# **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.

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   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 26/09/2022 13:23 (SGT) Reported by Date of Accident 24/09/2022 16:37 (SGT) Exact Location of Accident Singapore Additional Location Information 229 PENDING ROAD (OPEN SPACE CARPARK) Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Mercedes

Vehicle Registration Number **SLU7462B** 

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner KENNETH HUANG KAIXIANG NRIC No SXXXX571I Email Address KENNETHHUANGG@GMAIL.COM Mobile Phone No (Phone) +65-86688681 Alternative Phone No

### VEHICLE PARTICULARS

Manufacturer

Model C180 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 CC 1496

### **INSURANCE COMPANY**

Name of Insurance Company **ECICS Limited** Policy Number / Cover Note Number MPC22A00179300

### DRIVER

Name of Driver KENNETH HUANG KAIXIANG NRIC No SXXXX571I Date Of Birth 17/10/1993 Occupation Indoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	29/12/2011 10 YEARS AND 9 MONTHS Male (Phone) +65-86688681 - KENNETHHUANGG@GMAIL.COM BLK 463B BUKIT BATOK STREET 41 #15-35 - 652463 Yes - No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Collided into Parked Vehicle Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?  Number of vehicles involved in the accident  Was anybody injured in the Accident?  Was any injured conveyed to hospital by ambulance?  Was any other vehicle or property damaged?  Number of Passengers (Including Driver)  Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?  Translator's name  Translator's ID  Translator's phone number  Translator's email  Original language used in the statement	No 2 No - Yes 0 No
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Police Station Name Police Station Phone No Alt. Police Station Phone No Police Station Address Was notice of intended Prosecution given? If yes, against whom?	Yes Traffic Police (Phone) +65-65470000 (Fax) +65-65474900 10 Ubi Avenue 3 Singapore 408865 No
CIRCUMSTANCES OF ACCIDENT	
REFER TO POLICE REPORT	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes Yes
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number	GBG8363P

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)	-

### SKETCH PLAN

# IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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)

lunderstand, 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' 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 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

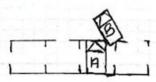
Witnessed by Reporting Centre Personnel

Sketch Plan

229 Pending Road.

A-5LU7462B

B-GBG8363P



Describe Circumstance	s of the Accident	
	Reter to Police Report.	
	The to reduce helper!	
	1/2022.0926/7021	
	11 102204361-1021	
	1	

# 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































Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20220926/7021

# REPORT OF A TRAFFIC ACCIDENT

	ne Report M 122 12:04	/lade:	Vide Report No.:	Station Diary No.:	
Informa	nt's Partic	ulars	THE PARTY OF THE P		
	Informant: TH HUANG	KAIXIANG	Address: 463B BUKIT BATOK STREET 41 #15-35 SINGAPORE		
ID Type / ID No.: NRIC NO / S93395711		711	Contact No.: Home/Office: Mobile: 86688681		
10000000000000000000000000000000000000		EN	Email: KENNETHHUANGG@GMAIL.COM		
Sex: Male	Age: 28	: Date of Birth: Type of Informant: 17/10/1993 Driver		The bar of the section which the processing and	
Race: Chinese			Language: English	Institution / School Name:	
Occupation: SELF-EMPLOYED			Driving Licence Information: Class: Date of Expiry:		

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 24/09/2022 16:35	Type of Location Car Park
Location: PENDING RO	DAD	Road Surface:	l R	oad Speed Limit:
*******		The second secon		
Clear		Dry		
Clear Traffic Flow:		Traffic Control: Not Controlled	T	raffic Volume:

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Conditio	No of
GBG8363P	Lorry					0
SLU7462B	Car	MERCEDES BENZ	C180 AVANTGAR DE (R17 LED)	Black		0





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20220926/7021

### CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLU7462B	ECICS LIMITED	MPC22A00179300	14/09/2022	13/09/2023

Details of Perso	n Involved				
Any Pedestrian I	nvolved: No		165		
No. of Pedestrian	s Injured: NIL		Use of Pe	destrian Cros	sing: NA
Driver			1151 1110000000000000000000000000000000		The state of the s
Name	KENNETH HUANG KAIXIANG		ID No.	S9339571I	
Related Vehicle	SLU7462B (Car)			Contact No	. 86688681
Hospital/Clinic	NIL			Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date		NIL	
No. of Days granted Medical Leave NII		NIL	Degree of	NIL	

### Brief Details.

On the stated time and date, my vehicle bearing SLU7462B was parked in a carpark lot at 229 Pending road. When i returned to my vehicle i realized my vehicle was damaged at the right side. I checked my dashcam and realized Vehicle bearing GBG8363P had collided onto my vehicle while exiting the lot beside my vehicle.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20220926/7021

# 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: 26/09/2022 12:04
Officer In Charge Of Case: TP / TPIB / NEO ZHI YUAN Contact No.: 65476079	Classification Of Case:
NP168	-1 (1-



### CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks 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)

AUTHORISED WORKSHOPS

MZ300 COMPREHENSIVE ORIGINAL

CERTIFICATE NO. MPC22A00179300 Chassis No. WDD2050402R336521 AAC PERFORMANCE PTE LTD Engine No 27491031143854 Agency Name:

A0000243 Agency Code:

Index Mark and Registration Number of Vehicle: SLU7462B

2. Name of Policyholder: KENNETH HUANG KAIXIANG

3. Period of Insurance (both dates inclusive): 14 September 2022 to 13 September 2023

4 Persons or Classes of Persons entitled to drive

al The Policyholder and all Named Drivers declared under the Policy.
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 regulationa to drive the Motor Car 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 Car.

Use for social, domestic and pleasure purposes and for the Folicyholder's business. The Folicy does not cover use for hire or reward, tuition, driving test, race, 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 Frade.

WINDSCREEN SECTION I - INSURED/NAMED DRIVER SGD 100.00 SGD 600.00

ADDITIONAL EXCESS:

EGD 500.00 EGD 3,000.00 SECTION 1 - UNNAMED DRIVERS SECTION 1 - AGE <2 $\varepsilon$ , AGE >65 OR DRIVING EXP <2 YEARS

7. Hire Purchase Company: OVERSEA-CHINESE BANKING CORPORATION LIMITED

Signed for and on behalf of ECICS Limited

AUTHORISED SIGNATORY

### Important Notice:

- i) Policyholders are hereby warned that it shall be unlawful for any person to use or cause or permit any other person to use a motor vehicle without a valid insurance under the Act,
- ii) On the sale of a motor vehicle, Policyholders must surrender all insurance papers issued including the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189).
- iii) The Certificate of Insurance and the Policy will cease to be valid once the motor vehicle has been sold or transferred.
- rv) The Payment Before Cover Warranty or Premium Payment Warranty found in the Policy must be complied with otherwise there would be no liability under the Palicy and Certificate of Insurance

10 Fatasi Send S 605-04A Singapore Post Cartin Singapore 4/8000 TEL 83/74/76 FAX: 6339/267-COMPANY REGISTRATION SQ. 198/013/10. WEBSITE Jup. Convention and Carting