

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	30/01/2023 15:49 (SGT)
Reported by	Both
Date of Accident	28/01/2023 12:00 (SGT)
Exact Location of Accident	Malaysia
Additional Location Information	NORTH SOUTH HIGHWAY KM264 MARK
Country/State of Loss	Malaysia

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF1477C
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	HO KHEK CA
NRIC No	SXXXX360H
Email Address	hokhekca@yahoo.com.sg
Mobile Phone No	(Phone) +65-90295611
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
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	1598

INSURANCE COMPANY

Name of Insurance Company	MSIG Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	A 300633408 ATM

DRIVER

Name of Driver	HO KHEK CA
NRIC No	SXXXX360H
Date Of Birth	16/05/1971
Occupation	Indoor

Date Of Driving Pass	15/11/1994
Driving experience	28 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90295611
Alt. Phone Number	-
Email Address	hokhekca@yahoo.com.sg
Address	BLK 488 JURONG WEST AVENUE 1 #09-147
Address complement	-
Postcode	640488
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	AFTER RAIN
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	Yes
Number of vehicles involved in the accident	7
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)	3
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	-

FOREIGN VEHICLE 1

Vehicle Registration Number	PJS4885
Vehicle Category	Private car

PASSENGER 1

Name	HO ZI XUAN
Gender	Female

PASSENGER 2

Name	LIM SIEW TAO
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	IPOH TRAFFIC POLICE
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH AND IPOH TRAFIK/002246/23

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 PJS4885
Vehicle Manufacturer Toyota
Vehicle Model Camry
Vehicle Variant -
Vehicle Colour -
Vehicle Category Private car
Name of Driver TAN XIN TZE
Passport No/FIN 9XXXXXXX6058
Contact Number (Phone) +60-4468036
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 BPD9183
Vehicle Manufacturer -
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 3

Vehicle Registration Number AHG9021
Vehicle Manufacturer -
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 4

Vehicle Registration Number MDN3558
Vehicle Manufacturer -
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 5

Vehicle Registration Number	AJJ5284
Vehicle Manufacturer	-
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 6

Vehicle Registration Number	KCP4606
Vehicle Manufacturer	-
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)	-

SKETCH PLAN

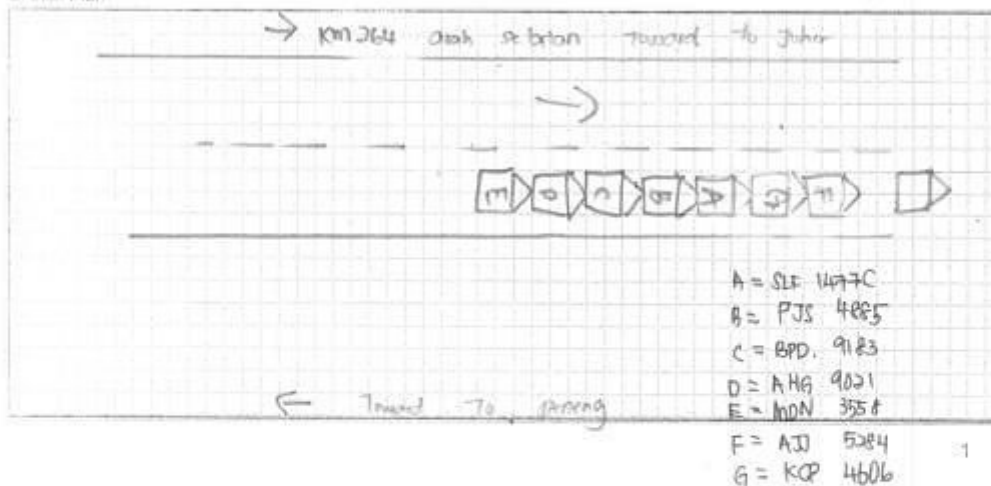
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**
I understand, 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 requested 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/in all packages); and/or
(v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes");
(b) all my 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/are 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.

No. 30/1/2023 No. 30/1/2023 30/01/2023

Policyholder's Signature / Date & Time Driver's Signature (if Driver is not the policyholder) / Date & Time Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Sketch Plan



Describe Circumstance of the Accident

Date : 24/Jan/2023

Time : around 12 noon

I was traveling from Sungai Petani on the way back to Singapore, At around KM 264 towards Johore (Joh). Due to heavy traffic, I ~~was~~ stop I have to stop my car, out of sudden I heard loud noise from the rear of my car. I realised a Toyota Camry PJS 4885 hitting the back of my car and up my car was push toward and hitting the car at the front, car plate number KCP4606 type Proton Persona.

