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 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.

- 4. The issue and acceptance of this is form by instrained 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 07/09/2022 16:17 (SGT) Reported by Date of Accident 07/09/2022 11:26 (SGT) Exact Location of Accident Singapore Additional Location Information TPE Towards Loyang Way (Slip Road) Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SGL41K

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner Chan Jun Long NRIC No S8829298G Email Address Naufalsardon@gmail.com Mobile Phone No (Phone) +65-98185151 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Honda Model Odyssey Variant Odyssey 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 CC 2400

INSURANCE COMPANY

Name of Insurance Company Direct Asia Insurance (Singapore) Pte Ltd Policy Number / Cover Note Number MT 00560139 03

DRIVER

Name of Driver Muhammad Naufal Bin Sardon NRIC No S9602492D Date Of Birth 18/01/1996 Occupation Indoor

Date Of Driving Pass 19/01/2016 Driving experience 6 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +65-92382316 Alt. Phone Number Email Address Naufalsardon@gmail.com Address 111 Hougang Ave 1 #01-1076 Address complement Postcode 530111 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Friend Does Driver Own Other Vehicles? Nο 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? Yes 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? Yes Police Station Name Traffic Police Police Station Phone No (Phone) +65-65470000 Alt. Police Station Phone No (Fax) +65-65474900 Police Station Address 10 Ubi Avenue 3 Singapore 408865 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT Report refer to police report 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 GBH9032H Vehicle Manufacturer

Vehicle Model
Vehicle Variant

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person Gender	Muhammad Naufal Bin Sardon Male
Phone No	-
Address	111 Hougang Ave 1 #01-1076
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	Neck & back pain
Injured person in which vehicle?	SGL41K
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly 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 law yers/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		
Lanane Wan		(A) SCL AIK
		B 618H 9032H
		B) OBLI dostu
TAI I		
\ \A		

On 07-09-202 at about 1126hrs, I was travelling alone slip ROAD from The Towards Lonane Way: Upon Mochine the phinchion, I slow down and stop. While heating fir the main road to clear out of a endoun I foll an impact from the Mar. That I realized a vehicle 68H 9052H had collided onto my mar. That's all.	Describe Circumstances of the Accident
Road from the Yomards Lobane was . Upon reachine the prinction, I slow down and stop. While haiting for the main road to clear out of a sudden I felt an impact from the viar. Then I realised a relaide	On 07-09-2022 at about 1126hrs, I was taxelling along slip
a sudden of felt an impact from the viar. Then I realised a retricte	
SBH 9052H had collided onto my mar. That's all.	a sudden of felt an impact from the viar. The I realised a relide
	68H 9032H had collided onto my near. That's 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 8. Time

Witnessed by Reporting Centre Personnel







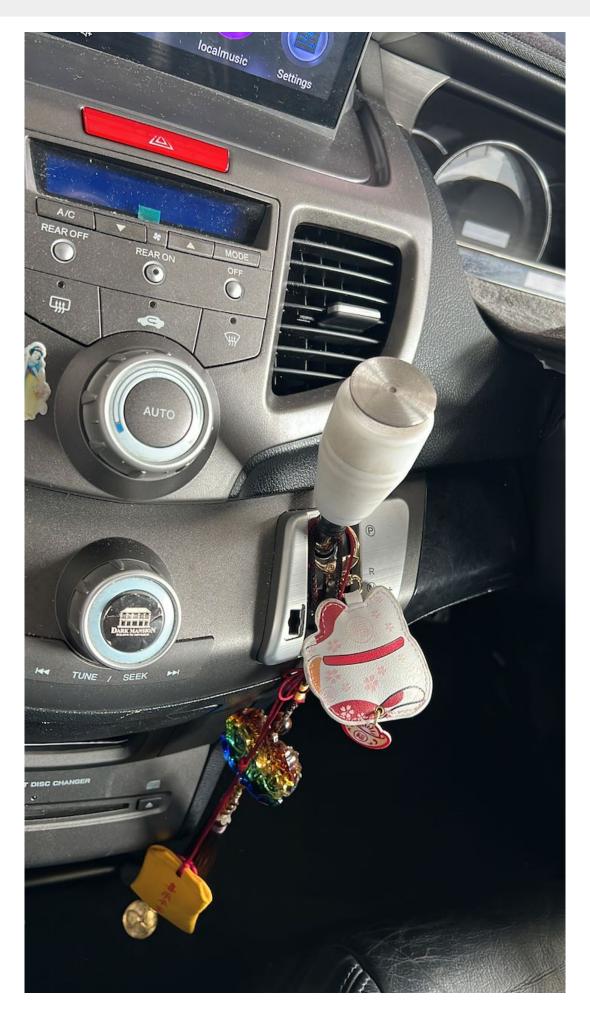


















No

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 1 of 3 Report No. T/20220907/7040

