

☐ Scene Pic
☐ Auth Letter

☐ Owner
☐ Driver

ACCIDENT STATEMENT

Date of Accident 12/02/2022 Time (24 HRS) 12:40 Location of Accident Slip Road From CTE to PIE Bef Upper Serangoon Exit

OWNER/ POLICY HOLDER (VEHICLE A) - CLIENT INFORMATION

Vehicle Registration Number SMG7221S
Name of Policyholder BOK JIA-YUN
NRIC/ FIN/ Passport/ ROC (if Policyholder is company) S8226986Z
Address APT BLK 450A SENGKANG WEST WAY #06-335, S
Address
Contact Number Tel: Hp: 8118 7958
Email Address JOANN.BOK@GMAIL.COM

VEHICLE PARTICULARS (VEHICLE A)

Vehicle Make / Model BMW X1
Type of Vehicle SUV
Are you claiming under your own insurance policy? ☐ Yes ☒ No Remarks:
Vehicle category ☐ Private Hire ☒ Private ☐ Commercial ☐ Motorcycle

INSURANCE COMPANY (VEHICLE A)

Name of Insurance Company
Type of Policy ☒ Comprehensive ☐ TP Fire & Theft ☐ Third party
Fleet Policy ☐ Yes ☒ No
Policy Number

DRIVER

PLS SKIP THIS SECTION IF OWNER IS DRIVER

Name of Driver BOK JIA-YUN
NRIC/ FIN/ Passport S8226986Z
Date of Birth 07-09-1982
Occupation Marketing Manager
Driving Pass Date 28-09-2017
Gender ☐ Male ☒ Female
Contact Number Tel: Hp: 8118 7958
Address APT BLK 450A SENGKANG WEST WAY #06-335, S
Address
Email Address JOANN.BOK@GMAIL.COM
Was driver an employee of the Insured's Company? ☐ Yes ☒ No
If No, relationship of Driver with the Insured
No. of Passenger in vehicle (including Driver) 1 (including Driver)
Please state Passenger Names: Name: Gender: Female
Name: Gender: Female
Name: Gender: Female

Vehicle Number of Driver's Own Vehicle (if applicable)

Insurance of Driver's Own Vehicle (if applicable)

SMG7221S
ERGO

GENERAL INFORMATION OF THE ACCIDENT

Weather Conditions ☒ Clear ☐ Raining ☐ Others:
Road Surface ☐ Wet ☒ Dry ☐ Others:

OTHER INFORMATION

Was there any foreign vehicle(s) involved? (Malaysia car) ☒ No ☐ Yes
Was anybody injured in the accident? (Including Witness) ☒ No ☐ Yes Ambulance (No)
Was any other vehicle(s) or property damaged? ☐ No ☒ Yes
Was there any video captured? (in-car camera in YOUR CAR) ☒ No ☐ Yes

DETAILS OF POLICE ACTION

Was the accident reported to the Police? ☒ No ☐ Yes
If Yes, please state which police station.
Was notice of intended Prosecution given? ☒ No ☐ Yes
If Yes, against whom?

OWN VEHICLE REGISTRATION NUMBER

SMG7221S

DETAILS OF OTHER VEHICLES OR PROPERTY DAMAGED (OTHER PARTY INFORMATION)

Other Vehicle or Property 1 (VEHICLE B) - OTHER PARTY INFORMATION

Vehicle Registration Number

SNA9991J

Make/ Model/ Others

BMW

216I

Vehicle category

☒

Private

☐

Commercial

☐

Motorcycle

Name of Driver

TANG QIU QWN TRIVIEN

NRIC/ FIN/ Passport

S9820947F

Contact Number

97127290

Other Vehicle or Property 2 (VEHICLE C)

Vehicle Registration Number

SMD9069T

Make/ Model/ Others

HONDA

HRV 1.5 DX CVT

Vehicle category

☐

Private

☐

Commercial

☐

Motorcycle

Name of Driver

NRIC/ FIN/ Passport

Contact Number

DETAILS OF WITNESS

Name

Phone / Email Address

DETAILS OF INJURED PERSON 1

Name

Contact Number

Injuries Sustained

If Vehicle Occupants, state in which vehicle?

Were Seat Belts Worn?

☐

Yes

☐

No

Was Injured conveyed to hospital by ambulance?

☐

Yes

☐

No

DETAILS OF INJURED PERSON 2

Name

Contact Number

Injuries Sustained

If Vehicle Occupants, state in which vehicle?

Were Seat Belts Worn?

☐

Yes

☐

No

Was Injured conveyed to Hospital by Ambulance?

☐

Yes

☐

No

Declaration

I/We declare that the above particulars & information provided above are true in every aspect.



