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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 20/03/2023 10:25 (SGT)
Reported by Driver
Date of Accident 17/03/2023 18:15 (SGT)
Exact Location of Accident SLE, Singapore
Additional Location Information TOWARDS BKE LAMP POST 468
Country/State of Loss Singapore

## **DETAILS OF OWN VEHICLE**

No - Claiming third party

Private hire

Vehicle Registration Number SJE7671Y

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

Company Reg No

Email Address

Mobile Phone No

Alternative Phone No

Yes

83 RENTAL & TRADING PTE. LTD.

2XXXXX661R

hwapengauto@singnet.com.sg

(Phone) +65-98229298

-

VEHICLE PARTICULARS

Manufacturer Toyota
Model Axio

Variant 
Exact purpose for which vehicle was being used at time of

exact purpose for which vehicle was being used at time of accident Employment

Are you claiming under your own insurance policy for repair to your vehicle?

Vehicle Category

Transmission

Transmission Auto CC 1496

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

Tokio Marine Insurance Singapore Ltd
MP005562

DRIVER

 Name of Driver
 LEE YEW MENG

 NRIC No
 SXXXX721Z

 Date Of Birth
 26/04/1963

 Occupation
 Indoor

Date Of Driving Pass 29/06/2012 Driving experience 10 YEARS AND 9 MONTHS Gender Male Mobile Number (Phone) +65-98229298 Alt. Phone Number Email Address hwapengauto@singnet.com.sg Address BLK 783C WOODLANDS RISE #02-07 Address complement Postcode 733783 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Hirer 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 Collision - Head to Rear Type of Accident 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? Yes Was any injured conveyed to hospital by ambulance? No Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 2 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 MS TAN MING HUI Name Female Gender 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 PLEASE REFER TO SKETCH PLAN 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 YN430Y Vehicle Manufacturer Mitsubishi

Vehicle Model Vehicle Variant

Vehicle Colour	
Vehicle Category	Private car
Name of Driver	NG BENG CHAI
NRIC No	SXXXX414E
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	_
Nature Of Damage	-
Details of property damaged in accident	
No. Of Passenger (Including Driver)	-

# **INJURED PERSONS DETAILS**

No

# INJURED 1

Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance?	LEE YEW MENG Male (Phone) +65-98229298 SLIGHT INJURY SJE7671Y Yes No
Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn?	MS TAN MING HUI Female SLIGHT INJURY SJE7671Y Yes

Was this injured conveyed to hospital by ambulance?

#### 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.
- 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 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.
- 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
- (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.

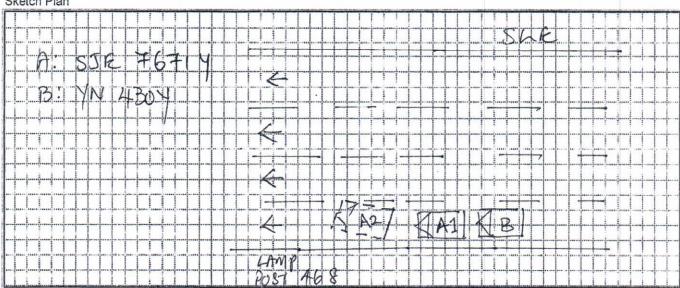
Policyholder's Signature / Date & Time

Tradin

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

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Sketch Plan



Describe Circumstance of the Accident
on mentioned date and time, I was driving along SLE
in a direction towards BKE (near lamp post 468) The
traffic flow was heavy. My vehicle came to stand still in
extreme LH lane. At this juncture rehicle B' crashed against
in a direction towards BKE (near lamp post 468) The traffic flow was heavy. My vehicle came to stand still in extreme LH lane. At this suncture vehicle 'B' crashed against my vehicle's rear section. The impact was so sread and my vehicle surge forward near to the hext lane RH side Due to the Collision my passenger and myself injured.
my vericle garge forward now to the hext lane RH side
Due to The Collision on passener and mosel insued
100 100 100 100 100 100 100 100 100 100
Was there any video captured by Car Camera? Yes / 🔞
Has the driver been approached by unknown person(s)?  Yes / 😡
Number of Passengers (Including Driver)? 02
Name MS TAN MING Itus Gender: FEMALE
Name Gender:
Name Gender:

Declaration

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

Policyhoteer's Signature / Date &

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)



