

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	31/01/2023 11:40 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	24/01/2023 02:45 (SGT)
Exact Location of Accident	Malaysia
Additional Location Information	JB CUSTOM CIQ
Country/State of Loss	Malaysia

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNB1557C
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	KOM WEI KHEONG DENNIS
NRIC No	S2207385J
Email Address	DENNIS_KOM@HOTMAIL.COM
Mobile Phone No	(Phone) +65-97453580
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A4
Variant	A4 2.0 TFSI S TRONIC
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	1984

INSURANCE COMPANY

Name of Insurance Company	Sompo Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	D22MTPV01011451

DRIVER

Name of Driver	KOM WEI KHEONG DENNIS
NRIC No	S2207385J
Date Of Birth	14/10/1972
Occupation	Indoor

Date Of Driving Pass	11/07/1994
Driving experience	28 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97453580
Alt. Phone Number	-
Email Address	DENNIS_KOM@HOTMAIL.COM
Address	100 YIO CHU KANG GARDENS
Address complement	-
Postcode	568142
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	Side Swipe
Weather Conditions	Clear
Road Surface	Dry

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)	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	-

PASSENGER 1

Name	CHONG CHIN
Gender	Female

PASSENGER 2

Name	JASMINE KONG
Gender	Female

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

PLS REFER TO THE SKETCH PLAN BY DRIVER

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	SLE1532G
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 lodgment 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.
 - (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
 - (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

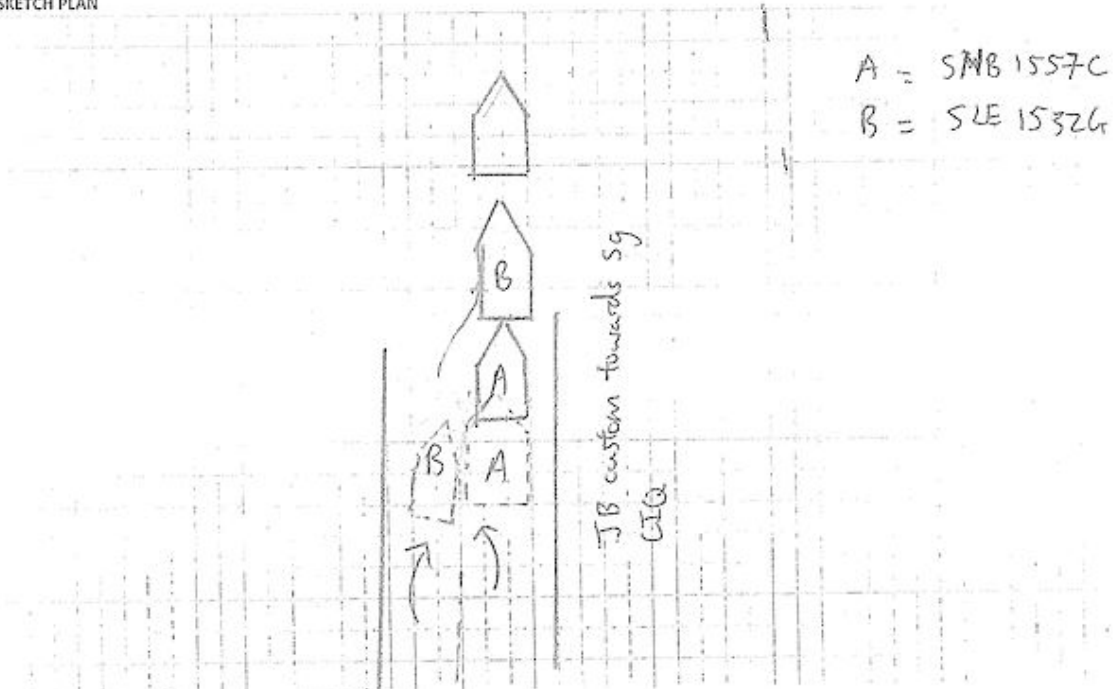
I AM AWARE THAT MY INSURER MAY HAVE A 24 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.


Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The accident happened on ~~27th~~ Jan 24th Jan 2023 at 0245 Hr along JB custom CIG towards SG. The weather was clear and road was dry.

There was a massive jam at the custom and I was in my lane after merging with the other lane driving vehicle A, SMB 1557C. Then there was a space in front of me, so as I move off, vehicle B, SLE 1532G aggressively cut from my left rear, hitting onto my left front fender and slot into the space. But as the vehicle ahead of me put to a halt, vehicle B jammed brake which resulted in me hitting onto the rear.

DECLARATION

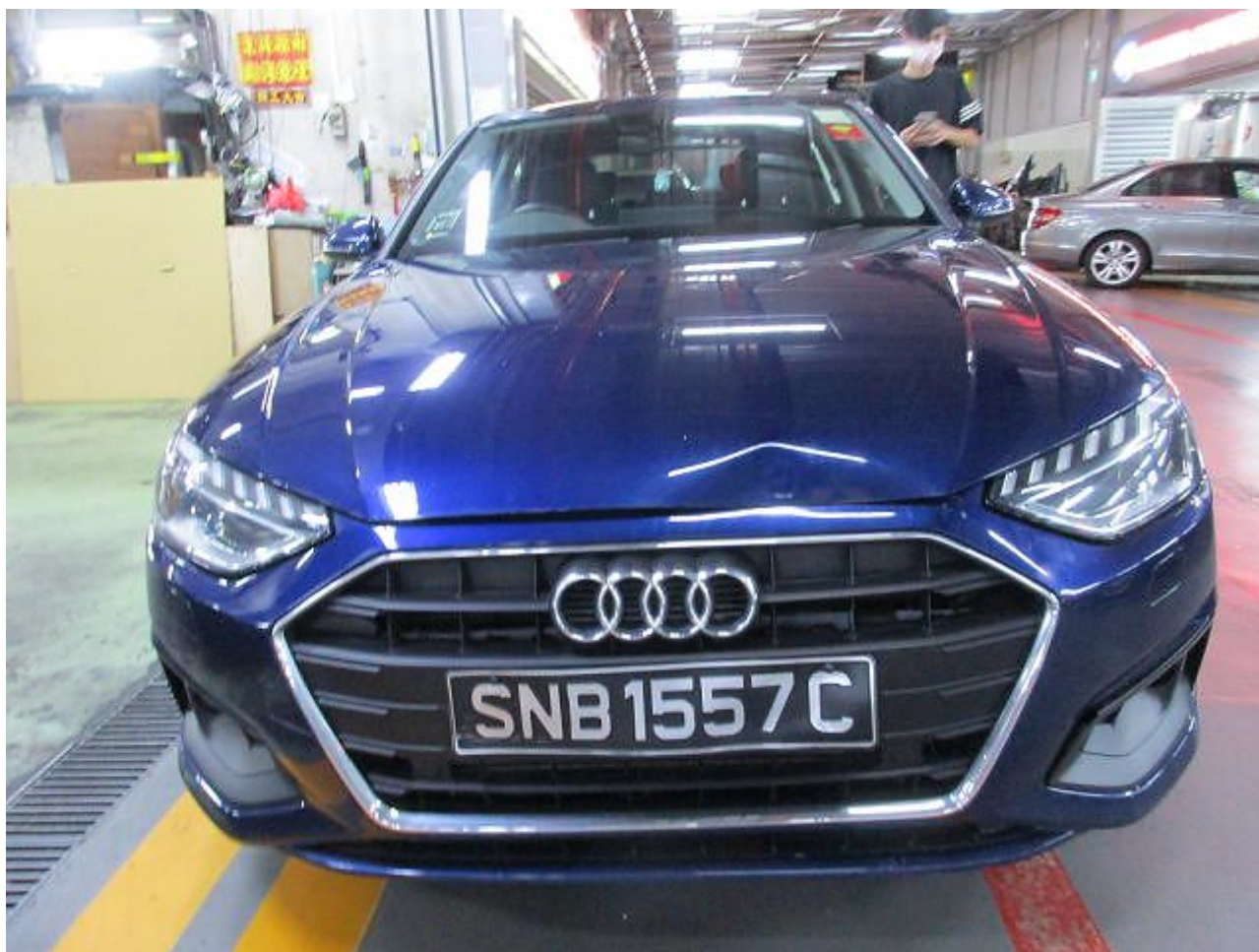
I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time:
30/1/2023

