



## 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	27/03/2023 12:55 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	23/03/2023 11:38 (SGT)
Exact Location of Accident	462A Choa Chu Kang Ave 4, Singapore 681462
Additional Location Information	CAR PARK EXIT
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLB8663G
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	CHERYL LEE SIEW FUNG
NRIC No	SXXXX817D
Email Address	lee.cheryl08@gmail.com
Mobile Phone No	(Phone) +65-97451800
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	BMW
Model	116d
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 - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1500

#### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNW00032372200

#### DRIVER

Name of Driver	CHERYL LEE SIEW FUNG
NRIC No	SXXXX817D
Date Of Birth	24/08/1980
Occupation	Outdoor

Date Of Driving Pass .....	18/09/2004
Driving experience .....	18 YEARS AND 6 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-97451800
Alt. Phone Number .....	-
Email Address .....	lee.cheryl08@gmail.com
Address .....	BLK 458 CHOA CHU KANG AVENUE 4 @14-197
Address complement .....	-
Postcode .....	680458
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 - Head to Rear
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? .....	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? .....	Yes
Reasons for not uploading a video of the accident .....	WITH OWNER

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	CB7572Z
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
Name of Driver .....	HEAH NGUANG HOE

NRIC No .....	SXXXX079A
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

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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 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.

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)

### Sketch Plan

CAR PARK OF BLK 462A EXIT  
CHOA CHUKANG AVENUE 4

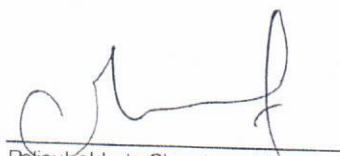
A SLB8663G  
B CB7572Z

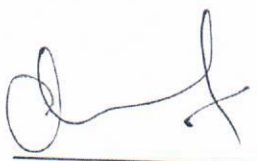
Describe Circumstances of the Accident

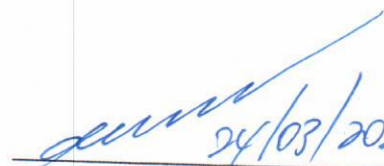
On the above date and time I was queuing up in the carpark of Blk 462a. I wish to state that I was the 3rd car behind the carpark gantry. As I was waiting behind car CB 7512Z suddenly reverse and hit the front of my car. Thereafter as I alight from my car I then realise that the first car had reverse due to IU uncapture and reverse causing vehicle B to reverse without checking behind and hit me.

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

  
24/03/2023  
Witnessed by Reporting Centre Personnel

Personal Particulars of Owner & Driver (Vehicle A)

(5)

Date of Accident: 23/03/2023 (dd/mm/yy) Time of Accident: 11:38 (24-HR-FORMAT)  
Vehicle No.: SLB8663G Vehicle Make & Model: B.M.W 116 D  
\*Transmission: ☐ Manual ☒ Auto \*C.c.: 1500 CC  
Exact location of Accident: CARPARK OF BLK 462A EXIT  
Policyholder's Name: CHERYL LEE SIEW FUNG NRIC/FIN/REG No.: S8072817D  
\*Policyholder's email address: lee.cheryl08@gmail.com  
Driver's Name: CHERYL LEE SIEW FUNG NRIC/FIN/REG No.: S8072817D  
\*Driver's email address: lee.cheryl08@gmail.com  
Driver's Contact No.: 97451800 Company Contact No (If any): -  
Date of birth: 24/08/1980 Driving Pass Date: 18/09/2004  
Driver's Address: BLK 458 CHOA CHU KANG AVENUE 4 #14-197 (S) 680458  
Insurance Company: CHINA TAIPING  
Policy No.: DMPCSNW00032372000 Type of Coverage: Comprehensive / Third Party / Third Party, Fire & Theft  
Relationship between Owner & Driver: (Please CIRCLE one only)  
Owner / Spouse / Children / Friend / Parents / Sibling / Relative / Employee / Hirer or Others specify: \_\_\_\_\_  
What do you wish to claim? (Please TICK one only)  
☐ Own Insurance ☒ Other Vehicle (The one you want to claim against) / ☐ Reporting (For Record Purpose)  
Type of Accident  
☐ Chain Collision ☒ Head To Rear ☐ Side Swipe ☐ Other \_\_\_\_\_  
Occupation (nature job) ☐ Indoor / ☒ Outdoor \*No. of Passengers / Including Driver): 1  
\*Passanger Name: \_\_\_\_\_ Gender: Male / Female  
\*Passanger Name: \_\_\_\_\_ Gender: Male / Female  
Weather condition & Road conditions? (On the day of accident)  
☒ Clear & Dry / ☐ Raining & Wet / ☐ After-Rain & Wet / ☐ Drizzling & Wet / Others: \_\_\_\_\_  
Was there any video captured by your car Car camera? ☒ Yes / ☐ No  
Any Injuries: ☐ Yes / ☒ No (If YES) Injured Person's Name: \_\_\_\_\_  
Injuries Sustain: \_\_\_\_\_ Injured Person in Which Vehicle: \_\_\_\_\_  
Police Report filed: ☐ Yes / ☒ No (If YES) Which Police Station: \_\_\_\_\_

