

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	12/09/2022 11:24 (SGT)
Reported by	Both
Date of Accident	12/09/2022 08:36 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	SLE TOWARDS CTE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMN4495B
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIM SHENGWEI BENNY
NRIC No	S8618783C
Email Address	APPSDELTA@GMAIL.COM
Mobile Phone No	(Phone) +65-93838262
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Kia
Model	Stonic
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	998

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNW00034872200

DRIVER

Name of Driver	LIM SHENGWEI BENNY
NRIC No	S8618783C
Date Of Birth	17/07/1986
Occupation	Indoor

Date Of Driving Pass	19/04/2018
Driving experience	4 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93838262
Alt. Phone Number	-
Email Address	APPSDELTA@GMAIL.COM
Address	BLK 110 LORONG 1 TOA PAYOH
Address complement	#03-330
Postcode	310110
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	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

REFER TO SKETCH PLAN.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKX5223J
Vehicle Manufacturer	Honda
Vehicle Model	Jazz
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	NEO KOK HIN
Contact Number	(Phone) +65-90071557

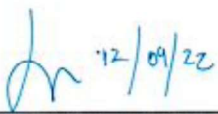
Address -
Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

Describe Circumstances of the Accident

Around 8.30 a.m. along SLE towards CTE. The vehicle SKX 5223J
 in front of me suddenly stop as there ~~an~~ vehicle were 3 vehicle
 in front of him involved in another chain collision. & ~~hitting~~ therefore
 hitting the vehicle SKX 5223J. The vehicle SKX 5223J is not
 involved in the chain collision instant.

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 Officer
 Personnel



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' 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.

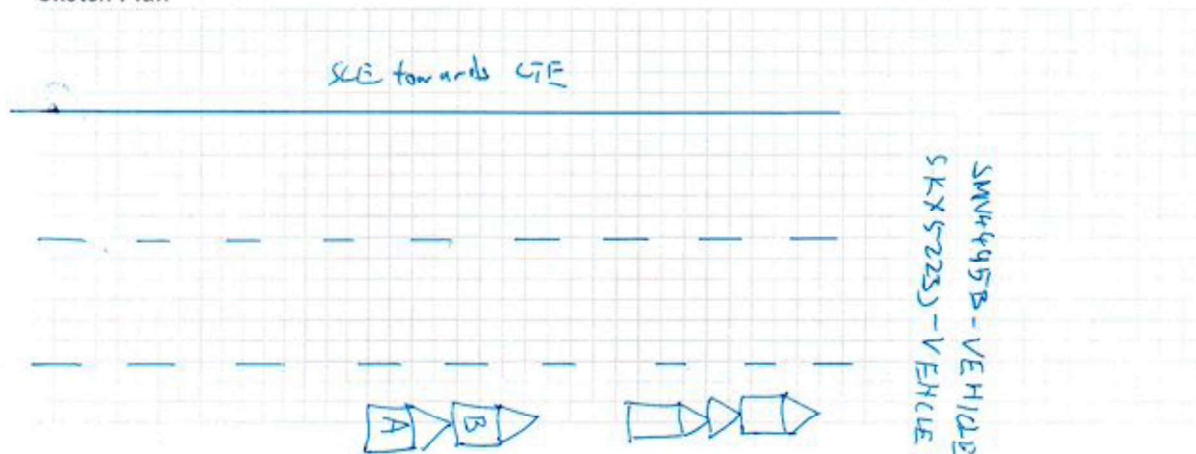
hm 12/04/22
 Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel



