

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
-----------------------------	----------

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 -

SKETCH PLAN

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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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)

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.

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)

Sketch Plan

→ KM 264 arah selatan toward to Johor

→

← Toward to Perang

A = SLF 1477C
 B = PJS 4885
 C = BPD 9183
 D = AHG 9021
 E = MDN 3558
 F = AJJ 5284
 G = KQP 4606

Describe Circumstance of the Accident

Date : 28/Jan/2023

Time : around 12 noon

I was traveling from Sungai Petani on the way back to Singapore, At around KM 264 towards Johore (Ipoh) 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 end 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

TRAFFIC IPOH/022246/23

Declaration

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

No 30/1/2023

Policyholder'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)

CAWANGAN TRAFIK



IBU PEJABAT POLIS DAERAH IPOH

POLIS DIRAJA MALAYSIA

30000 IPOH

PERAK

05-2451500

Resit Akaun Penerimaan Repot Polis :

Nama Pengadu : HO KHEK CA
 No Kad Pengenalan / Paspot : 710516015147
 No Repot Polis : TRAFIK IPOH/002246/23
 Tarikh @ Masa Repot Polis : 28/01/2023 @ 18:47
 Pengesahan Penerimaan Repot :

Tandatangan Ketua Pejabat Pertanyaan

Pegawai Penyelamat :

Nama Pegawai Penyelamat : (R190273) SJN MOHD. RADZLEE BIN BURHANUDDIN
 Tempat Tugas : BUKIT AMAN, Bukit Aman
 No Telefon Pejabat : No Telefon Bimbit : 013-8844130
 Tarikh @ masa Perjumpaan :
 Pengesahan Penerimaan Repot :

Tandatangan Pegawai Penyelamat

Juru Gambar :

Nama : No Badan : Pangkat :

Tarikh @ Masa Gambar Diambil :
 Pengesahan Gambar Diambil :

Tandatangan Juru Gambar

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

Pegawai Penyiasat : R190273
No. Repot Bersangkut : TRAFIK IPOH/002233/23

Butir-butir Penerima Repot :

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

Butir-butir Jurubahasa (Jika Ada) :

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

Butir-butir Pengadu :

Nama : HO KHEK CA
No. K/P (Baru) : 710516015147
No. Sijil Beranak : —
Umur : 51 Tahun 8 Bulan
Pekerjaan : SALES
Alamat Tinggal : NO 162 JALAN 2 N/V, 86300 JOHOR
Alamat IbuBapa : —
Alamat Pejabat : —
No. Tel (Rumah) : —
Emel : —
No. Polis/Tentera : A1815748
Jantina : Lelaki
Keturunan : Cina
Tarikh Lahir : 16/05/1971
Warganegara : Malaysia
No. Tel (Pejabat) : —
No. Tel (Bimbit) : 6590295611

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?

Balai : TRAFIK IPOH
Daerah : IPOH
Kontinjen : PERAK
No. Repot : TRAFIK IPOH/002245/23
Tarikh : 28/01/2023
Waktu : 1333 PM
Bahasa Diterima : B. Malaysia

Pegawai Penylasat : R190273
No. Repot Bersangkut : TRAFIK IPOH/002233/23

Butir-butir Penerima Repot :
Nama : MOHAMAD HARRIS BIN MAHADZIR No. Badan : R189717 Pangkat : KPL

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 : Perempuan Tarikh Lahir : 09/06/1996
No. Sijil Beranak : — Keturunan : Cina Warganegara : Malaysia
Umur : 26 Tahun 7 Bulan
Pekerjaan : FARMASI
Alamat Tinggal : NO 87 LORONG WIRA INDAH 8 TAMAN WIRA INDAH , 08000 KEDAH
Alamat IbuBapa : —
Alamat Pejabat : —
No. Tel (Rumah) : — No. Tel (Pejabat) : — No. Tel (Bimbit) : 016-4468036
Emel : —

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, SEMASA MELALUI LEBUHRAYA UTARA-SELATAN DAN KETIKA BERADA DI KM 264 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

Email: sm@idac.com.sg Tel no: 6555 6888

*If no proper documents are produced, IDAC shall not file the report. Information will be discarded after one week.

