model Vehicle Variant

Private car

Vehicle Colour
Vehicle Category

Name of Driver	-
Contact Number	_
Address	_
Address complement	_
Postcode	-
Insurance Company Name	_
Nature Of Damage	_
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	_

#### SKETCH PLAN

### IMPORTANT NOTICE

- Please report <u>correctly</u> 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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 lodgment 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:
  - 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

(ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time: 12/10/21. Don

Driver's Signature

(If driver is not the policyholder)

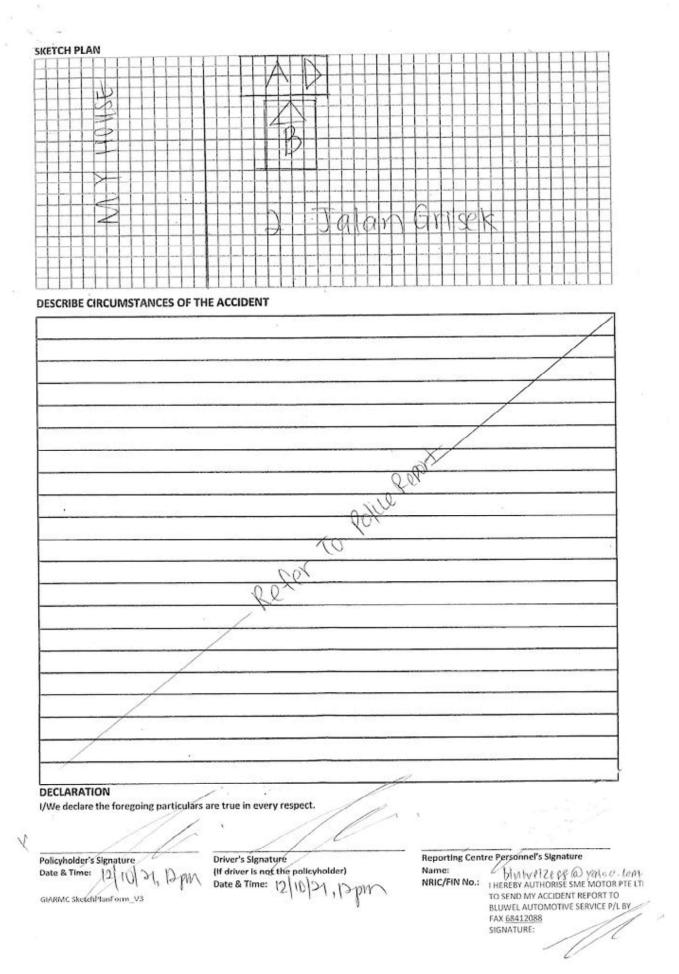
Date & Time: 1)

NRIC/FIN No.:

Name:

Reporting Centre Personnel's Signature

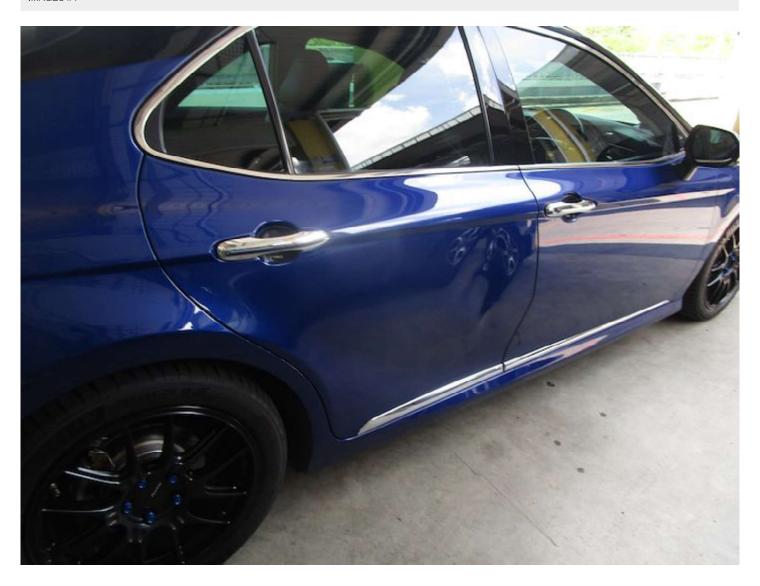
GIARMC SzerchPlanForm V3















# G/20211011/7124

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Report No. G/20211011/7124

# POLICE REPORT (NP299)

Police Station Of Origin Bedok Division HQ 30 Bedok North Road SINGAPORE 469676 Tel No:1800-2440000