Sketch Plan

















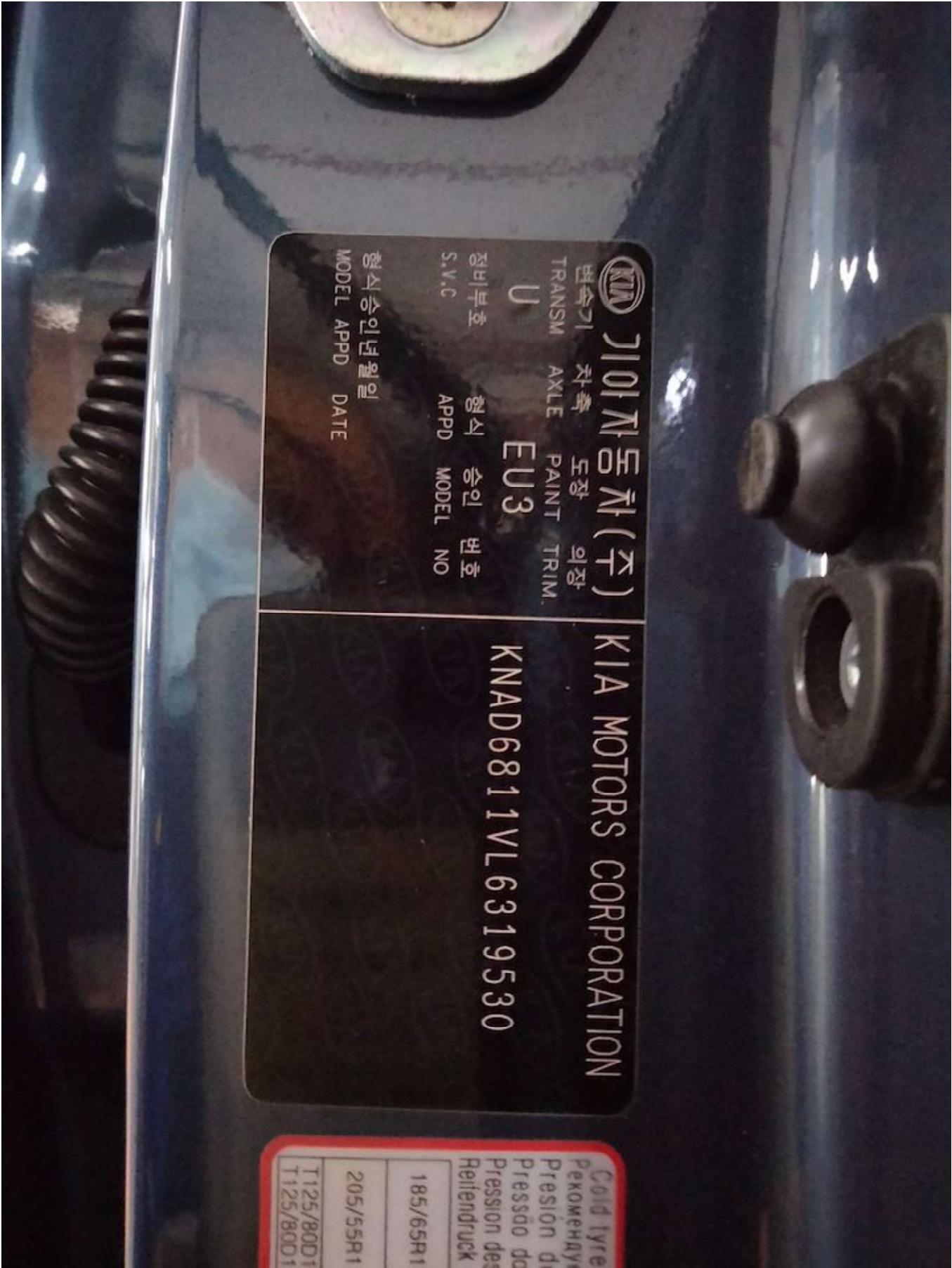










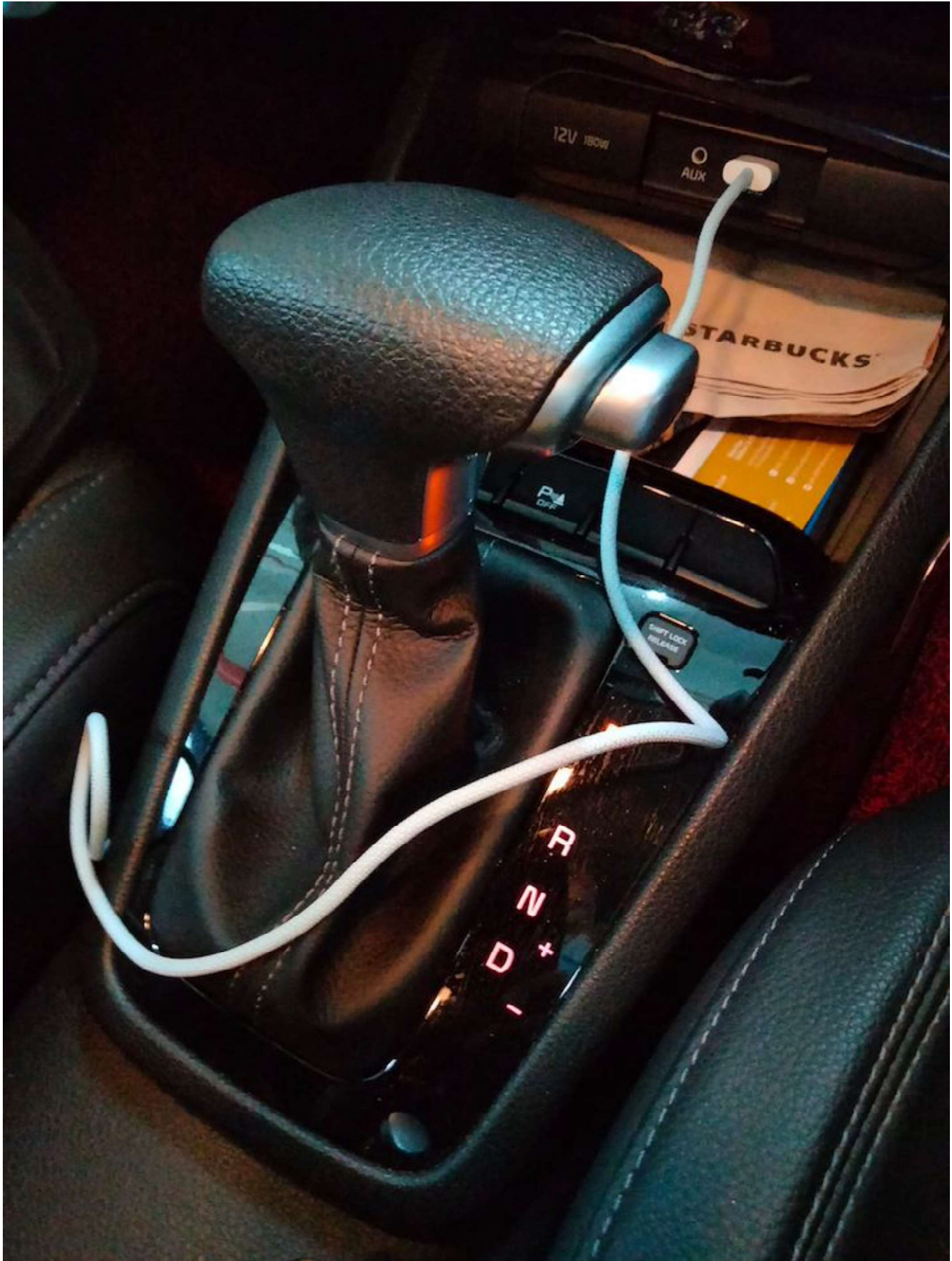


KIA
기아자동차(주)
변속기 차축 도장 외장
TRANSM AXLE PAINT TRIM.
U EU3
정비부호 형식 승인 번호
S.V.C APPD MODEL NO
형식 승인년월일
MODEL APPD DATE

