

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 14:25 (SGT)
Date of Accident 31/12/2021 17:30 (SGT)
Exact Location of Accident Singapore
Additional Location Information WOODLAND MRT STATION PICK UP/DROP OFF POINT
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLE6619H

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner ANG POH ENG
NRIC No S1635865G
Email Address ANGPOHENG1234@GMAIL.COM
Mobile Phone No (Phone) +65-97598492
Alternative Phone No +65-91259237

VEHICLE PARTICULARS

Manufacturer Honda
Model VEZEL 1.5X CVT ABS D/AIRBAG 2WD 5DR
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? Yes
Vehicle Category Private car
Transmission Auto
CC 1496

INSURANCE COMPANY

Name of Insurance Company India International Insurance Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number D18MPC0000586_03
Cover Note Number 28/07/2021 - 27/07/2022

DRIVER

Name of Driver EUGENE ANG CHONG YI
NRIC No S9034342D

Date Of Birth	26/09/1990
Occupation	Indoor
Date Of Driving Pass	18/05/2015
Driving experience	6 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91259237
Alt. Phone Number	-
Email Address	ANGPOHENG1234@GMAIL.COM
Address	BLK 124C RIVERVALE DRIVE #16-219
Address complement	-
Postcode	543124
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
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 - Change/cross lane
Weather Conditions	DRIZZLING
Road Surface	Wet

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?	No
Was any injured conveyed to hospital by ambulance?	-
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?	No

PASSENGER 1

Name	EILEEN LIM
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

REFER TO THE ATTACHED SKETCH PLAN BY DRIVER.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No

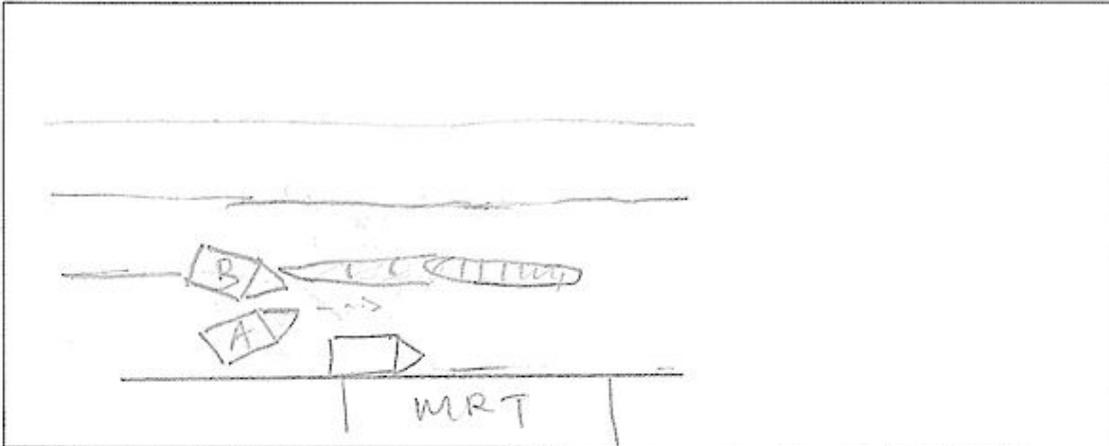
DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJR319T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private hire

Name of Driver	NI TECK MING
NRIC No	S1689348Z
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

Date of accident: 31 Dec 2021 Time: 17:30 Location: Woodland MRT station Pickup/dropoff point
 My Vehicle A: SLE6619H Vehicle B: SJR319T Vehicle C: _____

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

After pickup my friend I have signal to turn out and slowly urge out but car B did not notice my signal and cut into my lane and bang into my front left.