Signature of Policy Holder
(Company Chop if applicable)

14/02/22

Date & Time

09:37



Signature of Driver / Date & Time
(If Driver is not the Policy Holder)

14/02/22

Date & Time

09:37

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.
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. 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.
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.
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

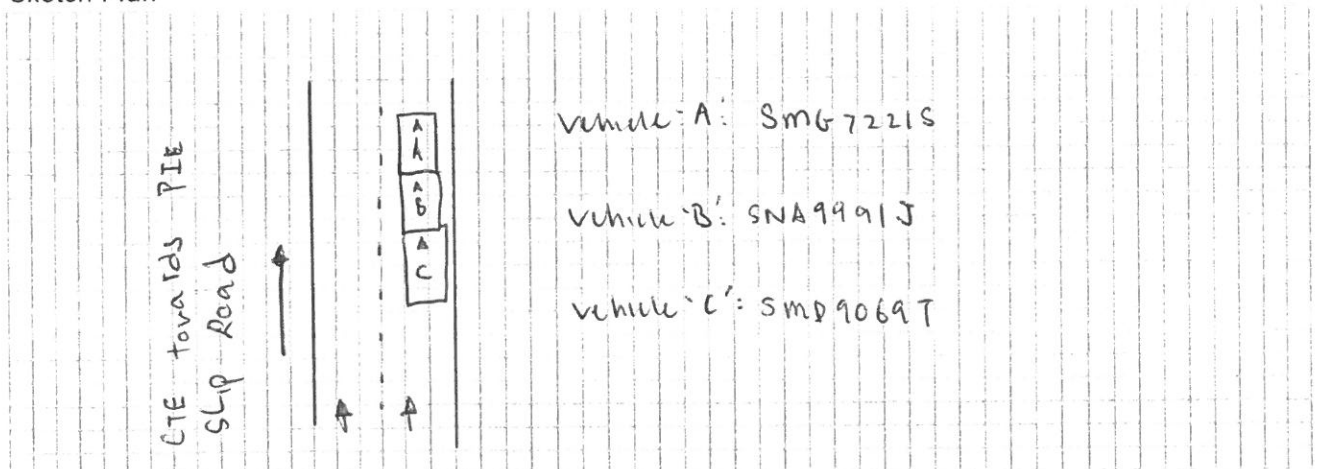
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

 140222
Policyholder's Signature / Date & Time


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

Witnessed by Reporting Centre Personnel

Sketch Plan

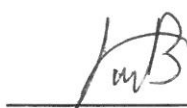


Describe Circumstances of the Accident

On the ~~stated~~ stated date and time, i vehicle 'A' was
traveling along my designated lane along the Slip road from CTE
to PIE before upper Sragoon Exit. The vehicle in front of me
came to a stop, as such i followed suit. As i
came to a stop and was stationary for about 3 seconds,
i suddenly felt a huge impact hitting my vehicle from ~~the~~ the
rear. I then got down to realised that i was involved in
a 3 car chain collision. That is all.

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

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S8226986Z**

Name: **BOK JIA-YUN (MO JIAYUN)**

Birth Date: **07 Sep 1982**

Issue Date: **28 Sep 2017**

002728361K

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S8226986Z**

Name: **BOK JIA-YUN (MO JIAYUN)**

莫佳韵

Race: **CHINESE**

Date of birth: **07-09-1982**

Sex: **F**

Country of birth: **SINGAPORE**

S8226986Z

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 3 Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$ 28 Sep 2017

Licence No: S8226986Z

NP 428A

4756134

NRIC No. **S8226986Z**

Date of Issue: **19-07-2011**

APT BLK 450A SENGKANG WEST WAY #06-335
SINGAPORE 781450

NRIC No: **S8226986Z** Date: **05/02/2020**

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 : DMPG21010519
Vehicle Registration Number : SMG7221S
Cover Type : Superior Comprehensive
Policy Type : Private Car
Name of Policyholder/Insured : BOK JIA YUN
Commencement Date of Insurance : 26/08/2021
Expiry Date of Insurance : 25/08/2022

FLASH
Fast-Response Accident Reporting Hotline™

24-Hour Helpline: 6100 1620

Excess	:	EXCESS: (SECTION I).....	S\$	500.00
		ADD'L EXCESS: UNNAMED DRIVERS (SECTION I)...	S\$	500.00
		ADD'L EXCESS: NON-AUTH WORKSHOPS (SECTION I)	S\$	300.00
		EXCESS: WINDSCREEN	S\$	100.00
		YOUNG & INEXP DRIVERS (SECTION I)	S\$	3,000.00

Finance Company/Hire Purchase Owner : TOYOTA FINANCIAL SERVICES SINGAPORE PTE LTD

***Persons or Classes of Persons entitled to drive:**

1. The Policyholder
2. 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

KCB INVESTMENTS PTE LTD
Co Reg No. 198103345Z
200 Jalan Sultan
#02-36 Textile Centre
Singapore 199018
Tel: 6391 3811 Fax: 6391 3810

A000503	KCB INVESTMENTS PTE LTD	Contact Number: 63913811
Vehicle Chassis Number : WBAJG12000EN48941, Vehicle Engine Number : 36755448B38B15A		PC1, 24/08/2021 09:56