Date of Accident: 28 / 01 / 2023 (dd/mm/yy)

Time of Accident: 12 : 00 (24-HR-FORMAT)

Vehicle No.: SLF 1477C Vehicle Make & Model / Engine (cc): Toyota AHis Private Hire: (Y / N)

Exact location of Accident: North South Highway KM264 mark (Malaysia)

Policyholder's Name / IC No.: Ho Khak Ca ROC/UEN (Company): S7174360H

Driver's Name / IC No.: (As Above) ☒

Driver's Contact No.: 9029 5611 Company Contact No / Owner Contact No:

Driver's Address: Bk 488 Jurong West Ave 1 #09-147 (S) 640488

Owner Email address: hokhekca@yahoo.com.sg Insurance Company: MSIG

Driver Email address:

Relationship between Owner & Driver: (Please **CIRCLE** one only)

Owner / Spouse / Children / Friend / Parents / Sibling / Relative / Employee / Hirer or Others specify:

What do you wish to claim? (Please **TICK** one only)

☐ Own Insurance / ☒ Other Vehicle (The one you want to claim against) / ☐ Reporting (For Record Purpose)

Exact purpose for which the vehicle was being used at time of accident?

Occupation (nature of job) ☒ Indoor / ☐ Outdoor

☒ Private use / ☐ Work purpose

*No. of Passengers (Including Driver):

*Passenger Name: HO ZI XUAN Gender: Male / Female ☒

*Passenger Name: Lim Siew Tab Gender: Male / Female ☒

Weather condition & Road conditions? (On the day of accident)

☐ Clear & Dry / ☐ Raining & Wet / ☒ After-Rain & Wet / ☐ Drizzling & Wet / Others:

Was there any video captured by your Car Camera? ☐ Yes / ☐ No Remarks:

Any Injuries: ☐ Yes / ☒ No (If YES) Injured Person's Name:

Injuries Sustain: Injured Person in Which Vehicle:

Police Report filed: ☒ Yes / ☐ No (If YES) Which Police Station: Ipoh traffic police

The Other Party(s) Details:

1. Driver's Name / IC No: Tan Xin Tze Vehicle No: ☒ PJS 4885

Driver's Contact No: 016-4468036 Insurance Company:

2. Driver's Name / IC No (If Any): Vehicle No: ☒ BPD 9183

Driver's Contact No: Insurance Company:

*Independent Witness (If Any): Contact No:

Preferred Workshop Name: Contact No:

☒ D AHG 9021

☒ E MDN 3558

☒ F AJJ 5284

☒ G KCP 4606

**MSIG**

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.

**TOYOTA DRIVEELITE2
Comprehensive**

Certificate No. A 300633408 ATM

Excess : SGD500

Windscreen Excess : SGD100

1. Index Mark and Registration Number of Vehicle
SLF1477C

2. Name of Policyholder
Ho Khok Ca

3. Effective Date of the Commencement of Insurance for the purposes of the Act
16/08/2022

4. Date of Expiry of Insurance
15/08/2024

5. Persons or Classes of Persons entitled to drive*
Ho Khok Ca
Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

*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 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 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 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.

PLEASE NOTE ALL CLAIMS RELATED REPAIR MUST BE CARRIED OUT AT BORNEO MOTORS (S) PTE LTD OR AT ANY MSIG AUTHORISED WORKSHOP. REFER TO MSIG.COM.SG FOR LIST OF AUTHORISED WORKSHOPS. WINDSCREEN EXCESS IS WAIVED AT BORNEO MOTORS (S) PTE LTD FOR WINDSCREEN RELATED CLAIMS. THIS POLICY INCLUDES COURTESY CAR BENEFIT.

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 Insurers

Mack Eng
Chief Executive Officer