Tel No: 65470000

DEDODT	OF A	TDAEEIC	ACCIDENT

Date/Time 07/09/202		fade:	Vide Report No.:			Station Diary No.:	
Informan	t's Partic	ulars	HI KE YOUR				
Name of I MUHAMM		FAL BIN SARDON	Address: 111 HOUGANG	AVENUE 1#	01-1076 SIN	GAPORE 530111	
ID Type / ID No.: NRIC NO / S9602492D			Contact No.: Home/Office:		Mobile: 92	382316	
Nationality SINGAPO		EN	Email: naufalsardon@g	mail.com			
Sex: Male	Age: 26	Date of Birth: 18/01/1996	Type of Informat Driver	nt:			
Race: Javanese			Language: English		Institution	ion / School Name:	
Occupatio	n:		Driving Licence Class:	Information:	Date of Ex	piry:	
General In	formation	of the Accident					
Type of Accident:		njury Others	Drink Drive: No	Date/Tin Accident 07/09/20		Type of Location Y-Junction	
Location: TAMPINE	S EXPRE	SSWAY					
Weather: Clear			Road Surface: Dry		Ro	ad Speed Limit:	
Traffic Flo One Way	w:		Traffic Control: Not Controlled		Tra Lig	affic Volume: ht	
Type of Co		hicles - Head To Re	ear	100,000	yone conveyed by		

Details of V	ehicle Invo	lved			ESCHALL SELE	TESTINIAN
Vehicle No.	Туре	Make	Model	Color	Conditio	No of
GBH9032H	Lorry					0
SGL41K	Car					0

Details of V	ehicle Insurance			Miles South
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20220907/7040

CONTINUATION OF REPORT

Details of Vehicle Insurance							
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date			
GBH9032H	CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD.						
SGL41K	DIRECT ASIA INSURANCE (SINGAPORE) PTE, LTD.						

Details of Perso	n Involved	AND SERVE	TAXABLE DESCRIPTION	ENIMBIES .	63.66	MATERIAL VIEW NAME OF STREET
Any Pedestrian I	nvolved: No					
No. of Pedestriar	ns Injured: NIL		Use of P	edestria	n Cross	sing: NA
Driver						
Name	MUHAMMAD NAUFAL BIN SARDON			ID No	i.	S9602492D
Related Vehicle	SGL41K (Car)			Conta	ct No.	92382316
Hospital/Clinic	NIL .			Class Drivin Licen Expir	g ce &	Class: NIL Date of Expiry: NIL
Date	NIL	=1000	Date		NIL	
No. of Days gran	ted Medical Leave	05	Degree o	Degree of Slight		

Brief Details.

On 07.09.2022 at about 1126hrs, I was travelling along Slip road from TPE towards Loyang Way. Upon reaching the junction, I slow down and stop. While waiting for the main road to clear, all of a sudden I felt an impact from the rear. Then I realize a vehicle GBH9032H had collided onto my rear. Due to the collision, i had neck and back pain. I consult doctor and was given 5 days of mc. That's all





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20220907/7040

CONTINUATION OF REPORT

Sketch Plan					
Informant is	not	able	to	provide	sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 07/09/2022 15:19
Officer In Charge Of Case: TP / TPIB / MOHAMAD ZULFAZDLI BIN ABDULLAH Contact No.: 65476204	Classification Of Case:
MOHAMAD ZULFAZDLI BIN ABDULLAH	



Contact us at

Hotline: (65) 6665 5555

E-mail: customerservice@directasia.com

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act") Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore) Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

ertificate No. : MT/00560139/03

Type of Coverage / Driver Plan : Car Comprehensive (Value Plus Plan)

1) Vehicle Registration No. : SGL41K

Chassis No. : JHMRB18508C205101

2) Name of Policy Holder : Jun long, Chan

3) Effective Date / Time of Commencement

of Insurance for the Purpose of the Act : 17/02/2022 00:00

4) Date/Time of Expiry of Insurance : 16/02/2023 23:59

5) Persons or Classes of Persons Entitled to Drive

- (a) Any named person under the policy who is driving on the Policyholder's permission.
- (b) Any authorised person, provided such person is aged 30 and above and holds a valid driving licence of 2 years or more, who is driving on the Policyholder's permission

The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.

6) Limitations as to use*

Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business. Private car-pooling arrangements where you commute with passengers and split the fuel expense is covered under the standard policy. Grab Hitch will only be covered if this is the declared usage stated on your Policy Schedule. Only two rides are permitted a day. Other forms of commercial car-pooling or any ride hailing services (e.g. Grab, Go-Jek etc.) are not allowed.

*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.

Sum Insured : Market Value

Own Damage Excess : S\$ 600.00

Windscreen Excess : S\$ 100.00

Choice of workshop : DirectAsia approved workshops
Finance company / Hire Purchase : Hong Leong Finance Limited

Main driver : Jun long, Chan

Named driver : None

Important Note: This policy does not cover the Policyholder/drivers below the age of 30 and Policyholder/drivers who hold a valid driving licence of less than 2 years with the exception of the main/named drivers above.

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 Com pensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia).

Issued on: 18/01/2022

Direct Asia Insurance (Singapore) Pte. Ltd.

Underwriting Manager

Direct Asia Insurance (Singapore) Pte Ltd 20 Anson Road #08-01 Twenty Anson Singapore 079912 www.DirectAsia.com Company Registration: 200822611G