

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 03/01/2022 13:58 (SGT)
Date of Accident 31/12/2021 01:20 (SGT)
Exact Location of Accident 4 Marine Terrace, Block 4, Singapore 440004
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMT2361K

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner LENA ONG LI YI
NRIC No S7408365Z
Email Address lena1203@gmail.com
Mobile Phone No (Phone) +65-93685598
Alternative Phone No +65-93685598

VEHICLE PARTICULARS

Manufacturer Nissan
Model Note
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 1200

INSURANCE COMPANY

Name of Insurance Company ERGO Insurance Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMPG21006611
Cover Note Number -

DRIVER

Name of Driver LENA ONG LI YI
NRIC No S7408365Z

Date Of Birth	12/03/1974
Occupation	Indoor
Date Of Driving Pass	18/02/1995
Driving experience	26 YEARS AND 10 MONTHS
Gender	Female
Mobile Number	(Phone) +65-93685598
Alt. Phone Number	+65-93685598
Email Address	lena1203@gmail.com
Address	BLK 4 MARINE TERRACE #12-310
Address complement	-
Postcode	440004
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	Raining
Road Surface	Wet

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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	0
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

AS PER ABOVE DATE AND TIME, MY VEHICLE WAS PARKED IN FRONT OF MY RESIDENTIAL ADDRESS BLK 4 MARINE TERRACE. AROUND MORNING AT 10AM, THE OWNER OF (EV1223S) KNOCKED ON MY RESIDENTIAL DOOR INFORMING ME THAT WHILE SHE WAS REVERSING HER VEHICLE, SHE KNOCKED ONTO VEHICLE C (SLX2170K) WHICH WAS ALSO IN STATIONARY PARKED POSITION RIGHT FRONT PORTION. DUE TO THE IMPACT, VEHICLE C SHIFTED AND KNOCKED ONTO MY VEHICLE (SMT2361K) FRONT RIGHT PORTION. SHE ALSO LEFT A NOTE FOR ME THAT SHE KNOCKED ONTO VEHICLE C AND DUE TO IMPACT, VEHICLE C KNOCKED ONTO MY VEHICLE.

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	EV1223S
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

Name of Driver	NG HWEE LANG
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLX2170K
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	VEHICLE C
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")

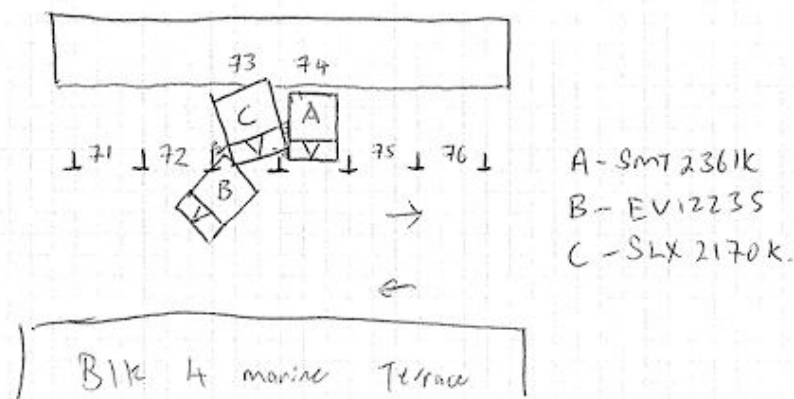
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law yers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the 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.

[Signature]
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



NSI

Describe Circumstances of the Accident

As per above date and time, my vehicle was parked in front of my residential address Bdr H marine Terrace. Around morning 1000 hrs, the owner of EV12233 knocked on my residential door informing me that while she was reversing her vehicle she knocked onto veh(c) SLX2170K which was also in stationary parked position right front portion. Due to the impact veh(c) shifted and knocked onto my vehicle SMT2361K right front portion. She also left a note for me that she knocked onto veh(c) and due to impact veh(c) knocked onto my vehicle.

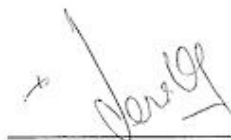
Veh A - SMT2361K

Veh B - EV12233

Veh C - SLX2170K.

Declaration

I/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















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)
 ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)

Certificate/Policy Number	:	DMPG21006611		
Vehicle Registration Number	:	SMT2361K		
Cover Type	:	Superior Comprehensive		
Policy Type	:	Private Car		
Name of Policyholder/Insured	:	LENA ONG LI YI		
Commencement Date of Insurance	:	30/06/2021		
Expiry Date of Insurance	:	29/06/2022		
Excess	:	EXCESS: (SECTION I).....	SS	500.00
		ADD'L EXCESS: UNNAMED DRIVERS (SECTION I)...	SS	500.00
		ADD'L EXCESS: NON-AUTH WORKSHOPS (SECTION I)	SS	300.00
		EXCESS: WINDSCREEN	SS	100.00
		YOUNG & INEXP DRIVERS (SECTION I)	SS	3,000.00

24-Hour Motor Accident Reporting
and Assistance Helpline

6333 2222

www.ergo.com.sg

Finance Company/Hire Purchase Owner : UNITED OVERSEAS BANK LTD

*Persons or Classes of Persons entitled to drive:

1. The Policyholder
2. DIGN NICOLE SEOW (XIAO JING YING)
3. Any Person who is driving on the Policyholder's order or 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

* Limitations as to Use:

- 1) Use only for social domestic and pleasure purposes
- 2) Use for Policyholder's business

This Policy does not cover

- 1) Use for hire or reward, racing, pace-making, reliability trial or speed-testing and on race track
- 2) Use for the carriage of goods other than samples in connection with any trade or business
- 3) 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 (*).

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), the Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia), Part IV of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019 (Malaysia).

For and on behalf of **ERGO Insurance Pte. Ltd.**

Approved Insurer

Karl-Heinz Jung

Authorized Signature

A100027	G & C GENERAL INSURANCE AGENCY	Contact Number: 63468832
Vehicle Chassis Number : JN1TBAE12Z0982584, Vehicle Engine Number : HR12195920B		PC1, 28/05/2021 12:05

ERGO Insurance Pte. Ltd. Co. Reg. No.: 199305211H GST Reg. No.: M2-0116930-5
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