VERSION: 1 (03/04/2023 09:18 (SGT))



### 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 5. Intribution provided must be as truthful and accurate as possible. Any white mister estimation of witholding of material facts may allow insurance companies to reputial 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 03/04/2023 09:18 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 01/04/2023 14:30 (SGT) Exact Location of Accident Singapore Additional Location Information LORONG K TELOK KURAU ROAD Country/State of Loss Singapore

## **DETAILS OF OWN VEHICLE**

Mazda

Vehicle Registration Number **SMW311C** 

### INSURED/POLICYHOLDER

Is company? Nο Name Of Registered Owner PHANG DE REN NRIC No SXXXX678C Email Address mrphang95@gmail.com Mobile Phone No (Phone) +65-98008191 Alternative Phone No

# VEHICLE PARTICULARS

Manufacturer

Model CX-30 2.0 AT ELEGANCE FL Variant ..... Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to Yes your vehicle? Vehicle Category Private car Transmission Auto 1998

## INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number SP2003105274-01

### DRIVER

Name of Driver PHANG DE REN NRIC No SXXXX678C Date Of Birth 31/01/1995 Occupation Indoor

Date Of Driving Pass	03/04/2019
Driving experience	4 YEARS
Gender Mobile Number	Male
Alt, Phone Number	(Phone) +65-98008191
Email Address	rrphang95@gmail.com
Address	20E EAST COAST AVENUE SINGAPOR 459215
Address complement	-
Postcode	-
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	
Weather Conditions	Collision - Change/cross lane
Road Surface	Clear Dry
Troud Guildoo	ыу
OTHER INFORMATION	
Management and the second seco	
Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident  Was applied in the Accident?	2
Was anybody injured in the Accident? 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	-
original language used in the statement	•
PASSENGER 1	
Name	PASSENGER
Gender	Female
DETAILS OF POLICE ACTION	
Was the assidant reported to the police?	M
Was the accident reported to the police? Was notice of intended Prosecution given?	No No
If yes, against whom?	No
ii yes, against whom:	-
CIRCUMSTANCES OF ACCIDENT	
FEFER WITH ATTACHED.	
TELET WITH A THORIEST	
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	SMM8016E
Vehicle Manufacturer Vehicle Model	-

Vehicle Variant

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	TAN SOH HIN
Contact Number	(Phone) +65-96709330
Address	<del>-</del>
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 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 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.
- 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 Purpose MOTOR

Policyholder's Signature / Date & Time

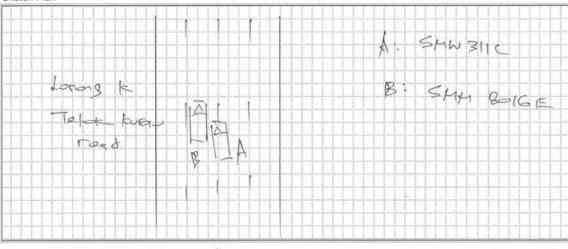
Driver's Signature (if driver is not the policyholder) / Date

