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 30/06/2022 17:33 (SGT) Reported by Date of Accident 30/06/2022 08:45 (SGT) Exact Location of Accident Boon Lay Way, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Toyota

1600

Vehicle Registration Number SLA3604R

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner **ROY ANG CHONG WEI** NRIC No S7343462I Email Address royangchongwei@gmail.com Mobile Phone No (Phone) +65-91469630 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model

CC

Corolla 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 No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto

INSURANCE COMPANY

Name of Insurance Company Singapore Life Ltd Policy Number / Cover Note Number 10813741

DRIVER

Name of Driver **ROY ANG CHONG WEI** NRIC No S7343462I Date Of Birth 08/12/1973 Occupation Indoor

Date Of Driving Pass 06/12/2000 Driving experience 21 YEARS AND 6 MONTHS Gender Mobile Number (Phone) +65-91469630 Alt. Phone Number Email Address royangchongwei@gmail.com Address 210 CLEMENTI ROAD #08-216 Address complement Postcode 129784 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 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 Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement DETAILS OF POLICE ACTION Was the accident reported to the police? No Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO ATTACHED. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number	GBE8059D
Vehicle Manufacturer	Toyota
Vehicle Model	Dyna
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	LING CHEE KEONG
NRIC No	S0238001C

Contact Number	(Phone) +65-97474089
Address	-
Address complement	-
Postcode	-
Insurance Company Name	ERGO Insurance Pte. Ltd.
Nature Of Damage	-
Details of property damaged in accident	-
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 Formmust be completed by the Policyholder and/or the Authorised Driver.
- 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.
- 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.
- 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' 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 lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

30/6/22 12:17pm

Policyholder's Signature / Date & Time

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

SOON LAY

Witnessed by Reporting Centre Personnel

Sketch Plan

ON 30 June 2022 Morring at 8:45 am at the traffic light junction. along Boon Lay Way and Business Park rough at the My Cur was stationary as it was red light. Before I was about to drive off, A larry knocked my rear. We drive to the side of the road to exchange furticulars and took photos.	Describe Circumstances of the Accident
along Boon Lay Way and Business Park road Out the My car was stationary as it was red light. Before I was about to drive off, A larry knocked my rear. We drove to the slide of the road to	ON 30 June 2022
along Boon Lay Way and Business Park road Out the My car was stationary as it was red light. Before I was about to drive off, A larry knocked my rear. We drove to the slide of the road to	Morning at 8:45 am at the traffic light junction.
ilyht. Before I was about to drive off, A larry knocked my rear. We drove to the slide of the road to	
light. Before I was about to drive off, A larry knocked my rear. We drove to the slide of the road to	
light. Before I was about to drive off, A larry knocked my rear. We drove to the slide of the road to	(4t the My car was stationary as it was red
we drove to the slide of the road to	
we drove to the slide of the road to	of larry knocked my rear.
exchange particulors and took photos.	

Declaration

I/We declare the foregoing particulars are true in every respect.

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

Witnessed by Reporting Centre Personnel



Singapore Life Ltd. 4 Shenton Way, 801-01 SGX Centre 2, Singapore 968807 Tel: (16) 68279933 singlift core

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)

(REPUBLIC OF SINGAPORE) THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE) OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF. CERTIFICATE NUMBER, 10813741

1) VEHICLE REGISTRATION NO.

SLA3604R

2) NAME OF INSURED

FAMILY NAME GIVEN NAME ANG

CHONG WEI ROY

3) EFFECTIVE DATE OF COMMENCEMENT OF INSURANCE FOR THE PURPOSE OF THE ACT

27-Feb-2022 00:00hours

4) DATE OF EXPIRY OF INSURANCE

26-Feb-2024 23:59hours

5) PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE

You and any driver aged 30 or over

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 any 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 canceled at the time of accident or loss.

Please refer to the policy document for full terms and conditions.

6) LIMITATIONS AS TO USE*

Use only for social, domestic and pleasure purposes and for the Insured's business. The Policy does not cover use for hire or reward, taition or driving tests, racing, pace-making, reliability trials, speed-testing or 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.

 Unitations 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.

NAMED DRIVER

7) FINANCE COMPANY

DBS BANK LTD

1/ 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.

Issued in Singapore: 14-Feb-2022 at 10:55hours

Singapore Life Ltd.

IMPORTANT NOTE:

- If you want to cancel your policy at any time, you will need to return the certificate to us.
- You must report all accidents to Us within 24 hours of the occurrence or by the next working day at our accident reporting centre regardless of whether you intend to claim on your own policy or not, or whether your car is damaged or not. Should you fail to do so, Your NCD could be affected and your claim may be prejudiced.

For the list of our accident reporting centres, please visit https://singlife.com/CarRepairers. Alternatively, you may call us at 6333 2222 for assistance (including assistance on windscreen damage).

Pearlyn Phau

In case of vehicle breakdown, accident or windscreen damage, please call 6333 2222 (24 hours) immediately.

ORIGINAL

Singapore Life Ltd. 4 Shenton Way #01-01 SGX Centre 2 Singapore 068807 singlife.com Company Reg. No. 196900499K GST Reg. No. MR-8500166-8

















