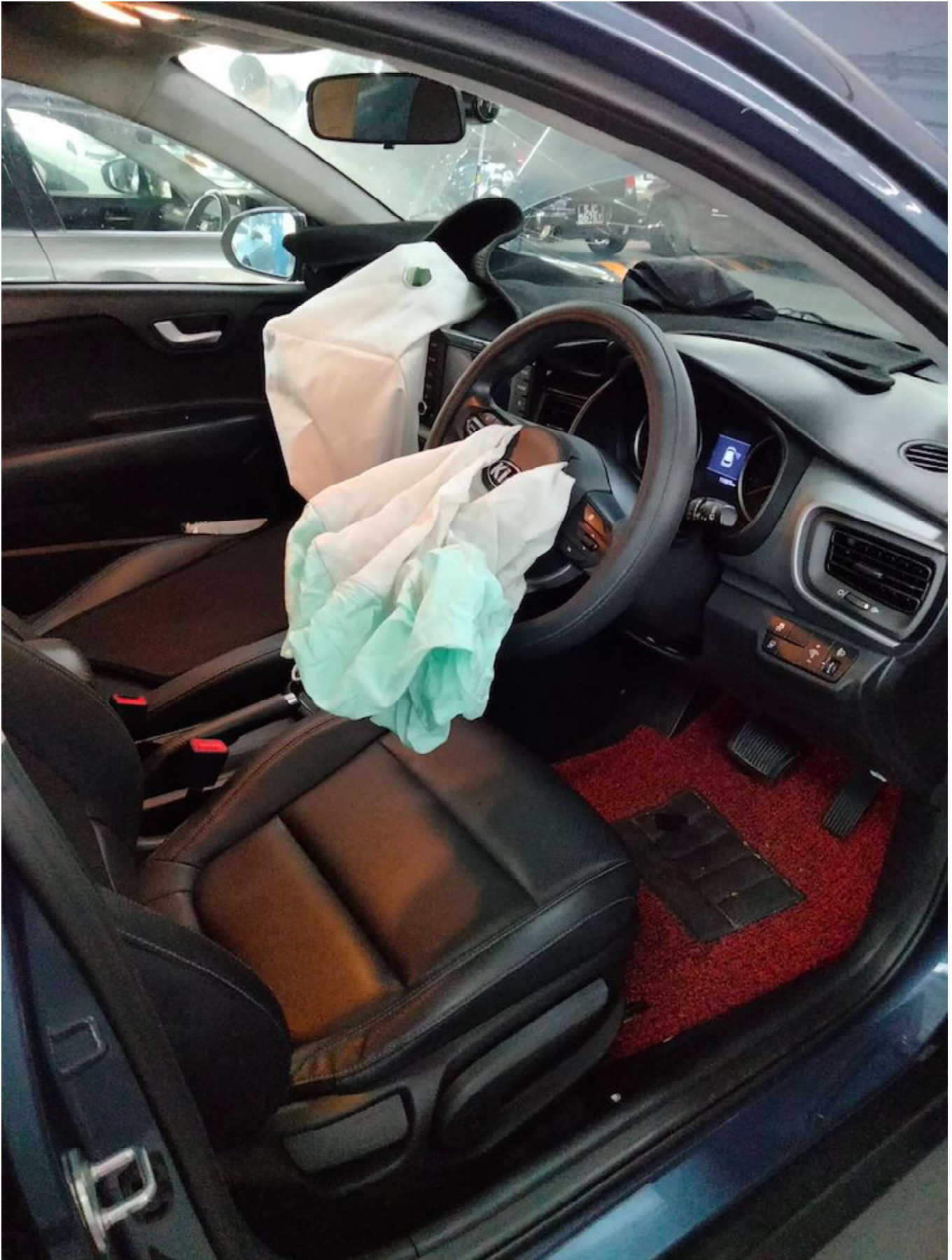
KIA MOTORS CORPORATION
KNAD6811VL6319530

Cold tyre
Резина при
Pression d
Pressão de
Pression des
Reifendruck
185/65R1
205/55R1
T125/80D1
T125/80D1