& Time

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

Co. Reg. No. 22146800E

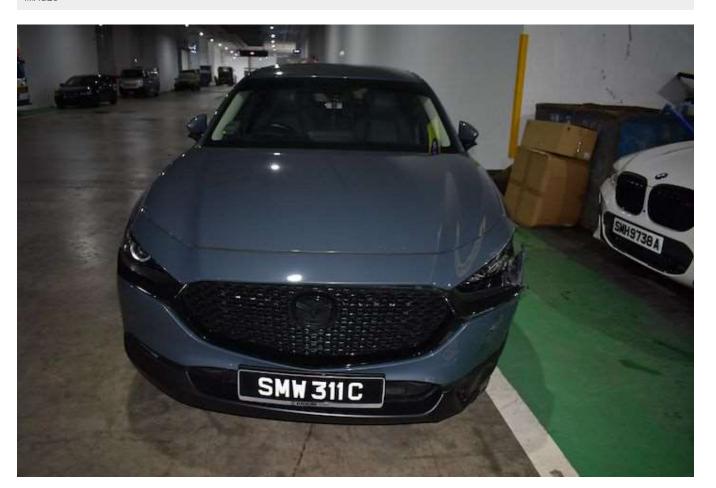
## Sketch Plan



1

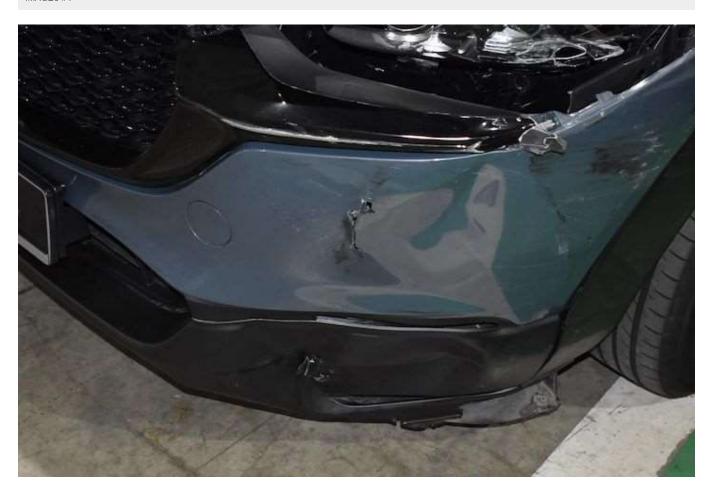
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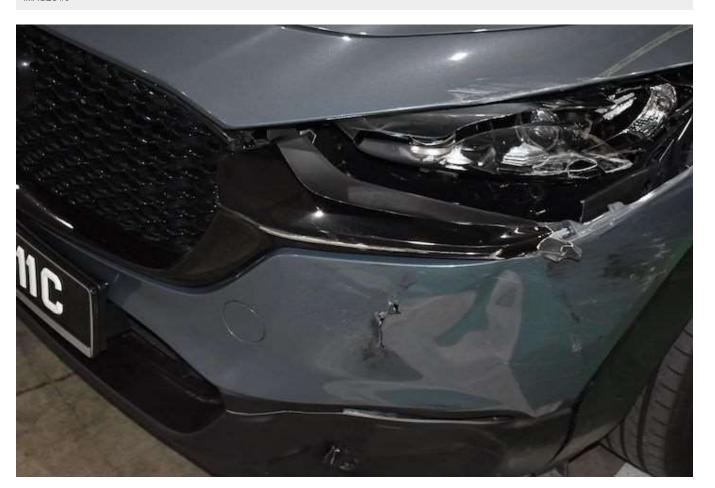
scribe (	Circumstance of the Accident
Jas	filtering to the extreme left land from cound left land and SUM 8016E
JAC	filtering to the extreme left lane from second left lane and SMM8016E on my blind spot. So I fittered left as I did not see any car, but SMM8016E on externe left so I hit the car's right side of the back of right side.
ve(2	on my vind spot. So this war in is the total be truly cut, and supported
10.12	on externe left so I but the car's Agnt side of the back of right side.
e Ple	ease note that your insurer may have 14days time frame for you to submit an own damage claim under your own poli-
ase c	heck your policy for more information.
tan	400K 5M
eclar Ve ded	ation clare the foregoing particulars are true in every respect.
	(* \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
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olicyhol	der'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)
	19 April 2023
	4:45 pm