Note: Refer to Malaysia Traffic Police Report

TRAFIK JP01/002246/23

Declaration

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

No 30/1/2023

Polyholder's Signature / Date & Time

No 30/1/2023

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

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID Card)























POL.316

CAWANGAN TRAFIK
 IBU PEJABAT POLIS DAERAH IPOH
 POLIS DIRAJA MALAYSIA
 30000 IPOH
 PERAK
 09-2451500



Besit Akuan Penerimaan Repot Polis :
 Nama Pengadu : HO KHEK CA
 No Kad Pengenalan / Pasport : 710518015147
 No Repot Polis : TRAFIK IPOH/002246/23
 Tarikh @ Masa Repot Polis : 26/01/2023 @ 10:47
 Pengesahan Penerimaan Repot : _____

Tandatangan Ketua Pejabat Pertanyaan
 : (R190273) S.J.N MOHD. RADZLEE BIN BURHANUDDIN
 : BUKIT AMAN , Bukit Aman
 No Telefon Bimbit : 013-8844130

Pegawai Penyiasat :
 Nama Pegawai Penyiasat : _____
 Tempat Tugas : _____
 No Telefon Pejabat : _____
 Tarikh @ masa Perjumpaan : _____
 Pengesahan Penerimaan Repot : _____

Tandatangan Pegawai Penyiasat
 Nama : _____ No Badan : _____ Pangkat : _____
 Tarikh @ Masa Gambar Diambil : _____
 Pengesahan Gambar Diambil : _____

Tandatangan Juru Gambar
 Nama : _____ No Badan : _____ Pangkat : _____
 Tarikh @ Masa Gambar Diambil : _____
 Pengesahan Gambar Diambil : _____

Unit Pembekalan Dokumen Siasatan :
 No Telefon Unit Pembekalan Dokumen : _____

Waktu Pejabat :
 Isnin - Khamis :
 08:00 Pagi - 01:00 Tengah Hari
 02:00 Petang - 04:30 Petang
 Jumaat :
 08:00 Pagi - 12:30 Tengah Hari
 03:00 Petang - 04:30 Petang
 Cuti Umum / Khas : Tutup

Jenis Dokumen Dibekal Kepada Pengadu :
 1. Salinan Repot Polis ☐
 2. Gambar Kenderaan ☐
 3. Rajah Kasar Kemalangan ☐
 4. Keputusan Siasatan ☐
 5. Lain-lain Dokumen ☐
 Tarikh @ Masa Dokumen Diserah : _____
 Pengesahan Kaunter Pembekalan Dokumen : _____
 Tandatangan Pegawai Kaunter Pembekalan Dokumen : _____



POLIS DIRAJA MALAYSIA REPOT POLIS

Balai : TRAFIK IPOH
Daerah : IPOH
Kontinjen : PERAK
No. Repot : TRAFIK IPOH/002246/23
Tarikh : 28/01/2023
Waktu : 1347 PM
Bahasa Diterima : B. Malaysia

Agen Penyelamat : R180273
No. Repot Bersangkut : TRAFIK IPOH/002233/23

Butir-butir Penerima Repot :

Nama : MOHAMAD HARRIS BIN MAHHAQZIR
No. Badan : R189717
Pangkat : KPL

Butir-butir Jurubahasa (Jika Ada) :

Nama : —
No. Pasport : —
Alamat : —
No. K/P (Baru) : —
Bahasa Asal : —
No. Polis/Tentera : —

Butir-butir Pengadu :

Nama : HO KHEK CA
No. K/P (Baru) : 710516015147
No. Polis/Tentera : A1815748
No. Pasport : —
No. Sijil Beranak : —
Jantina : Laki
Tarikh Lahir : 16/05/1971
Umur : 51 Tahun 8 Bulan
Keturunan : Cina
Warganegara : Malaysia
Pekerjaan : SALES
Alamat Tinggal : NO 162 JALAN 2 N/V, 86300 JOHOR
Alamat IbuBapa : —
Alamat Pejabat : —
No. Tel (Rumah) : —
No. Tel (Pejabat) : —
No. Tel (Bimbit) : 6590285611
Emel : —

Pengadu Menyatakan :

