# 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.

- 4. The issue and acceptance 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 01/02/2023 19:31 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 01/02/2023 07:50 (SGT) Exact Location of Accident Near Bef Sembawang Shipyard G 3, Singapore Additional Location Information ADMIRALTY RD W TOWARDS ADMIRALTY RD BEFORE SEMBAWANG DR Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

**BMW** 

Vehicle Registration Number SLM5890D

Manufacturer

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner KANG HOCK HUAT, ROY NRIC No S7528801H Email Address ROY.KANG@REINHAUSEN.SG Mobile Phone No (Phone) +65-96399676 Alternative Phone No

#### VEHICLE PARTICULARS

Model 216d Variant **GRAN TOURER LED NAV 7 SEATER** 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 Allianz Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number SP2002965910-01

### DRIVER

Name of Driver KANG HOCK HUAT, ROY NRIC No S7528801H Date Of Birth 19/09/1975

Occupation Indoor Date Of Driving Pass 24/09/2001 Driving experience 21 YEARS AND 5 MONTHS Gender Mobile Number (Phone) +65-96399676 Alt. Phone Number Email Address ROY.KANG@REINHAUSEN.SG Address APT BLK 19 HOUGANG AVENUE 3 #04-195 Address complement **SINGAPORE** Postcode 530019 Is the driver the policyholder? Yes If No. Relationship of the Driver with the Insured 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 Chain Collision Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? 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? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT AS OF ABOVE DATE AND TIME, I WAS DRIVING MY VEHICLE (SLM5890D) ALONG ADMIRALTY RD W TOWARDS ADMIRALTY RD BEFORE SEMBAWANG DR ON THE RIGHT LANE OF A 2 LANE RD. VEHICLE C (SMX2801L) BRAKED AND I FOLLOWED ACCORDINGLY. OUT OF A SUDDEN, VEHICLE B (GY4750C) COLLIDED INTO THE REAR PORTION OF MY VEHICLE. DUE TO THE IMPACT, MY VEHICLE SURGED FORWARD AND LIGHTLY COLLIDED INTO VEHICLE C REAR PORTION. 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 GY4750C Vehicle Manufacturer Vehicle Model

Vehicle Variant
Vehicle Colour

Vehicle Category	Commercial vehicle
Name of Driver	KOH SEOK HUAT
NRIC No	-1
Contact Number	(Phone) +65-90563743
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	SMX2801L
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

#### 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 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.
- 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 aforesald,
- 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' lawyeraflew 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

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

(aw Yi lin

Sketch Plan venicle A SLM 5890 D Admiratty Rd W Vehicle B GY 4750C Busgiop towards Admiralty Rd 5816 Vahicle 6 SMX 2801 before Sembation of Rd C A B

S CT ODON	e date and time, I was driving my vehicle
SLM 5890 D)	along Admiralty Rd W towards Admiralty Rd before
embowang Dr	on the right lane of a 2 lane Fol-
ende c (	SMX 2801 L) bratad and I followed accordingly.
at of a	Sudden, vehicle B ( GY 4750 C) collided into the rear
portion of	my vehicle are to the impact, my vehicle surged
forward and	I lightly collided into vehicle C Fear portion
	A contract of the contract of

Declaration

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

Policyholder's Signature / Dale & Time

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

Witnessed by Reporting Centre Personnel (Name as in NRIGITO card)

2



























# Allianz Insurance Singapore Pte. Ltd.

#### CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP 189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 (REPUBLIC OF SINGAPORE) MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1960

OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Certificate Number

SP2002965910-01

Date of Issue

28 September 2022

Coverage

Comprehensive

Policyholder

KANG HOCK HUAT ROY

Period of Insurance

10 October 2022 to 09 October 2023(both dates inclusive)

Registration No.

SLM5890D

Chassis number of Vehicle

WBA2E320805H45977

#### Persons or Classes of Persons Entitled to Drive":

(a) The Pelicyholder

(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 bearing or other knas at regulation to drive the Matar Vehicle or has been permitted and is not disquarified by order of Court of Law at by reason of any exactment or regulations in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage

#### Limitation as to Use^:

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

#### The Policy does not cover:

- (a) use for hire or reward
- (b) use for racing, pace-making, reliability trials or speed testing
- (c) use for the carriage of goods (other than samples) in connection with any trade or business
- (d) use for any purposes in connection with the Motor Trade

"Limitation rendered (rioperative by Section 8 of Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Fransport Act, 1987 (Malayva), 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 Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or Amendment, Act or Acts passed in substitution thereof

28 September 2022

Issued Date

Hicham Raissi Chief Executive Officer Allianz Insurance Singapore Pte. Ltd.

Intermediary Code

: 0000336 AAC PERFORMANCE PTE LTD

Excess

: Own Damage : Windscreen Damage SGD

0.00 100.00

Allianz Insurance Singapore Pte. Ltd. I UEN 2019039130

79 Robinson Read #09-01 Singapore 068897 | Yel. +65 6714 3369 | Website: www.alianz.sg

