# **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.

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 16/01/2023 20:01 (SGT) Reported by Date of Accident 13/01/2023 18:39 (SGT) Exact Location of Accident Singapore Additional Location Information ALONG BANDERMEER ROAD (INFRONT OF BENDEMEER PRIMARY SCHOOL) Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SKZ233C

# INSURED/POLICYHOLDER

Is company? Name Of Registered Owner LAU SOH YIN NRIC No S1459357H Email Address VILSY2002@OUTLOOK.COM Mobile Phone No (Phone) +65-97334880 Alternative Phone No

# VEHICLE PARTICULARS

Manufacturer Honda Model VEZEL 1.5X A 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 1496

# INSURANCE COMPANY

Name of Insurance Company QBE Insurance (Singapore) Pte Ltd Policy Number / Cover Note Number 8-V0025056-MVA-R002

# DRIVER

Name of Driver RAPHAEL SOUW HAN JIE NRIC No S9743870F Date Of Birth 15/11/1997

Occupation Indoor Date Of Driving Pass 22/12/2020 Driving experience 2 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-97733180 Alt. Phone Number Email Address VILSY2002@OUTLOOK.COM Address 123 MCNAIR ROAD Address complement 09-17 Postcode 320123 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured Child Does Driver Own Other Vehicles? Nο 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 Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? 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? 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 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 GY65712K Vehicle Manufacturer Vehicle Model Vehicle Variant

Commercial vehicle

LEE WAN LYE

Vehicle Colour
Vehicle Category

Name of Driver

Contact Number	(Phone) +65-96460857
Address	<del>-</del>
Address complement	_
Postcode	_
Insurance Company Name	_
Nature Of Damage	_
Details of property damaged in accident	_
No. Of Passenger (Including Driver)	_

#### SKETCH PLAN

# IMPORTANT NOTICE

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- 2. This Form must be completed by the Policyholder and/or the Actual Driver.
- 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.
- 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.
- 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.

Policyholder's Signature / Date & Time

LAU SOH YIN

16/01/23 1315HEA.

RAPHMEL SOUND.

Actual Driver's Signature (if driver is not the policyholder) / Date & Time Witnessed by Reporting Centre P

(Name as in NRIC/ID card)

Sketch Plan

SKZ 233 C

SKZ 233 C

GT 6512 K

bendemer Ref.

Describe Circumstance of the Accident	
Accordent nappened on 13/01/2023 @18:39 a	long bundemeer
Road (infront of Budemell Primary seh	100)
I was driving my veh (SLZ 2336) along Bu	ndencer Rd on
the 3rd care beside the bus lane. Front vel	n slow down and
came to a stop and I followed. All of a	andden 2 feit
an impact from my veh view and vialised	vuh B (44 65 12 K)
had hit into my ret rear.	
Nobody injured except my reh rear sus	town some damages

Declaration

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

16/01/23 1315HR1.

RAPHAEL SOUN

Actual Driver's Signature (if driver is not the policyholder)

Witnessed by Reporting Card

(Name as in NRIcht)

vJun2022

# QBE Insurance (Singapore) Pte Ltd

1 Wallich Street, #35-01 Guoco Tower, Singapore 078881 Tel: 65-6224 6633 Fax: 65-6533 3270 GST Registration No.: M200644018



MCI Type MX1

#### Certificate of Insurance

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULE, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA) MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate No. Account Name PANA HARRISON (ASIA) PTE 8-V0025056-MVA-R002

LTD

1 Index Mark and Registration Number of Vehicle or Chassis No:

SKZ233C

2 Name of Policyholder LAU SOH YIN

Effective date of Commencement of Insurance for the purpose of the Regulations

15/01/2022

4 Date of Expiry

14/01/2023

5 Person or Classes of Person entitled to drive\*

(a) The Policyholder.

The Policyholder may also drive a motor car not belonging to him/her and not hired to him/her under a hire purchase agreement. (b) Any 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 the 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 inoperative by Section 8 of the Motor Vehicles (Third Party Risk and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia) are not to be included under these headings

I/WE HEREBY CERTIFY that the Policy to which this certificate relates is issued in accordance with the provisions of the Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act. 1987 (Malaysia)

Hire Purchase: UNITED OVERSEAS BANK LIMITED

Date of Issue: 03/01/2022

QBE Insurance (Singapore) Pte Ltd

Authorized Signature

















