

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	25/01/2023 19:37 (SGT)
Reported by	Driver
Date of Accident	24/01/2023 15:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JUNCTION ALONG PUNGGOL DRIVE & PUNGGOL PLACE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLM8328S
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ONE ENG HONG (WANG RONGLIANG)
NRIC No	S7326400F
Email Address	SUZHENC SZ@GMAIL.COM
Mobile Phone No	(Phone) +65-98890314
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Outlander
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	2400

INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Policy Number / Cover Note Number	JMYXTGF3WHZ002173

DRIVER

Name of Driver	CHUA SUZHEN
NRIC No	S8608026E
Date Of Birth	14/03/1986
Occupation	Indoor

Date Of Driving Pass	20/11/2014
Driving experience	8 YEARS AND 2 MONTHS
Gender	Female
Mobile Number	(Phone) +65-98890314
Alt. Phone Number	-
Email Address	SUZHENC SZ@GMAIL.COM
Address	BLOCK 443 HOUGANG AVENUE 8 #05-1585
Address complement	-
Postcode	530443
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Relative
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 - Cross Junction
Weather Conditions	LIGHT RAIN
Road Surface	Wet

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

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	SBS6501H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Bus
Name of Driver	TOH ENG ANN
NRIC No	S1744327E

Contact Number	(Phone) +65-98352638
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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3. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
4. Any false reporting may be referred to the Traffic Police Department for investigation.
5. 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.
6. 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.

6. 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 be 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' law firms/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) administering my claims (including the following: correspondence, settlement, transfer, reports or notices, etc.) 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/postal packaging; and/or

(iii) 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 firms/law firms, may be permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

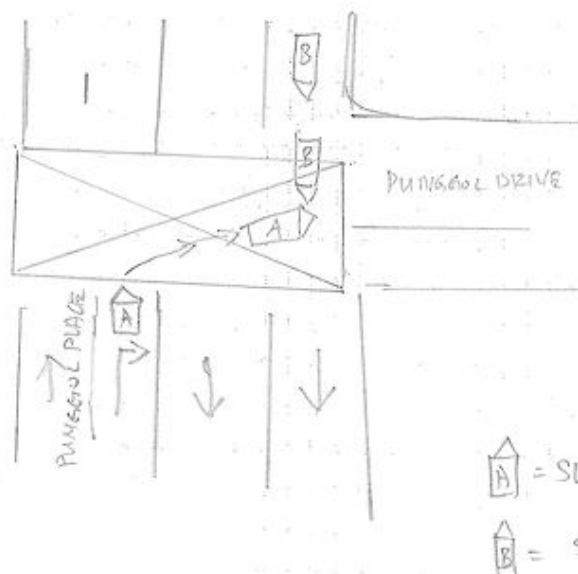
(c) my Personal Information may be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be based outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by: Please Print Name & Signature

Sketch Plan



JMFORTDEL68C ENGINEERING PTE LTD
205 BRADFIELD ROAD
SINGAPORE 679701

Describe Circumstance of the Accident

ON 24/1/23 AT ABOUT 3.20pm, I WAS DRIVING 3CM 83285
 ALONG PUNGGOL PLACE TURNING RIGHT TO PUNGGOL DRIVE, WHEN I
 DIDN'T NOTICE THE OPPOSITE BUS SBS 6501H APPROACHING AND
 HAD AN ACCIDENT WITH SBS 6501H.

Declaration

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



Policyholder's Signature / Date & Time

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

SMFOTDELGR ENGINEERING PTE LTD
 205 BRADDELL ROAD
 SINGAPORE 579701

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



INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST Reg. No. M2-0078806-X
64 | Cecil Street | #04 | #05 | #06-02 | IOB Building | Singapore 049711
Office (65) 63476100 Email insure@iil.com.sg
Fax (65) 62244174 Website www.iil.com.sg

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)

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

CERTIFICATE NO.: D19MPC0002659_03		COVER: COMPREHENSIVE
1. Index Mark and Registration Number of Vehicle	: SLM8328S	
Chassis No	: JMYXTGF3WHZ002173	
2. Name of Policyholder	: ONG ENG HONG (WANG RONGLIANG)	
3. Effective date of Insurance	: 06 Jun 2022	
4. Expiry date of Insurance	: 05 Jun 2023	
5. Persons or Classes of Persons entitled to drive*	<p>(a) The Policyholder. The Policyholder may also drive a Motor Car not belonging to or hired (under a hire purchase agreement or otherwise) to him/her or his/her employer or his/her partner.</p> <p>(b) Any other person who is driving on the Policyholder's order or with his/her 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.</p>	
6. Limitations as to use*	<p>Use only for social, domestic and pleasure purposes and for the Policyholder's business.</p> <p>The Policy does not cover</p> <p>a) Use for hire or reward. b) Use for racing, pace-making, reliability trial, speed-testing. c) Use for the carriage of goods other than samples in connection with any trade or business. d) Use for any purpose in connection with the Motor Trade.</p> <p>*Limitations rendered inoperative 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.</p>	
Insured & Named Drivers Excess Sect I	: SGD1,000.00	
Unnamed Drivers Excess Sect I	: SGD1,500.00	
Windscreen Excess	: SGD100.00	
Hire Purchase Company	: N/A	
FOR DRIVERS BELOW 21 YEARS OR ABOVE 69 YEARS OF AGE &/OR LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, ADDITIONAL EXCESS OF \$2500/- ON SECTION I WILL BE APPLICABLE.		
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).		
Agent/Broker	: A000047/SINCL PTE LTD	
Date of Issue	: 20/05/2022 17:03:38	
M.X. 1 - PRIVATE CAR(INDIVIDUAL)		
		<p>For India International Insurance Pte Ltd</p> <p></p> <p>Authorized Signatory</p>





