

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 15/12/2021 16:28 (SGT) Date of Accident 11/12/2021 14:50 (SGT) Exact Location of Accident TPE, Singapore Additional Location Information SLIP ROAD TOWARDS TAMPINES AVE 10 FROM TPE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMC9425D

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner LEE MENG GUAN, BERNIE NRIC No SXXXX135G **Email Address** BERNIE-LEE@LIVE.COM.SG Mobile Phone No (Phone) +65-84480989 Alternative Phone No (Home) +65-84480989

VEHICLE PARTICULARS

Manufacturer Kia Model Forte 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?

Vehicle Category Transmission

CC

No - Claiming third party

Private car Auto

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd Type of Coverage Comprehensive Fleet Policy No Policy Number 5102674489-03 Cover Note Number

DRIVER

Name of Driver NRIC No

LEE MENG GUAN, BERNIE SXXXX135G

Date Of Birth19/05/1987OccupationIndoorDate Of Driving Pass05/01/2012

Driving experience 9 YEARS AND 11 MONTHS

Gender

 Mobile Number
 (Phone) +65-84480989

 Alt. Phone Number
 (Home) +65-84480989

 Email Address
 BERNIE-LEE@LIVE.COM.SG

Address APT BLK 612A TAMPINES NORTH DRIVE 1 #15-242

Male

Address complement

Postcode 521612
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 Collision - Head to Rear

Weather Conditions Raining
Road Surface Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?

No
Number of vehicles involved in the accident

Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other vehicle or property damaged?

Yes

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?

PASSENGER 1

Name ISABELLA ONG CHIA SI

Gender Female

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 ATTACHED

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKB1218S
Vehicle Manufacturer -

Vehicle Model
Vehicle Variant

Vehicle Colour -

Vehicle Category Private car

Page 2 of 14

Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
nsurance 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)

funderstand, 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 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 Signature / Date 8

Time

Driver's Signature (# driver shot the policyholder) / Date

8 Time

Witnessed by Reporting Centre

Personnel

SMC94250

3KB12185

Sketch Plan

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Declaration

IVWe declare the foregoing particulars are true in every respect

Driver's Signature (M'driver is not the policyholder) / Date 8. Time

Witnessed by Reporting Centre



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)

ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5102674489-03

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle

: SMC9425D

Chassis Number

: KNAFZ411MF5523668

2. Name of Policyholder

: LEE MENG GUAN, BERNIE

3. Effective Date of Insurance

: 14 Oct 2021

4. Expiry Date of Insurance

: 13 Oct 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/her 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#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial 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 Vehicle (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

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)

: S\$600

EXCESS (SECTION 2)

: N/A

WINDSCREEN EXCESS

: S\$100

ADDITIONAL EXCESS

: N/A

UNNAMED DRIVER EXCESS

: PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP

: NO

INSURE WITH COE

: YES

NCD PROTECTION

: YES (FREE)

ROADSIDE ASSISTANCE AND WELLNESS COVER

: NO

TRANSPORT ALLOWANCE

: NO

EXCESS WAIVER

: NO

PRIMARY DRIVER

: LEE MENG GUAN BERNIE

NAMED DRIVER (1)

: N/A

NAMED DRIVER (2)

: N/A

HIRE PURCHASE COMPANY

: MAYBANK SINGAPORE LIMITED

SUM INSURED

: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

: VOUCH INSURTECH PTE. LTD. (00000615378)

Date of Issue

: 13 Oct 2021 09:44 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive