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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 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 10/02/2023 16:03 (SGT)
Reported by Both Policyholder and Actual Driver
Date of Accident 10/02/2023 14:00 (SGT)
Exact Location of Accident 129 Bedok North Street 2, Singapore 460129
Additional Location Information CARPARK
Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SNH5016P

### INSURED/POLICYHOLDER

Is company?

No
Name Of Registered Owner

NICOLE TAN KIM ENG

SXXXX392B

Email Address

TANNICOLE555@GMAIL.COM

Mobile Phone No

(Phone) +65-96229422

Alternative Phone No

#### VEHICLE PARTICULARS

## **INSURANCE COMPANY**

Name of Insurance Company

Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number

SP2004367750-01

#### DRIVER

Name of Driver

NICOLE TAN KIM ENG
NRIC No
SXXXX392B
Date Of Birth
01/10/1965
Occupation
Indoor

Date Of Driving Pass	07/02/1994
Driving experience	29 YEARS
Gender	Female
Mobile Number	(Phone) +65-96229422
Alt. Phone Number	(=)
Email Address	TANNICOLE555@GMAIL.COM
Address	BLK 51 SIMS DRIVE #07-138
Address complement	
Postcode	380051
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	
The section of Applications	
Type of Accident	Side Swipe
Weather Conditions	Clear
Road Surface	Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?	Na
Number of vehicles involved in the accident	No
Was anybody injured in the Accident?	2 Na
Was any injured conveyed to hospital by ambulance?	No -
Was any other vehicle or property damaged?	- Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s)	ı
soliciting/offering accident claims assistance?	No
Translator's name	
Translator's ID	
Translator's phone number	347
Translator's email	( <b>#</b> );
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?	<b>3</b>
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO SKETCH PLAN	
ATTACHMENT(S)	
Are accident photos available for attachment?  Was there any video captured by Car Camera?	Yes Yes
True and the captainst by can cannot a.	165
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number	SKW1854U
Vehicle Manufacturer	**
Vehicle Model	• · · · · · · · · · · · · · · · · · · ·
Vehicle Variant	180 /
Vehicle Colour	ino
Vehicle Category	Private car
Name of Driver	<u> </u>
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.
- 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 Contre established by the General Insurance Association of Singapore (GIA) for exchiving 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 (all insurer(s) who have insured vehicle(s) involved in this accident (all insurers), the Monetary Authority of Singapore and any retevant 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 parmitted 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.

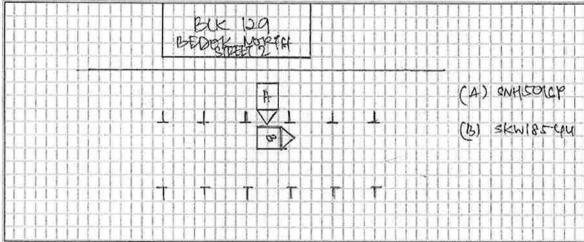
10/2/20>3 3.15 pm.

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)

# Sketch Plan



1

Dosaribe Circumstarios of the Accident
On 10th of February, 2023, @ 14:00 hrs. my vehicle was parted at BIK 129, Bedok North, St 2, Sixpapore 460129 and I was inching elowly out from my parting lot. I have done my olue delligence and checked before moving off when vehicle B dashed in front of me. He was driving very fast in a carpart. He also mentioned he was rushing to pick his son from the airport
5

Declaration

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

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

(Name as in NRIC/ID card)

# REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1705392B





Name

# NICOLE TAN KIM ENG

陈菁瑛

CHINESE

Date of birth

01-10-1965

Country/Place of birth

SINGAPORE

Sex

F

\$1705392B

6670181



NRIC No. S1705392B



Date of Issue 09-07-2021

Address

APT BLK 51 SIMS DRIVE #07-138 SINGAPORE 380051 2:55

atl 5G



REPUBLIC OF SINGAPORE



LICENCE NO. S1705392B Ø



CLASS AND ISSUE DATE

3 • 07 FEB 1994

Show details



**☞** Show NRIC

# 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

: SP2004367750-01

Date of Issue

: 01 February 2023

Coverage

: Comprehensive

Policyholder

: NICOLE TAN KIM ENG

Period of Insurance

: 30 January 2023 to 17 June 2024(both dates inclusive)

Registration No.

: SNH5016P

Chassis number of Vehicle

: JM68M44A8G0323417

#### 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 concelled at the time of accident lass 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.

01 February 2023

Issued Date

Hicham Raisel
Chief Executive Officer
Alsanz Insurance Singapore Pte. Ltd.

Intermediary Code

: 0000352 LOMEN INSURANCE AGENCY

Excess.

Own Damage Windscreen Damage SGD

0.00

100.00