

SIN HWEE MOTOR PTD LTD

BLK 3023A UBI RD 1 #01-59  
SINGAPORE 408717  
UEN: 201327079M

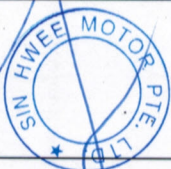
Web Site            WWW.SINHWEEMOTOR.COM  
E-mail             SINHWEEMOTOR@GMAIL.COM  
Phone #            9766 6672

Invoice

Date	Invoice #
18/2/2023	1024C
Vehicle No	Model
SMP 9223 B	HYUNDAI I30

Bill To
NG SAING HUAT

Quantity	Description	Unit	Amount
	LUMP SUM	1,600.00	1,600.00



Total	\$1,600.00
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## 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	03/01/2023 12:07 (SGT)
Reported by	Both
Date of Accident	01/01/2023 08:43 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	JUNCTION OF MACPHERSON ROAD AND BENDEMEER ROAD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMP9223B
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	NG SAING HUAT
NRIC No	S7919552I
Email Address	sainghuat@yahoo.com.sg
Mobile Phone No	(Phone) +65-98394236
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	I30 PDE 1.4 T-GDI DCT
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1353

### INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2000575955-01

### DRIVER

Name of Driver	NG SAING HUAT
NRIC No	S7919552I
Date Of Birth	09/07/1979
Occupation	Indoor



Date Of Driving Pass	13/09/2002
Driving experience	20 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98394236
Alt. Phone Number	-
Email Address	sainghuat@yahoo.com.sg
Address	APT BLK 10 SIMS DRIVE #13-40 (S) 387390
Address complement	-
Postcode	-
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	Collision - Change/cross lane
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)	4
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	WIFE
Gender	Female

#### PASSENGER 2

Name	DAUGHTER
Gender	Female

#### PASSENGER 3

Name	SON
Gender	Male

#### 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 WITH ATTACHED.

#### ATTACHMENT(S)

Are accident photos available for attachment?	Yes
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Was there any video captured by Car Camera? No



Vehicle Registration Number	SLA4655L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	IRENE
Contact Number	(Phone) +65-96188368
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	3

**SKETCH PLAN**

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3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to rescind 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.

**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

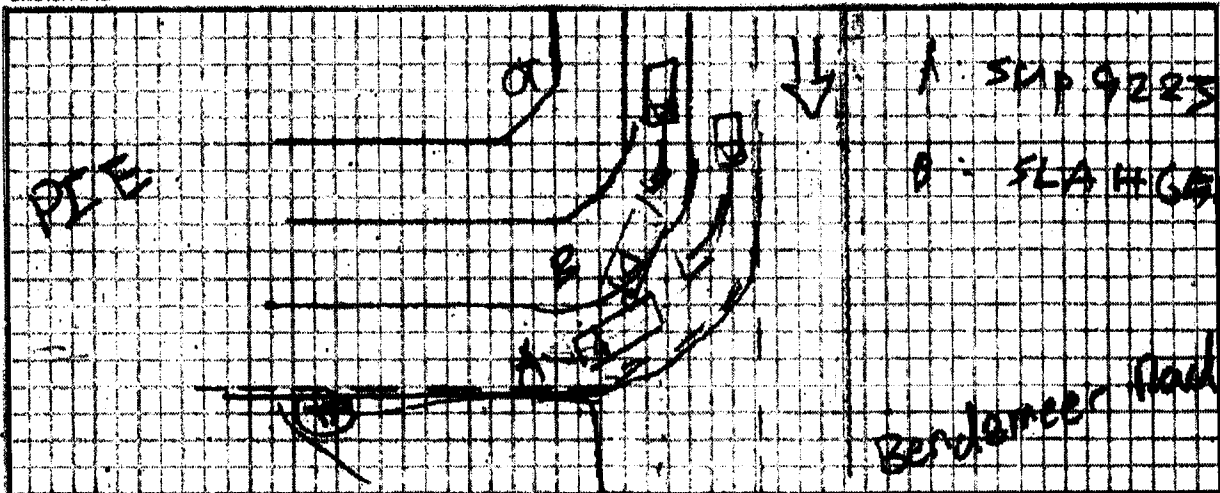
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

*[Signature]* 03 JAN 23/1050  
Policyholder's Signature / Date & Time

*[Signature]* 03 JAN 23/1050  
Actual Driver's Signature (if driver is not the policyholder) / Date & Time

*[Stamp: SINGAPORE MOTOR WORKS, Co Reg No 21148888, NEW SINGAPORE]*  
Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)

**Sketch Plan**



WHR2022

Describe Circumstance of the Accident


Refer to attached.

Declaration

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

 03JAN23/1010

Policyholder's Signature / Date & Time

 03JAN24/1050

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





Car accident report (car policy SMP9223B)

From sainghuat@yahoo.com.sg

To claims@allianz.com.sg & 1 more

Yesterday at 12:52 PM

Hi,

I have an existing car insurance with Allianz on my car, car number SMP9223B.

I met with an accident on 1st of Jan23, 0843hrs, at the junction of MacPherson road and Bendemeer road, turning toward PIE in which a car behind me, car plate SLA4655L, turn into my lane and hit my right back bumper. I have my family with 2 young children with me. Fortunately, nobody was injured, likewise the other party. Photos as attached.

Given the public holiday, I am unable to find ARC that is open and my agent replied today and advised me to contact the hotline. the hotline directed me to email while making a report via Allianz's certified ARC on the next business day.

For your necessary actions and please do not hesitate to contact me if further clarification is needed. thanks.

Rgds,  
Sainghuat