Veh B: Ni Teck Meng / 516893482

Claim OD/TP at Ah Lim Motor Claim OD/TP at other workshop Reporting Only

Remarks : Please forward a copy of my efile accident report to :
 My workshop : _____
 Email address : _____
 & myself : _____
 Email address : _____

Note : Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

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: _____


 Reporting Centre Personnel's Signature
 Name: _____
 NRIC/FIN No.: _____

AH LIM MOTOR COMPANY

SKETCH PLAN

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7. 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 :
 - (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.
- (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:
 - (i) 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:

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

 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:







































INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 190704792E | GST Reg. No. M2-0070806-A
 64 Cecil Street | #04 | #05 | #06 | 02 | 1104 Building | Singapore 069533
 Office: (65) 63476100 Email: insure@iia.com.sg
 Fax: (65) 62234174 Website: www.iia.com.sg

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1969 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

CERTIFICATE NO.: D18MPC0000586_03		COVER: COMPREHENSIVE
1. Index Mark and Registration Number of Vehicle	: SLE6619H	
Chassis No	: RU11115274	
2. Name of Policyholder	: ANG POH ENG	
3. Effective date of Insurance	: 28 Jul 2021	
4. Expiry date of Insurance	: 27 Jul 2022	
5. Persons or Classes of Persons entitled to drive*		
(a) The Policyholder	The Policyholder may also drive a Motor Car not belonging to or hired (under a hire purchase agreement or otherwise) to him/her or his/her employer or his/her partner.	
(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*	Use only for social, domestic and pleasure purposes and for the Policyholder's business.	
	The Policy does not cover	
a)	Use for hire or reward.	
b)	Use for racing, pace-making, reliability trial, 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 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.	
Insured & Named Drivers Excess Sect 1	: SGD600.00	
Unnamed Drivers Excess Sect 1	: SGD1,100.00	
Windscreen Excess	: SGD100.00	
Hire Purchase Company	: DBS Bank Ltd	
FOR DRIVERS BELOW 21 YEARS OR ABOVE 69 YEARS OF AGE &/OR LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, ADDITIONAL EXCESS OF S\$2500/- ON SECTION I WILL BE APPLICABLE.		
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).		
Agent/Broker	: A000047/SINCL PTE LTD	
Date of Issue	: 01/07/2021 10:13:55	
MXI-Private Car (Insured Driving)		
		For India International Insurance Pte Ltd Authorised Signatory



INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 190703792L | GST Reg. No. M2-007006-A
 64 Cecil Street | #04 | #05 | #06-02 | IOB Building | Singapore 029211
 Office (65) 63376100 Email: insura@ii.com.sg
 Fax: (65) 62244174 Website: www.ii.com.sg

THE SCHEDULE

Agency : SINCL PTE LTD/A000047
 Policy Number : D18MPC0000586_03
 Issued on : 01 Jul 2021 in Singapore (SIF)
 Type of Policy : Private Car - Own Use

Period of Insurance : 28 Jul 2021 to 27 Jul 2022 both dates inclusive
 Insured's Name : ANG POH ENG
 Address : 124C RIVERVALE DRIVE
 #16-219
 SINGAPORE
 543124

Premium
 After 50.00% No Claim
 Discount & OFD : SGD 1,339.53
 7% GST : SGD 93.77
 Total Premium Due : SGD 1,433.30

PRIVATE CAR

Registration : SLE6619H
 Type of Cover : COMPREHENSIVE
 Make/Model : HONDA/VEZEL 1.5 (EXCLUDE HYBRID)
 Body Type : SUV
 Capacity cc's : 1496.00
 Seating Capacity : 5
 Year of Manufacture : 2016
 Engine No. : L15B4035280
 Chassis No. : RU11115274
 Named Drivers : ANG POH ENG
 EUGENE ANG CHONG YI
 ANG CHONG HUAI JOEY
 Hire Purchase : DBS Bank Ltd

Insured & Named Drivers Excess Sect I : SGD600.00
 Unnamed Drivers Excess Sect I : SGD1,100.00
 Windscreen Excess : SGD100.00

SUM INSURED: MARKET VALUE AT TIME OF LOSS

The following clauses and endorsements apply to this vehicle:

Endorsements Applicable PASSENGER RISK
 M1,M2,M3A,M6,M7,M8,M11,M12,M19,M20,M21 & MEMO 1
 25(SRCC),57(FLOOD),72(B),WAR & TERRORISM EXCLUSION ENDT,
 CONDITION 5 OF THE POLICY IS REVISED AS PER THE ATTACHED
 AMENDED CONDITION 5 ENDT,NOTIFICATION CLAUSE.
 WINDSCREEN UNLIMITED

FOR DRIVERS BELOW 21 YEARS OR ABOVE 69 YEARS OF AGE &/OR LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, ADDITIONAL EXCESS OF \$2500/- ON SECTION I WILL BE APPLICABLE.