Date/Time Report Made	Vide Report No.		Station Diary No	
11/10/2021 21:39				
Name Of Informant	Address			
SIM KOK LIANG	2 JALAN GRISEK SINGAPORE 419488			
ID Type / ID No.	Contact	No.		
NRIC NO / S7806422F	Home/C	Office:	Mobile:	
			96682679	
Nationality	Email Address			
SINGAPORE CITIZEN	hulksim78@yahoo.com.sg			
Occupation	Sex	Age	Date of Birth	Race
Sales and marketing manager	Male	43	04/03/1978	Chinese
Institution/School Name	Language			
	English			
Date/Time Of Incident	Location Of Incident			
09/10/2021 13:30 - 11/10/2021 11:35	2 JALAN GRISEK SINGAPORE 419488			
Brief details.				

I park my car SKL777Z outside my house gate on Saturday 9th Oct 2021 at 1:30pm and cover it for dust and heat protection with a grey car cover. Today Monday 11th Oct at 11:35am I uncover my grey car cover only to realised that there is a big dent and 2 other small dent and minor scratch is observed. I suspect it is a hit and run by another car or bicycle. I am sadden by this incident and have to spent the whole afternoon looking thru the CCTV recording until 9pm today and finally I find the vehicle that hit my car. I manage to take photos and recordings of the incident. The vehicle that hit my car was a white mitsubishi Outlander with sunroof and black rims and the carplate number is SLJ9943A. He hit my car

and drove away immediately this morning at 10:29am. How can he hit and run away. Please help me and

Signature Of Officer Recording The Report:	Signature Of Informant:
Not applicable	The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 11/10/2021 21:39
Officer In-Charge Of Case:	Classification Of Case:

This report is lodged at Bedok South NPC Kiosk 1





2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20211011/7124

advise me what I can do. Thank you very much.

Victim				
Person Name	SIM KOK LIANG			
ID Type	NRIC NO	ID No	S7806422F	
Gender	Male	Age	43	
Race	Chinese	Language	English	
Occupation	Sales and marketing manager	Address	2 JALAN GRISEK SINGAPORE 419488	
Mobile No	96682679	Is Informant A Victim?	Yes	
Person Name	SIM KOK LIANG (Informant)	TV IOUIT.		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 11/10/2021 21:39
Officer In-Charge Of Case:	Classification Of Case:
This report is lodged at Bedok South NPC Kiosk 1	



## CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1996
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Form

CERTIFICATE NUMBER : MP312016

Type of Coverage

: Comprehensive

Own Damage Excess

:SGD750.00

Sum Insured

: Market Value

Windscreen Excess

:SGD100.00

Index Mark and Registration Number of Vehicle

Chassis Number of Vehicle

SKL777Z

AXVH701034877

2. Name of Policyholder

SIM, KOK LIANG

3. Effective date of the Commencement of Insurance for the purposes of the Act

01 Mar 2021

4. Date of Expiry of Insurance

28 Feb 2022

Persons or Classes of Persons entitled to drive\*

01. SIM, KOK LIANG

02. LIM, KHANG PENG

03. N/A 05. N/A

04. N/A 06. N/A

(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 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.

Limitations as to use\*

Use only for social domestic and pleasure purposes and for the Policyholder's business or profession. The Policy does not cover use for hire or reward, 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.

\*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.

Please note that the Own Damage Excess will be halved if claims related repairs are done at HL Assurance Approved Workshops listed in the attached.

This Certificate is not transferable to a new owner of the Motor Vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to HL Assurance Pte. Ltd. Within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

Hire Purchase Company

MAYBANK SINGAPORE LIMITED

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) or any Amendment, Act or Acts passed in substitution thereof.

HL ASSURANCE PTE, LTD.

Issue on: 17 Feb 2021

**Authorized Signature** 

If Keppel Road, without ARI Plana. Singlepose 989057, Tel. 65 6702 9202. Eax 65 6922 6002, annot assistative to the second of th

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