Driver's Signature
(If driver is not the policyholder)
Date & Time:
30/1/2023

☐ Claim own policy
☐ Claim third party
☒ Claim OD/TP at other workshop *Sin Heng Loo*
☐ For record purpose
Policy No. D22MTP V01011751
Insurer *Sompo* Veh. No. SMB 1557C

Reporting Centre *Tila*
Name:
NRIC/FIN No.:























Sompo Insurance Singapore Pte. Ltd.

50 Raffles Place, #03-03
Singapore Land Tower, Singapore 048623
Tel: 6461 6555 | Fax: 6221 3302 | www.sompo.com.sg
Co. Reg. No.: 199905490E | GST Reg. No.: M200903198

PRIVATE CAR POLICY SCHEDULE

Intermediary Code : 11M16010

Policy No. : D22MTPV01011451

This Schedule is issued in accordance and should be read in conjunction with the terms, conditions and exceptions of the
PRIVATE CAR Policy wordings, ref. MTP.30

Insured : KOM WEI KHEONG DENNIS
Address : 100 YIO CHU KANG GARDENS
SINGAPORE 568142

Business/Profession : DIRECTOR

INSURED DETAILS

Date of Birth & Age : 14 OCT 1972 & 49 years old
Driving Experience in : 28 years
Singapore
Identification Type : NRIC(Singaporean)
Marital Status : MARRIED
Gender : Male
Identification No. : S2207385J

Period of Insurance : 30 JULY 2022 00:00 TO 29 JULY 2023 23:59

Persons or Classes of Persons entitled to drive : Refer to Certificate of Insurance

Limitations as to use : Refer to Certificate of Insurance

VEHICLE DETAILS

Vehicle Registration No. : SNB1557C
Chassis No. : WAUZZZF48MA051433
Engine No. : DEM031164
Vehicle Make & Model : AUDI A4 2.0
Engine Capacity : 2000
NCD Entitlement : 50%
Year of Registration : 2021
NCD Protection : Yes
Estimated value of Vehicle : Market value at time of loss
Hire Purchase Owner : DBS BANK LIMITED

PREMIUM DETAILS

Premium after applicable discount(s) : S\$ 1,172.24
GST : S\$ 82.06
Premium (incl. GST) : S\$ 1,254.30

Coverage : Comprehensive - ExcelDrive PRESTIGE
Excess : \$ 600 - Section I

Voluntary Excess : N.A.

Additional Excess : Named Young and/or Inexperienced Drivers : S\$1,500
Un-named Young and/or Inexperienced Drivers : S\$3,000
Un-named All Other Drivers : S\$500

"Young Drivers" shall be defined as drivers (including the Insured) who are below 27 years old.
"Inexperienced Drivers" shall be defined as drivers (including the Insured) who have less than 1 year of driving experience in Singapore roads.

Windscreen Excess : S\$100.00 for each and every applicable claim.

Endorsements Applicable : Endorsement AA1 - ExcelDrive Prestige Plan
Endorsement D1 - Young and/or Inexperienced Drivers
Endorsement E - Excess Clause
Endorsement H - Total Loss
Endorsement L - Hire Purchase
Endorsement M - Inclusion Of Special Perils
Endorsement P6 - Riot And Strike Endorsement
Endorsement V - No Claim Discount Protection
Endorsement Z - Loss of Use Benefit

Additional Cover : NIL