Send/Fax to:	- Company	Submit	ted:	
	SINGAPORE ACC	IDENT STATEMENT		
	BASIC IN	FORMATION		
Date of Accident:	17/03/2023	Time of Accident:	1815	
Exact Location:	SLE T	owned bee 11	1 POST 468	
	DETAILS OF	OWN VEHICLE		
Vehicle Registration No.	SJE 76714		: 2017 3666 R	
Name of Registered Owner:	83 RENTAL &	TRADING PTE	47D	
Owner's Email:	hwapengauto	@ singnet. con	1.00	
Owner's Address:	10190	C 577 7. COV	1.37	
Vehicle Make:	TOYOTA	Vehicle Model:	CORULLA AXIO	
Engine Capacitty (cc):	1496	Transmission:	Auto / Manual	
Type of Claim:	Own Damage (Third Pa		Tuto (Wallua)	
Vehicle Category:		Private / Commercial / Motorcycle / Private Hire		
Name of Insurance Co:		TOKIO MARINE INSURANCE GROUP		
Type of Policy:		Party Third Party, Fire & Th		
Policy Number:	MP005562	Time arty, The art	ioit	
		IVER		
Name of Driver:	LER YEW M		same a	
NRIC / FIN / Passport no:	SIS 8 9721 Z	Date of Birth:	26/04/1963	
Occupation:	Indoor Outdoor	Driving Pass Date:	29/06/2012	
Contact Number:	9822 9298	Gender:	Male / Female	
Address:	BIK 783C WOO	OLANOS RISE #02	-07 SC 733783)	
Relationship with Owner:	Owner / Employee / Spou	se / Child Hirer Other:		
Translater Name:		Translater NRIC:		
Translater Contact no:		Translater email:		
		ION OF THE ACCIDENT		
Type of Collision:		pe Front to Rear Others:		
Weather Condition:	Clear Raining / Others:	Road Surface:	(Dry )Wet	
Video available:	Yes (No			
Was anybody injured?	Yes (No)	Police Report Made?	Yes / No	
No. of passenger onboard (i	ncluding driver): 02		FEMALK	
	PETALL S ST.			
		THER VEHICLE		
Vehicle Registration No:	Vehicle 1	Vehicle 2	Vehicle 3	
Vehicle Make / Model:	YM 430 Y			
Name of Driver:	MITSURISHI			
NRIC / FIN / Passport no:	NG BENG GHAI			
Contact Number:	S1344414E	-		
Name of Insurance Co:				
value of maurance co.				
	DETAILS C	F WITNESS		
Name:		Contact Info:		
	PETAL G OF ILL			
		JURED PERSON		
lame / in which vehicle?:	Person 1  LEE YEW MENG	Person 2  MS 7AN MING Hu	Person 3	
priver's Declaration: I declare that the int onsequences arising from incomplete o	ormation given in this report are true as	nd accurate to the best of my collection		
Signature of Driver	_	Date and time		

# Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg No.: M2-0000023-4)
20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com

A member of the Tokio Marine Group



# Certificate of Insurance

FORM MX1 H

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Policy No.: MP005562 (Private Car)

 Index Mark and Registration Number of Vehicle SJE7671Y

Chassis No.: NZE1416081363

2. Name of Policyholder

83 RENTAL & TRADING PTE LTD

 Effective date of the Commencement of Insurance for the purposes of the Act 07/11/2022 (00:00:00)

4. Date of Expiry of Insurance

06/11/2023

5. Persons or Class of Persons entitled to drive\*

The Policyholder

Any person who is driving on the Policyholder's order or with the Policyholder's permission.

\* Provided that the Person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

#### 6. Limitations as to use\*

Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business.

Use for social domestic and pleasure purpose and business purposes of the Policyholder or of any person to whom the vehicle is hired.

The Policy does not cover:-

1) Use for racing, pace-making, reliability trial or speed-testing.

2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

3) Use for the carriage of passengers for hire or reward by any person except for private hire services.

4) Use for hire or reward except for (3) and rental by the Policyholder.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

#### IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Insurance Plan: Third Party Only

Policy Excess: Excess-Third Party (Sect II) SGD 3,000.00

Financial Interest: NIL

Additional Terms: 1. Private Hire Usage Vehicle Endorsement is included.
2. Unnamed Driver Excess is not applicable
3. Car is licensed for private hire (Ph) by LTA.
4. Only PH licenced hirers can use car for PH in Singapore only
5. Subletting is NOT covered.
6. Additional YID excess of SGD 3,500 applied on Section 2
7. Notwithstanding anything to the contrary in the policy, MC19 Waiver of Excess is NOT applicable

TOKIO MARINE INSURANCE SINGAPORE LTD

**Authorised Signature** 

User ID: 1531DDA

Page 1

Printed: 18-03-2023 12:20:11

<sup>\*</sup> Limitations rendered inoperative by Section 8 of the 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.