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 17/02/2023 17:11 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 16/02/2023 20:11 (SGT) Exact Location of Accident 631 Ang Mo Kio Ave 4, Singapore 560631 Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJQ3434D

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner TAN WAY CHUAN STANLEY NRIC No. S8824706Z Email Address STANLEYBAI21@GMAIL.COM Mobile Phone No (Phone) +65-85551444 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Honda Model Civic 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

2000

INSURANCE COMPANY

Name of Insurance Company **ECICS Limited** Policy Number / Cover Note Number MPC22P00086500

DRIVER

TAN WAY CHUAN STANLEY Name of Driver NRIC No S8824706Z Date Of Birth 02/07/1988 Occupation Outdoor

Date Of Driving Pass Driving experience	03/09/2016 6 YEARS AND 5 MONTHS
Gender	Male
Mobile Number Alt. Phone Number	(Phone) +65-85551444
Email Address	STANLEYBAI21@GMAIL.COM
Address	BLK 632 ANG MO KIO AVE 4 #03-964
Address complement Postcode	- 560632
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	Hit and run / Vandalism / Damaged whilst parked
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?	- Voc
Number of Passengers (Including Driver)	Yes 1
Has the driver been approached by unknown person(s)	
soliciting/offering accident claims assistance? Translator's name	No
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	Ang Mo Kio North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004849999
Alt. Police Station Phone No Police Station Address	(Fax) +65-62181399
Was notice of intended Prosecution given?	51 Ang Mo Kio Avenue 9 Singapore 569784 No
If yes, against whom?	-
CIRCUMSTANCES OF ACCIDENT	
REFER TO POLICE REPORT: T/20230216/2111.	
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number	GBF5045H
Vehicle Manufacturer	-
Vehicle Model	_

Vehicle Variant

icle

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 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)
 - (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.

Signature Date & Time:

Driver's Signat (If driver is not the policyholder)

Reporting Centre Personnel's Signature Name:

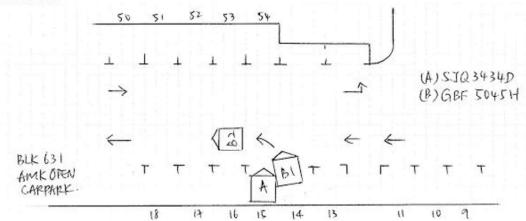
NRIC/FIN No.:

Date & Time I hereby authorise SME Motor Pte Ltd to send my

Accident report to my workshop via email / fax

Signature:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Note: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check your policy for more information.

DECLARATION

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

Policyhalder s Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

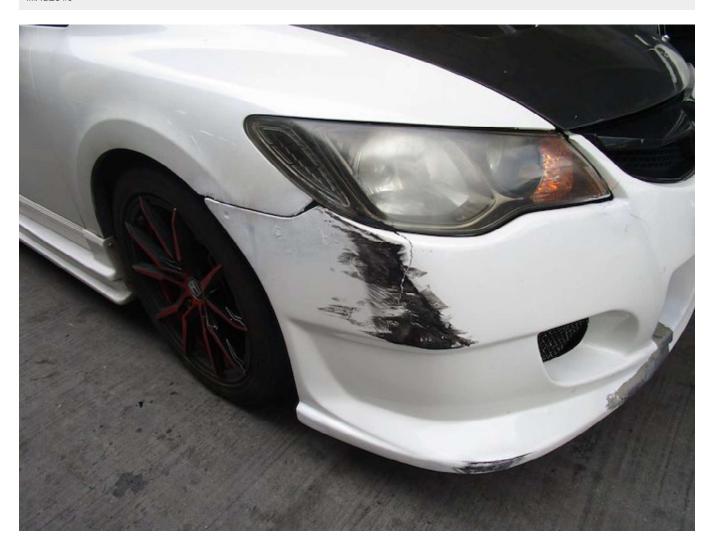
NRIC/FIN No.:

