

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	06/01/2023 11:46 (SGT)
Reported by	Both
Date of Accident	05/01/2023 18:30 (SGT)
Exact Location of Accident	Bukit Timah Rd, Singapore
Additional Location Information	TOWARDS CLEMENTI ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGZ8303D
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	LOW KEE SIN
NRIC No	SXXXX648G
Email Address	qpr_lowaircon@yahoo.com.sg
Mobile Phone No	(Phone) +65-97955416
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Stream
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?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1799

INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Policy Number / Cover Note Number	22-MT101933-R04

DRIVER

Name of Driver	LOW KEE SIN
NRIC No	SXXXX648G
Date Of Birth	22/08/1973
Occupation	Outdoor

Date Of Driving Pass	10/12/1996
Driving experience	26 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-97955416
Alt. Phone Number	-
Email Address	qpr_lowaircon@yahoo.com.sg
Address	BLK 421 CANBERRA ROAD #05-417
Address complement	-
Postcode	750421
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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

PLEASE REFER TO SKETCH PLAN

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	SMV6853X
Vehicle Manufacturer	Toyota
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SKW2848G
Vehicle Manufacturer	Suzuki
Vehicle Model	Swift
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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

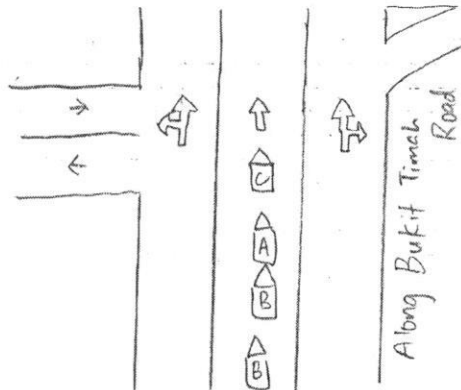
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan




Vehicle A : SGZ8303D
Vehicle B : SMV6853X
Vehicle C : SKW2848G


Describe Circumstances of the Accident

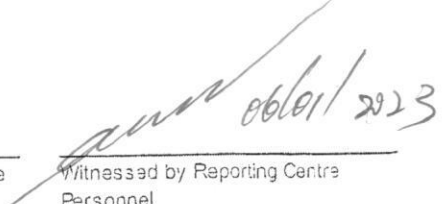
At the stated date and time of accident, my vehicle A (SGZ8303D) was travelling along the stated location. Due to heavy traffic, vehicle C (SKW2848G) that was in front of me jammed braked but I managed to stop in time. When my vehicle A was stationary, vehicle B (SMV6853X) suddenly collided into the rear portion of my vehicle, causing my vehicle to urge forward to hit onto the rear of vehicle C.

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

SWK

Date of Accident : 05/01/2023 Accident Time: 1830 hrs (24-HR-FORMAT)
Accident Place : Along Bukit Timah Road towards Clementi Road
Vehicle Reg. No (Car plate No.) : SGZ 8303D Vehicle Make/Model: Honda Stream
Insurance Company : Tokio Marine Policy No. 22-MT101933-R04
Name of Registered Owner : Company / Individual Low Kee Sin
ID of Registered Owner : Co Reg No: _____ Owner's NRIC No: S7367648G
: Co Contact No: _____ Owner's Contact No: 9795 5416
DRIVER'S Name : Low Kee Sin DRIVER'S NRIC No: S7367648G
DRIVER'S Date of Birth : 22-08-1973 DRIVER'S License Pass Date 10/12/1996
Relationship bet. Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: _____
DRIVER'S Address : Blk 421 Canberra Road #05-417 S(750421)
DRIVER'S Contact No./ Alt No. : 1) 9795 5416 2) _____
DRIVER'S Occupation : INDOOR OUTDOOR (eg. working inside or outside of an ofc)
Email Address : QPR_LOWAIRCON@YAHOO.COM.SG
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (including Driver): 01 Passenger Name: 'As Driver' Gender: M/F
Was the accident reported to the police? YES \ NO Passenger Name: _____ Gender: M/F
Was there any video Captured by car camera: YES \ NO Any Injuries: YES / NO Injured Name: _____
Injured Name: _____
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Other Party Driver's Particulars (if any)

Vehicle Reg No: <u>SMV6853X</u>	Vehicle Reg No <u>SKW 2848G</u>
Vehicle Make/Model: <u>Toyota Raize</u>	Vehicle Make/Model: <u>Suzuki Swift</u>
Name DRIVER: _____	Name DRIVER: _____
IC No. DRIVER: _____	IC No. DRIVER: _____
DRIVER'S Contact & add: _____	DRIVER'S Contact & add: _____

Other Party Driver's Particulars (if any)

Vehicle Reg No: _____	Vehicle Reg No _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name DRIVER: _____	Name DRIVER: _____
IC No. DRIVER: _____	IC No. DRIVER: _____
DRIVER'S Contact & add: _____	DRIVER'S Contact & add: _____

Tokio Marine Insurance Singapore Ltd

Company Reg No: 192399013M; GST Reg No: M2-000023-41

20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 8111 F: (65) 6221 4355 E: tms@tokiomarine.com.sg W: www.tokiomarine.com

Authorized of the
Tokio Marine Group



TOKIO MARINE
INSURANCE GROUP
FORM MX1

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)

Policy No.: 22-MT101933-R04 (Private Motor Car)

- | | | |
|--|--|-------------------------|
| 1. Index Mark and Registration Number of Vehicle | SGZ8303D | Chassis No.: RN61044284 |
| 2. Name of Policyholder | LOW KEE SIN | |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 19.05.2022 | |
| 4. Date of Expiry of Insurance | 18.05.2023 | |
| 5. Persons or Class 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitations as to use*

Use only for social domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed-testing or 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.

* Limitations rendered imperative 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost/destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Account: 0596DDA

Insurance Plan: Third Party Cover Only

Tokio Marine Insurance Singapore Ltd.

Authorised Signature