

## 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 .....	25/02/2023 10:59 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	10/02/2023 08:32 (SGT)
Exact Location of Accident .....	Pasir Ris, Singapore
Additional Location Information .....	ALONG ELIAS RD TWDS PASIR RIS DR 3
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SBF70S
-----------------------------------	--------

#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	SEAH BENG HUAT
NRIC No .....	S1198126G
Email Address .....	HNH70@HOTMAIL.COM
Mobile Phone No .....	(Phone) +65-96282718
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	Camry
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 - Reporting only
Vehicle Category .....	Private car
Transmission .....	Auto
CC .....	2487

#### INSURANCE COMPANY

Name of Insurance Company .....	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number .....	SP2003766815-01

#### DRIVER

Name of Driver .....	SEAH BENG HUAT
NRIC No .....	S1198126G
Date Of Birth .....	25/09/1955
Occupation .....	Outdoor

Date Of Driving Pass .....	07/06/1973
Driving experience .....	49 YEARS AND 8 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-96282718
Alt. Phone Number .....	-
Email Address .....	HNH70@HOTMAIL.COM
Address .....	33 PASIR RIS LINK
Address complement .....	12-32
Postcode .....	518154
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 - Major/Minor Rd
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) .....	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? .....	Yes
Police Station Name .....	Pasir Ris Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18005852999
Alt. Police Station Phone No .....	(Fax) +65-65855261
Police Station Address .....	1 Pasir Ris Drive 4 #01-01 Singapore 519457
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

AS PER POLICE REPORT ATTACHED

#### 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 .....	SHC6861G
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-

Vehicle Colour .....	-
Vehicle Category .....	Taxi
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) .....	1

## 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 Authorised 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. The 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 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.

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

As per police report attached.

DECLARATION

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

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.:





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, 1980  
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Certificate Number : SP2003766815-01  
 Date of Issue : 09 December 2022  
 Coverage : Comprehensive  
 Policyholder : SEAH BENG HUAT  
 Period of Insurance : 28 December 2022 to 27 December 2023 (both dates inclusive)  
 Registration No. : SBF70S  
 Chassis number of Vehicle : AXVH701013308

#### Persons or Classes of Persons Entitled to Drive\*

- (a) The Policyholder.  
 (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 regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment 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 inoperative by Section 8 of 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.*

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.

09 December 2022  
 Issued Date

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

Intermediary Code : 0000336 AAC PERFORMANCE PTE LTD

Excess	: Own Damage	SGD	600.00
	: Windscreen Damage	SGD	100.00

Allianz Insurance Singapore Pte. Ltd. | UEN 201903913C  
 79 Robinson Road #09-01 Singapore 068697 | Tel: +65 6714 3369 | Website: www.allianz.sg











CONFIDENTIAL

Annex E

## NOTICE OF COMPLIANCE

This is to confirm that Seah Beng Huat / Hp 96282718 NRIC/FIN S1198126G, has reported to the Police a non-injury traffic accident which occurred at Along Elias Rd turning onto Pasir Ris Dr 3 on 10/02/2023 at 08.32am involving the following vehicles:

SBF70S (Complainant's Vehicle) – Red Toyota Camry  
SHC6861G – Kia Premier Silver Taxi

On 10/02/2023 at about 8.32am, I was driving my vehicle, bearing plate number, SBF70S along Elias Rd turning left onto Pasir Ris Dr 3, there was a construction site on my right to which I was not able to see clearly of the on coming traffic. I tried to inch out my vehicle abit more and then proceed to make a turn to the left lane of a 2 lanes road. However, while I was turning, I heard a sound and realized that the left side of a taxi, bearing plate number SHC6861G had side swiped the front right side of my vehicle.

The taxi driver and I then stopped our vehicle at the roadside, exchanged our particulars too. We did not call for police and no one was injured from the accident.

It was observed that the left rear passenger seat, left rear wheel and left rear bumper of the taxi were slightly dented and scratched. The front right bumper of my vehicle was dislodged and scratched too.

I wish to state that there were in-car cameras installed at the front and rear of my vehicle however, I am unsure if the camera captured the accident. I am not sure if there was in-car camera installed in taxi.

2 If this accident was reported to the Police within 24 hours of its occurrence,

Then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SGT 2 Kimberly TOH

Date: 14/02/2023 Time: 1003 hrs

S/D Ref: 23

Police Post/Unit: Pasir Ris NPC

Original – to be issued to informant  
Duplicate – to be submitted to Traffic Police

CONFIDENTIAL