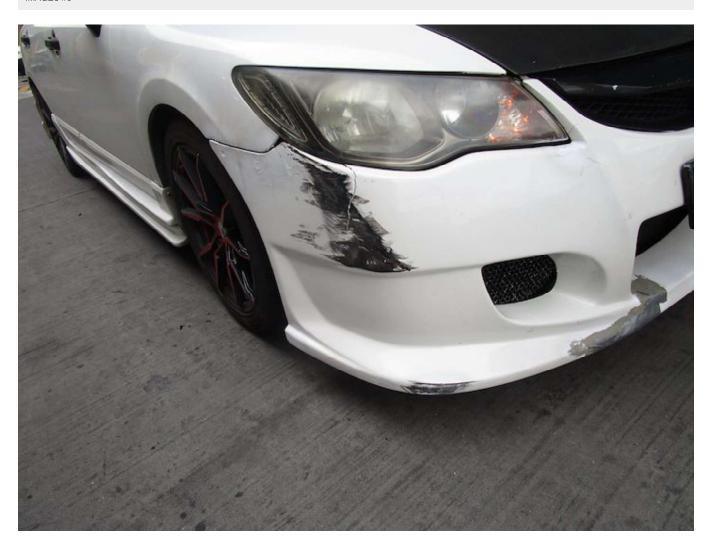






















Police Station Of Origin: Ang Mo Kio North N.P.C 51 Ang Mo Kio Avenue 9 SINGAPORE 569784 Tel No: 1800-4849999

Report No. T/20230216/2111

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/02/2023 23:30			Vide Report No.:	Station Diary No.: 104		
Informa	nt's Partic	ulars				
	f Informant: AY CHUAN	STANLEY	Address: APT BLK 632 ANG MO 560632	KIO AVENUE 4 #03-964 SINGAPORE		
ID Type / ID No.: NRIC NO / \$8824706Z		Contact No.: Home/Office: Mobile: 85551444				
Nationality: SINGAPORE CITIZEN		Email: stanleybai21@gmail.com				
Sex: Age: Date of Birth; Male 34 02/07/1988		Type of Informant: Driver				
Race: Chinese		Language:	Institution / School Name:			
Occupation: FREELANCER		Driving Licence Informa Class:	ation: Date of Expiry:			

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 16/02/2023 20:10	Type of Location Car Park	
Location: ANG MO KIC Weather: Cloudy	AVENUE 4	Road Surface:		Road Speed Limit:	
Traffic Flow: Tra		Traffic Control: Not Controlled		Traffic Volume: No Traffic	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by	

Details of V	ehicle Invo	lved	MARKET STATES	L. History	Ship Ship in	
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GBF5054H (Not Accurate)	Van				Slightly Damaged	0
SJQ3434D	Car	HONDA	CIVIC 2.0L 5AT	White	Slightly Damaged	0

Details of V	ehicle Insurance	the work the matter of	- 190g - 250g	
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



T/20230216/2111

Police Station Of Origin: Ang Mo Kio North N.P.C 51 Ang Mo Kio Avenue 9 SINGAPORE 569784 2 of 3 Report No. T/20230216/2111

Tel No: 1800-4849999

CONTINUATION OF REPORT

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Dat	
SJQ3434D	ECICS LIMITED	MPC22P00086500	05/05/2022	04/05/2023	

Details of Perso	n Involved		E-17 Selected	EIRYAN	The Park	Service In Supplement	
Any Pedestrian I	nvolved: No						
No. of Pedestriar	No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA			
Driver		The second					
Name	TAN WAY CHUAN,	TAN WAY CHUAN, STANLEY				S8824706Z	
Related Vehicle	SJQ3434D (Car)			Conta	ct No.	85551444	
Hospital/Clinic	NIL			Class Drivin Licen Expin	g	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL Date I			harge	NIL		
No. of Days granted Medical Leave NIL			Degree of	and the second second	NIL		

Brief Details.