PADA 28/01/2023 JAM LEBIH KURANG 1200 HRS SAYA MEMANDU MOTOKAR NOMBOR SLF1477C JENIS TOYOTA COROLLA ALTIS DARI SUNGAI PETANI HENDAK PERGI KE SINGAPORE, SEMASA MELALUI LEBUHRAYA UTARA-SELATAN DAN KETIKA BERADA DI KM 264 ARAH SELATAN, SAYA TELAH BERHENTIKAN MOTOKAR SAYA KERANA KENDERAAN DI HADAPAN SAYA TELAH BERHENTI TIBA-TIBA SAYA TERDENGAR BUNYI DENTUMAN KUAT DARI ARAH BELAKANG, SAYA TURUN DAN LIHAT SEBUAH MOTOKAR NOMBOR PJS4885 JENIS TOYOTA CAMRY TELAH MELANGGAR BAHAGIAN BELAKANG MOTOKAR SAYA. AKIBAT PERLANGGARAN ITU, MOTOKAR SAYA TELAH TERLAJAK KE HADAPAN DAN TERKENA BAHAGIAN BELAKANG SEBUAH MOTOKAR NOMBOR KCP4606 JENIS PROTON PERSONA. KEROSAKAN MOTOKAR SAYA IALAH BUMPER DEPAN DAN BELAKANG, BONET DEPAN DAN BELAKANG, LAMPU DEPAN DAN BELAKANG, FENDER DEPAN DAN BELAKANG, LAIN-LAIN KEROSAKAN BELUM PASTI, SEKIAN LAPORAN SAYA.

Tandatangan Pengadu:

Tandatangan Jurubahasa (Jika ada):

Tandatangan Penerima Repot:

ID Pencetak | Tarikh @ Masa Cetak : R189717 | 28/01/2023 01:56:01 PM



POLIS DIRAJA MALAYSIA REPOT POLIS

TP Rapor?

Batal	TRAFFIK IPOH	Pegawai Penyiasat : R190273
Daerah	IPOH	No. Repot Bersangkut : TRAFIK IPOH/002233/23
Kordinjen	PERAK	
No. Repot	TRAFFIK IPOH/002245/23	
Tarikh	28/01/2023	
Waktu	1333 PM	
Bahasa Diterima	B. Malaysia	

Butir-butir Penerima Repot :

Nama : MOHAMAD HARRIS BIN MAHHADZIR	No. Badan : R189717	Pangkat : KPL
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Butir-butir Jurubahasa (Jika Ada) :

Nama : —	No. K/P (Baru) : —	No. Polis/Tentera : —
No. Pasport : —	Bahasa Asal : —	
Alamat : —		

Butir-butir Pengadu :

Nama : TAN XIN TZE	No. Polis/Tentera : —	No. Pasport : —
No. K/P (Baru) : 960609026058	Jantina : —	Tarikh Lahir : 09/06/1996
No. Sijil Beranak : —	Perempuan	Warganegara : Malaysia
Umur : 26 Tahun 7 Bulan	Keturunan : Cina	
Pekerjaan : FARMASI		
Alamat Tinggal : NO 87 LORONG WIRA INDAH II TAMAN WIRA INDAH, 08000 KEDAH		
Alamat IbuBapa : —		
Alamat Pejabat : —		
No. Tel (Rumah) : —	No. Tel (Pejabat) : —	No. Tel (Bimbit) : 016-4468036
Email : —		

Pengadu Menyatakan :

PADA 28/01/2023 JAM LEBIH KURANG 1200 HRS SAYA MEMANDU MOTOKAR NOMBOR PJS4885 JENIS TOYOTA CAMRY DARI SUNGAI PETANI HENDAK PERGI KE IPOH, SEMAFA MELALUI LEBUHRAYA UTARA-SELATAN DAN KETIKA BERADA DI KM 254 ARAH SELATAN, SAYA TELAH BERHENTIKAN MOTOKAR SAYA KERANA KENDERAAN DI HADAPAN TELAH BERHENTI, TIBA-TIBA SAYA TERDENGAR BUNYI DENTUMAN KUAT DARI ARAH BELAKANG, SAYA TURUN DAN LIHAT SEBUAH MOTOKAR NOMBOR BPD9183 JENIS PROTON PERSONA TELAH MELANGGAR BAHAGIAN BELAKANG MOTOKAR SAYA, AKIBAT PERLANGGARAN ITU, MOTOKAR SAYA TELAH TERLAJAK KE HADAPAN DAN TERKENA BAHAGIAN BELAKANG SEBUAH MOTOKAR NOMBOR SLF1477C JENIS TOYOTA COROLLA ALTIS. KEROSAKAN MOTOKAR SAYA IALAH BUMPER DEPAN DAN BELAKANG, LAMPU BELAKANG, BONET DEPAN DAN BELAKANG, FENDER BELAKANG, EKZOS, LAIN-LAIN KEROSAKAN BELUM PASTI SEKIAN LAPORAN SAYA.

Tandatangan Pengadu:

Tandatangan Jurubahasa (jika ada):

Tandatangan Penerima Repot:

ID Pencetak : Tarikh @ Masa Cetak

: R189717 | 28/01/2023 01:44:45 PM