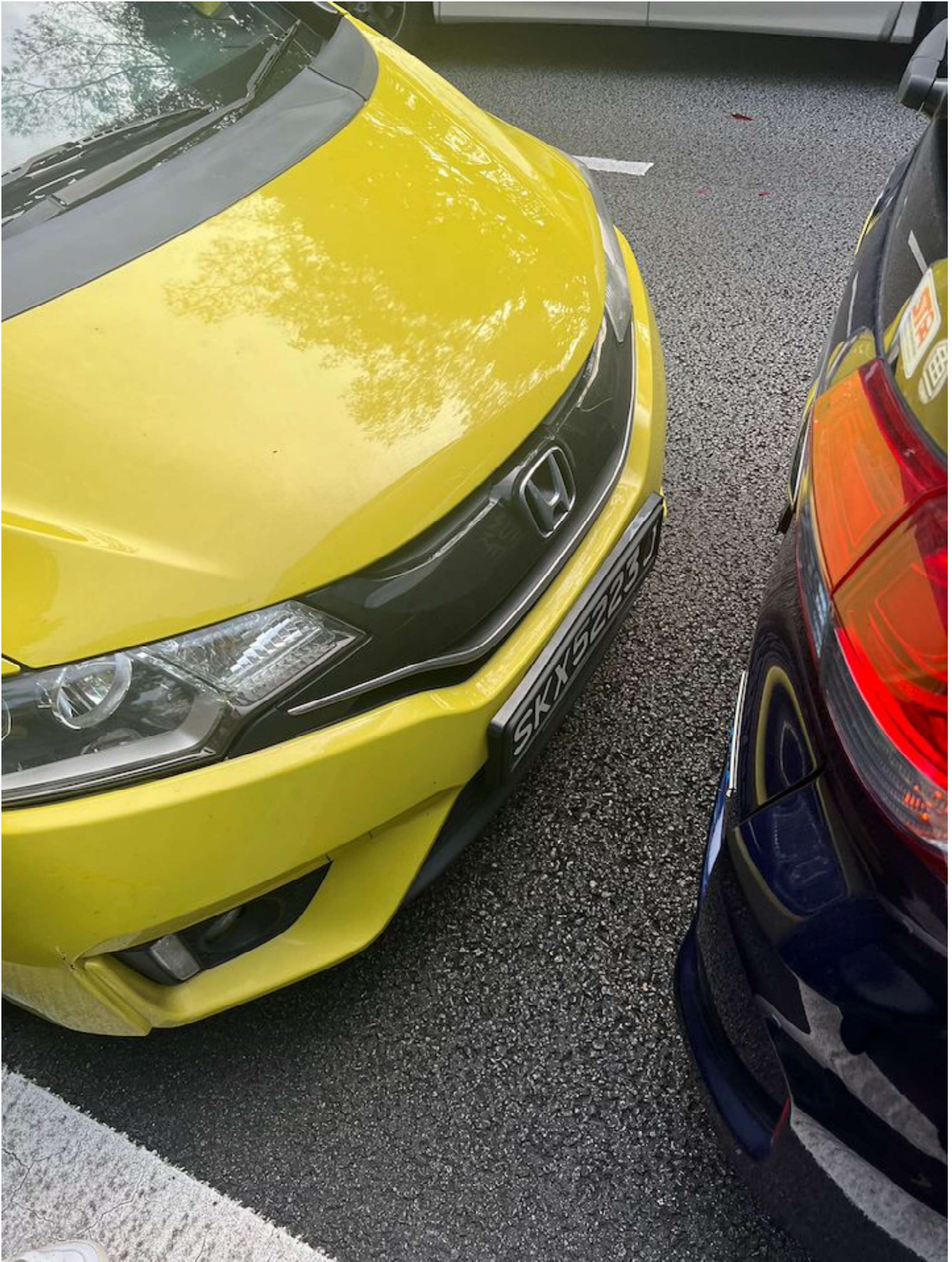




















中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Private Car

MX1F

N SN

AN0721A

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.

DMPCSNW00034872200

Engine No.: G3LCKP068236

Cha. No.:KNAD6811VL6319530

1. Index Mark and Registration
Number of Vehicle

SMN4495B

AUTOSAFE

2. Name of Policy Holder

LIM SHENGWEI BENNY

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations,
Ordinance or Enactment

27/01/2022
(11:37:53)

Named Drivers Ex Sect. I S\$500.00
Additional Ex Other than Named Drivers:
Ex Sect. I - Age <= 25 S\$3,000.00
Ex Sect. I - Age >= 26 S\$500.00
* Age as at date of accident
EX ON WINDSCREEN S\$100.00

4. Date of Expiry of Insurance

26/01/2023

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.

5. 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\$500 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. : STANDARD CHARTERED BANK(S) LIMITED

* 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: BENEFIT AUTO INSURANCE AGENCY
Authorised Officer

Authorised Signatory