On 16/02/2023, at around 2011hrs, at Blk 631 Ang Mo Kio Carpark, my vehicle (SJQ3434D) which was parked, was collided by another vehicle (Van), when it moved out. I was not in the vehicle at that point of time.

My in-car camera captured the entire incident. It parked beside me at 1928hrs and left at 2011hrs. The collision happened when the van left.

I suspected it to be GBF5054H (model: Nissan NV350), but my in-car camera was unclear in spotting the license plate clearly.

As a result, there was scratches and crack on my vehicle on my front right bumper and right headlight.





Report No. T/20230216/2111

Police Station Of Origin: Ang Mo Kio North N.P.C 51 Ang Mo Kio Avenue 9 SINGAPORE 569784 Tel No: 1800-4849999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report: F / SGT 2 Chew Jin Huang	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 16/02/2023 23:30
Officer In Charge Of Case: TP / HRT / STAFF SGT SUFIYAN BIN KHAIRI Contact No.: 65476148	Classification Of Case:
NP168	



Certificate of Insurance

Motor Vehicles (Inichlindwitelle Enragensetten) Act (Chapter 199) Motor Whiches (19th Party Ricca and Compensation) and subgreen into Motor Whiches (19th Party Ricca and Compensation) Parks, 1960. Motor Vehicles (19th Party Ricca and Compensation) Parks, 1960. Road Françoist Advantage (1987) Malaysia; Pood Trançoist (All mendiness) Act, 2019 (Malaysia)

AUTHORISED WORKSHOPS

MZ300 COMPREHENSIVE

Certificate No.: MPC22P00086500

Chassis No.:

JHMFD26409S200811

Agency Name: PHILLIP SECURITIES PTE LTD

Engine No.:

K20Z24500811

Agency Code: B00025

1. Index Mark and Registration Number of Vehicle:

SJQ3434D

2. Name of Policy Holder

TAN WAY CHUAN, STANLEY

3. Period of Insurance (both dates inclusive):

05-05-2022 to 04-05-2023

4. Persons or Classes of Persons entitled to drive

(A) The insured and all the Named Drivers declared under this Policy

(B) Any other person who is driving on the Insured's order or with his her permission

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Car or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation is that behalf from driving the Motor Car.

5. Limitations as to use

Use for social, domestic and pleasure purposes and for the trisured's business. The policy does not cover use for hire or reward, fulfion, driving test, race, pace-making, reliability trial, speedtesting, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade

6. Excess Applicable

Windscreen

SGD 100.00

Section 1 - Insured / Named Driver

SGD 500.00

Additional Excess - Other than Named Drivers:

Section 1 - Unnamed Drivers:

SGD 500.00

Section 1 - Age < 27, Age > 70 or Driving Experience < 2 years old

SGD 3,000.00

Signed for and on behalf of ECICS Limited

Authorised Signatory

Important Notice

- 4. Principle data are serially wanted that 4 small be unboded for any person to use or cause or secret, my other serson to use in Motor Venicle without
- 10. On this sale of a Marce Vehicle, Policyholders must excepted in patience papers, issued malading the Certificate of insurance and the Policy to the insurance company. If the Conficate of Insurance has been highly declayed, a Statistical Qualitate on in the effect must be made. Finally to compry with this obligation is an influence under the Matter Vetoclas (Third Party Hisks) and Companisation) Act (Couptair 186)
- 4) The Confecto of insurance and the Policy will cause to be walld once the Motor Car has once sold or crossformed
- (c) The Payment Before Cover Warranty or Premium Playment Visionarity found in the Policy must be compiled with etteracie force would be no lotifity under the Parcy and Cartificate of Insurance

890025 - Mattie Chong Start Wei / MPC 22P00086500 / 08 64 2322 1 58:49 PM

NEW WINDOWS PARENTING PRODUCT CONTROL OF CON