





# 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 Actual 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	05/08/2022 16:57 (SGT)
Reported by	Owner
Date of Accident	04/08/2022 19:35 (SGT)
Exact Location of Accident	Hongkong St, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKV3399J
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	FOO SAY NGIAP (FU SHIYE)
NRIC No	SXXXX632B
Email Address	shiye_79@hotmail.com
Mobile Phone No	(Phone) +65-88183399
Alternative Phone No	-

## VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	E200
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	1991

## INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNW00228742100

## DRIVER

Name of Driver	PHUA GEK LIAN, MARYANNE (PAN YULIAN)
NRIC No	SXXXX470H
Date Of Birth	03/10/1982
Occupation	Indoor

Date Of Driving Pass	09/01/2009
Driving experience	13 YEARS AND 7 MONTHS
Gender	Female
Mobile Number	(Phone) +65-91500464
Alt. Phone Number	-
Email Address	shiye_79@hotmail.com
Address	BLK 6 BISHAN STREET 25 #37-12
Address complement	-
Postcode	573975
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	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)	1
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?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

#### PLEASE REFER TO SKETCH AND ATTACHMENT

##### ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	WITH OWNER

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMG8045C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-

Contact Number	*****	-
Address	*****	-
Address complement	*****	-
Postcode	*****	-
Insurance Company Name	*****	FWD Singapore Pte. Ltd.
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)

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.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

### Sketch Plan

HONG KONG STREET



A: SKV 3399J

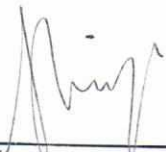
B: SMG 8045C

**Describe Circumstances of the Accident**

Refer to the attachment.

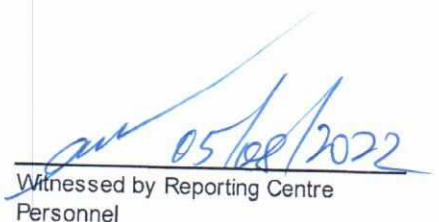
**Declaration**

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



Date: 4 August 2022

Time: Around 735pm

Location: Hong Kong Street

Details: I was driving along Hong Kong street (1 way street) when the driver of the above vehicle stopped alongside another car that was already stationery. This caused the road to be blocked as there was no space left between the 2 cars for another vehicle to pass through. I stopped behind both cars which were already stationery at this point in time.

I proceeded to honk at them to alert the 2 cars that they are holding up traffic. The above mentioned vehicle suddenly started reversing into my car instead. I honked at the owner a couple of times but to no avail. My car suffered damage on its right side as a result.

*05/08/2022*

*Ning*

Date of Accident : 04.08.2022 Accident Time : 19:35pm (24-HR-Format)  
 Who reported the accident? : Owner / Driver / Both  
 Accident Place : Hong Kong Street  
 Vehicle No (Car Plate No) : SKV 3399J Make/Model: Mercedes E200 AMG  
 Insurance Company : China Taiping Policy No: DMPCS NW00228742100  
 Fleet Policy : YES / NO  
 Type of Coverage : Comprehensive / Third Party / Third Party Fire & Theft  
 Name of Owner / IC No : Foo Say Ngiap (Fu Shi Ye) S7934632B  
 Owner Contact No : 8818 3399 Owner's Hp \_\_\_\_\_ Company Tel \_\_\_\_\_  
 Driver Name / IC No : Phua Gek Lian, Maryanne (Pan Yulian) S8229470H  
 Driver's Date of Birth : 03.10.1982 Driver's License Pass Date: 09.01.2009  
 Relationship of Driver : Spouse / Parents / Children / Sibling / Employee / Other: \_\_\_\_\_  
 Driver's Address : Blk 6 Bishan Street 25 #37-12 Singapore 573975  
 Driver's Contact No : 1) 9150 0464 2) \_\_\_\_\_  
 Driver's Occupation : INDOOR / OUTDOOR (e.g. working inside or outside office)  
 Email Address : shiye-79@hotmail.com  
 Weather & Road Surface : CLEAR & DRY / RAINING & WET / AFTER RAIN & WET  
 Reporting Type : Reporting Only / Claim Third Party / Claim Own Insurance  
 Number of Passenger(include Driver) : 1 Driver  
 Was there any video footage? : YES / NO  
 Exact purpose used at time of accident : Private Use / Private Hire / Work Purpose  
 Any injury (If Yes, Pls State) : No

**Other Party Driver's Particular (if any)**

VEH B : SMG8045C (FWD) Name & Contact No: \_\_\_\_\_  
 VEH C : \_\_\_\_\_ Name & Contact No: \_\_\_\_\_  
 VEH D : \_\_\_\_\_ Name & Contact No: \_\_\_\_\_  
 VEH E : \_\_\_\_\_ Name & Contact No: \_\_\_\_\_

\*NEW - Passenger's Name & Gender:





Motor Private Car

MX1E

E SN

AN0592A

Cov. Type:C

**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)

CERTIFICATE No.

DMPCSNW00228742100

Engine No.: 27492030750704

Cha. No.: WDD2130422A061943

1. Index Mark and Registration  
Number of Vehicle

SKV3399J

AUTOSAFE

=====

2. Name of Policy Holder

FOO SAY NGIAP (FU SHIYE)

3. Effective date of the Commencement of  
Insurance for the purposes of the Regulations,  
Ordinance or Enactment01/11/2021  
(10:59:41)

Named Drivers Ex Sect. I S\$750.00

Additional Ex Other than Named Drivers:

Ex Sect. I - Age &lt;= 25 S\$3,000.00

Ex Sect. I - Age &gt;= 26 S\$500.00

\* Age as at date of accident

EX ON WINDSCREEN S\$100.00

4. Date of Expiry of Insurance

31/10/2022

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 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 for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, 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.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled. One time Waiver of Excess for the first S\$1,000 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our

Authorised Workshops for each Policy Year.

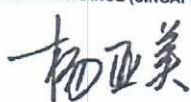
HIRE PURCHASE CO.: OCBC BANK LTD

\* 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.

**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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: Tan Mingjie  
Authorised Officer  
Authorised Signatory