# **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 21/11/2022 16:30 (SGT) Reported by Both Date of Accident 19/11/2022 11:08 (SGT) Exact Location of Accident Anchorvale Cres, Singapore Additional Location Information **BLK338 ANCHORVALE CRESCENT CARPARK GANTRY** Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SLR2317L

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner DANIEL YAK CHEE CHONG (YI ZHIZONG) NRIC No SXXXX515D Email Address DANIEL.YAK@GMAIL.COM Mobile Phone No (Phone) +65-93801605 Alternative Phone No

### VEHICLE PARTICULARS

Manufacturer Honda Model Freed Variant **HYBRID CAR** 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 MPC22A00134300

### DRIVER

Name of Driver DANIEL YAK CHEE CHONG (YI ZHIZONG) NRIC No SXXXX515D Date Of Birth 11/02/1983 Occupation Indoor

Date Of Driving Pass 26/10/2004 Driving experience 18 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-93801605 Alt. Phone Number Email Address DANIEL.YAK@GMAIL.COM Address BLK 308A PUNGGOL WALK #09-408 Address complement Postcode 821308 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 Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement PASSENGER 1 Name FIONA TOH Gender **Female** PASSENGER 2 Name **CLEMENT YAK** Gender Male PASSENGER 3 Name **DECLAN YAK** Gender Male 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

# **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number Vehicle Manufacturer	SMR232Z Kia
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	SHARMAINE KOH
NRIC No	SXXXX440H
Contact Number	(Phone) +65-92749788
Address	-
Address complement	-
Postcode	-
Insurance Company Name	AIG Asia Pacific Insurance Pte. Ltd.
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

### SKETCH PLAN

### IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Formmust be completed by the Policyholder and/or the Authorised Driver.
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- 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)

l 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' 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.

21/1/22 Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnel

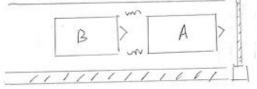
Sketch Plan

Time

BLK 33& Anchorvale Crescent compark Granty

A: SLR2317L

B: SMR 232 Z



Describe Circumstances of the Accident
On 19 Nov 2022 (Saturday) at around 11.08am, I'm exiting from Carpart gantry at 338 Anchorvale Crescent - While my car SLR 2317L is stopping to wait for the gantry to Open, a white kia car SMR 2327 suddenly came from behind and collided to my rear and causing damage to my car.
gantry at 338 Anchorvale Crescent - While my car SLR 2317L is atopping
to wait for the gantry to open, a white kia car SMR 2327
suddenly came from behind and colleded to my rear and couring
plannage to my cons-
3 3 3

## Declaration

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

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnel







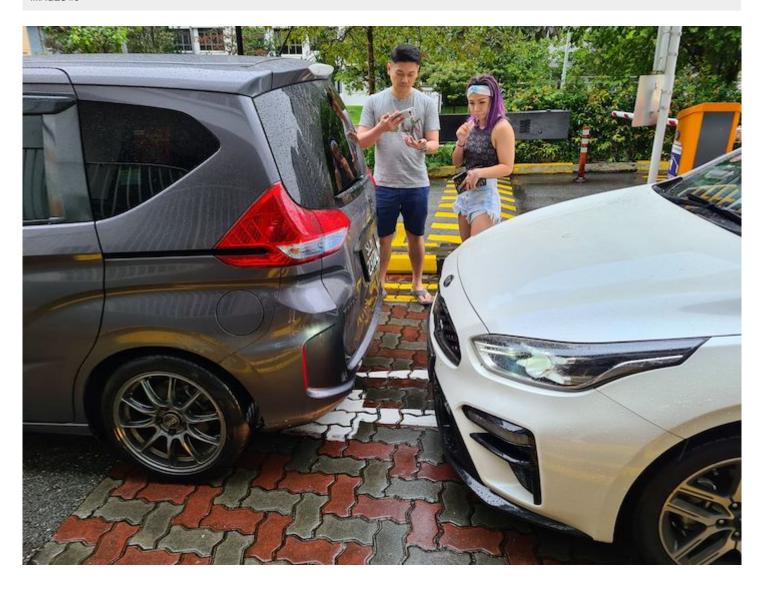














### CERTIFICATE OF INSURANCE

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

COMPREHENSIVE ORIGINAL.

CERTIFICATE NO: MPC22A00134300

Agency Name: BCVRD Private Limited Clussis No. GB71020980

Engine No: LEB5555918

Agency Code:

A0000183

1. Index Mark and Registration Number of Vehicle: \$1,R2317L

2. Name of Policyholder: DANIEL YAK CHEE CHONG

3. Period of Insurance (both dates inclusive): 04 August 2022 to 03 August 2023

4. Persons or Classes of Persons entitled to drive

a) The Policyholder and all Named Drivers declared under the Policy.
 b) Any other person between the ages of 35 to 65 years old 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 Noto: Car or har 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.

5. Limitations as to use

Use for social, demestic and pleasure purposes and for the Policyholder's business. The Policy does not cover use for hime or reward, tuition, driving lest, 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 Dots: Trade.

6. EXCESS APPLICABLE

WINDSCREEN SECTION I - INSURED/NAMED DRIVER

3GD 100.00 3GD 500.00

ADDITIONAL EXCESS:

SECTION 1 - UNNAMED DRIVERS SECTION 1 - DRIVING EXP < 2 YEARS

SGD 500.00 SGD 3,000.00

7. Hire Purchase Company: MAYBANK SINGAPORE LIMITED

Signed for and on behalf of ECICS Limited

AUTHORISED SIGNATORY

### Important Notice:

- () 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 schiele without a valid
- 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.
- iv) The Payment Before Cover Warranty or Premium Payment Warranty found in the Policy must be complied with otherwise there would be no highlisty under the Policy and Certificate of Insurance,