The Other Party (S) Details:

1. Driver's Name / IC No: HEAH NGUANG HOE S1213079A Vehicle No: CB7572Z  
Driver's Contact No: \_\_\_\_\_ Insurance Company: \_\_\_\_\_  
2. Driver's Name / IC No (If Any): \_\_\_\_\_ Vehicle No: \_\_\_\_\_  
Driver's Contact No: \_\_\_\_\_ Insurance Company: \_\_\_\_\_  
\*Independent Witness (If Any): \_\_\_\_\_ Contact No: \_\_\_\_\_  
Preferred Workshop Name: \_\_\_\_\_ Contact No: \_\_\_\_\_



中国太平  
CHINA TAIPING

中国太平保险(新加坡)有限公司  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Private Car

### CERTIFICATE OF INSURANCE

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)

MX1E

N SN

AN0720A

Cov Type C

CERTIFICATE No

DMPCSNW00032372200

Engine No. 36589544B37D15A

Cha No. WBA1V720X0V724452

1 Index Mark and Registration  
Number of Vehicle

SLB8663G

AUTOSAFE

\*\*\*\*\*

2 Name of Policy Holder

CHERYL LEE SIEW FUNG

3 Effective date of the Commencement of  
Insurance for the purposes of the Regulations  
Ordinance or Enactment

25/01/2022  
(00 00 00)

4 Date of Expiry of Insurance

24/01/2023

Named Drivers Ex Sect I

S\$1,100.00

Additional Ex Other than Named Drivers

Ex Sect I - Age <= 25

S\$3,000.00

Ex Sect I - Age >= 26

S\$500.00

\* Age as at date of accident

EX ON WINDSCREEN

S\$100.00

5 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 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.

6 Limitations as to use\*

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, 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 Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled. One time Waiver of Excess for the first S\$1,000 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

HIRE PURCHASE CO. TOYOTA FINANCIAL SERVICES SINGAPORE PTE. LTD.

\* 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.

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)

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By

REVO FINANCIAL PTE LTD

Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte Ltd. (Co. Reg. No. 200208384E)  
3 Anson Road #16-00 Springleaf Tower Singapore 079909

6389 6111

6222 1033

www.sg.cntaiping.com

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type:

Owner ID:

Singapore NRIC

817D

### Vehicle Details

Vehicle No.:

SLB8663G

Vehicle to be Exported:

Yes

Intended Deregistration Date:

24 Mar 2023

Vehicle Make:

B.M.W.

Vehicle Model:

116D 5DR HATCHBACK DSC LED

Primary Colour:

White

Manufacturing Year:

2016

Engine No.:

36589544B37D15A

Chassis No.:

WBA1V720X0V724452

Maximum Power Output:

85.0 kW (113 bhp)

Open Market Value:

\$23,508.00

Original Registration Date:

26 Apr 2016

First Registration Date:

26 Apr 2016

Transfer Count:

1

Actual ARF Paid:

\$9,912.00

### Intended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry Date:

25 Apr 2026

PARF Rebate Amount:

\$6,442.00

### Intended COE Rebate Details

COE Expiry Date:

25 Apr 2026

COE Category:

A - Car up to 1600cc & 97kW (130bhp)

COE Period(Years):

10

QP Paid:

\$43,000.00

COE Rebate Amount:

\$13,270.00

**Total Rebate Amount:**

**\$19,712.00**

The information contained herein is correct as at 24 Mar 2023

OK