

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 05/10/2022 17:18 (SGT)
Reported by Driver
Date of Accident 29/09/2022 16:25 (SGT)
Exact Location of Accident Singapore
Additional Location Information TAMPINES STREET 92
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMG2057H

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner SENBEL AUTOMOBILE PTE LTD
Company Reg No 2XXXXX110Z
Email Address fullstop423@gmail.com
Mobile Phone No (Phone) +65-92372080
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Toyota
Model C-hr
Variant -
Exact purpose for which vehicle was being used at time of accident Employment
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Private car
Transmission Auto
CC 1700

INSURANCE COMPANY

Name of Insurance Company MSIG Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number A 300538451 MTR

DRIVER

Name of Driver KOH CHEONG KIAT WILLY (XU CONJIE WILLY)
NRIC No SXXXX650F
Date Of Birth 26/12/1972
Occupation Indoor

Date Of Driving Pass	07/01/2013
Driving experience	9 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92372080
Alt. Phone Number	-
Email Address	fullstop423@gmail.com
Address	APT BLK 601B PUNGGOL CENTRAL
Address complement	#08-600
Postcode	822601
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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	Side Swipe
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

SEE ATTACHED SKETCH PLAN AND PHOTO

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	YN3855K
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) -

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.

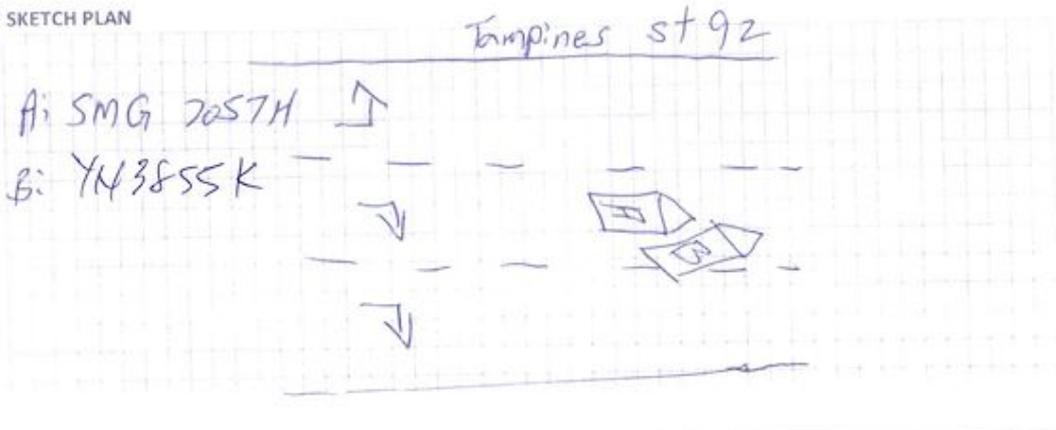
AUTOLESION INDUSTRIAL PTE LTD
 19 UBI ROAD 4
 SINGAPORE 408833
 TEL: 6490 9666 FAX: 6846 7483


 Policyholder's Signature * Date
 & Time: 05/10/2022
 3:01 pm


 Driver's Signature
 (If driver is not the policyholder) Date
 & Time: 05/10/2022


 Reporting Centre Personnel's Signature
 Name: EUMER ALFONSO
 NRIC/FIN No.: G7YXX824L

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At mentioned Date and Time, I was driving (A) along Tampines st 92, suddenly vehicle (B) cut into my line and hit into my right portion.

A: SMG 2057H
B: YN 3855K

DECLARATION

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

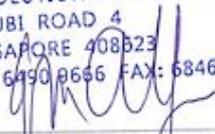


Policyholder's Signature Date
& Time: 05/10/2022
5:01 pm



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

AUTOLUTION INDUSTRIAL PTE LTD
19 UBI ROAD 4
SINGAPORE 408523
TEL: 6490 8656 FAX: 6846 7483


Reporting Centre Personnel's Signature
Name: ETHER ALFARO
NRIC/FIN No: 6444824L

















MSIG Insurance (Singapore) Pte. Ltd.
 4 Shenton Way, #21-01, SGX Centre 2, Singapore 068807
 Tel +65 6827 7888, Fax +65 6827 7800
 Co.Reg No. 200412212G GST Reg. No. 20-0412212G
 A Member of **MS&AD** INSURANCE GROUP

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA), ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)
 THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)
 THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
 (REPUBLIC OF SINGAPORE)
 THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

MOTOR TRADE (ROAD RISK) MotorTrade Road Risk Third Party Only Contract

Certificate No. A 300538451 MTR

Excess : NIL

Windscreen Excess : NIL

1. **Index Mark and Registration Number of Vehicle**
 Any Motor Vehicle the property of the Policyholder or in his custody or control. All steam-driven vehicles are excluded.
2. **Name of Policyholder**
 Senbel Automobile Pte Ltd
3. **Effective Date of the Commencement of Insurance for the purposes of the Act**
 04/03/2022
4. **Date of Expiry of Insurance**
 03/03/2023
5. **Persons or Classes of Persons entitled to drive***
 *Provided that the person driving is permitted in accordance with the licensing or other laws or 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 only for Motor Trade purposes. The Policy does not cover use for hire or reward racing pace-making reliability trial or speed-testing.
 N.B. Use solely for "Breakdown" purposes is not deemed to be use for hire or reward.
 * Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risk and Compensation) Act (Chapter 189) and Chapter 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offense under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189)

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) or any Amendment, Act or Acts passed in substitution thereof

MSIG Insurance (Singapore) Pte. Ltd.
 Approved Insurer

Mack Eng
 Chief Executive Officer

SGSNOX20220216171