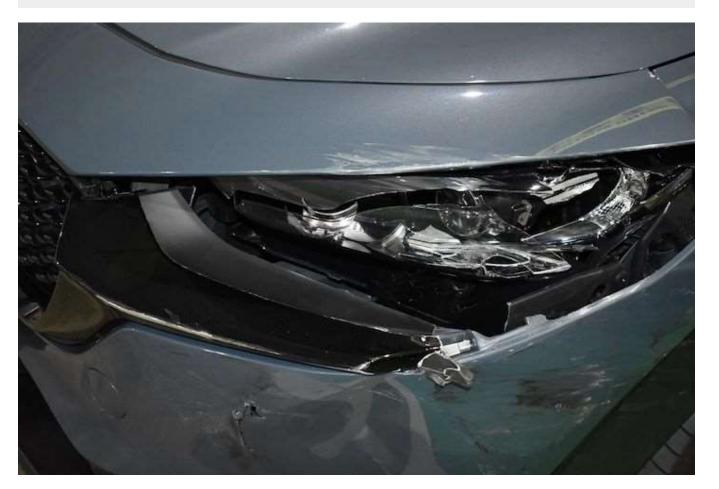


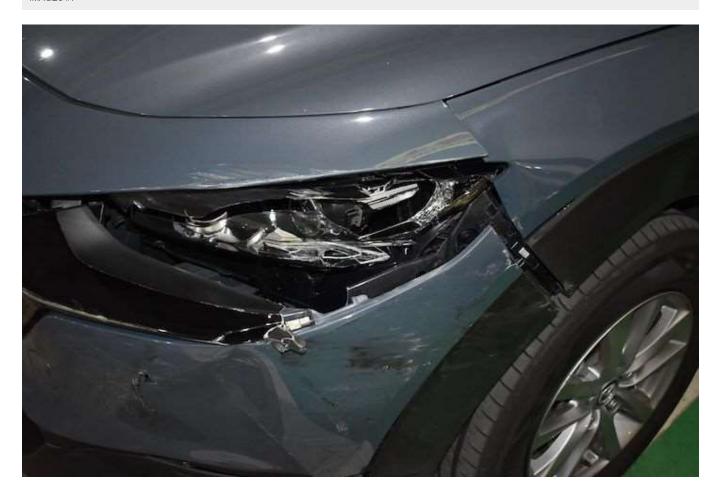


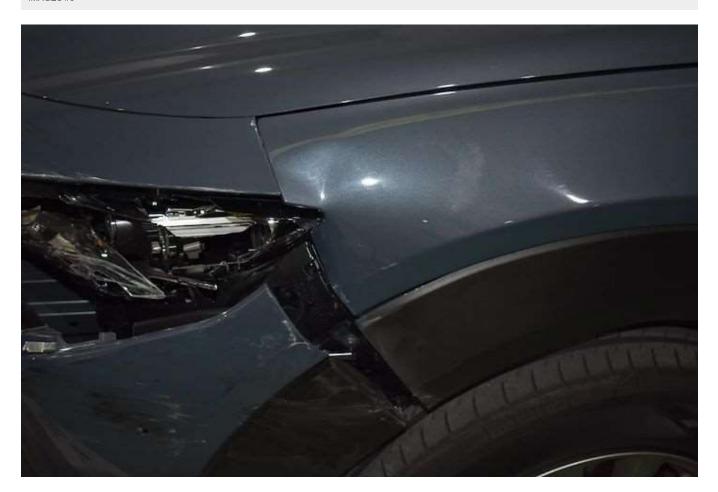


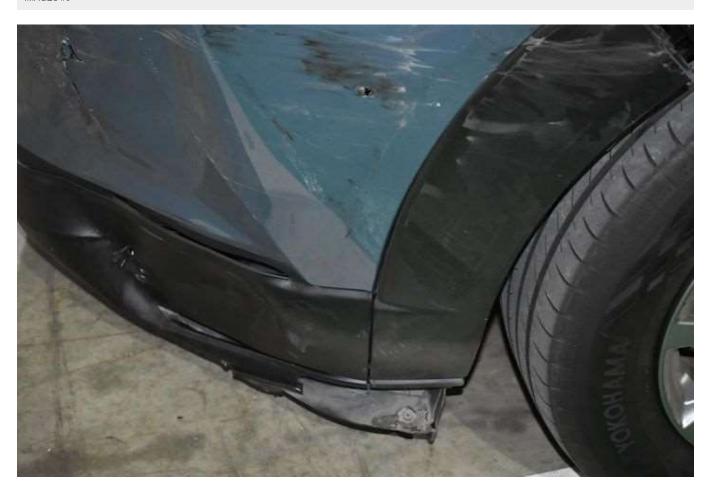








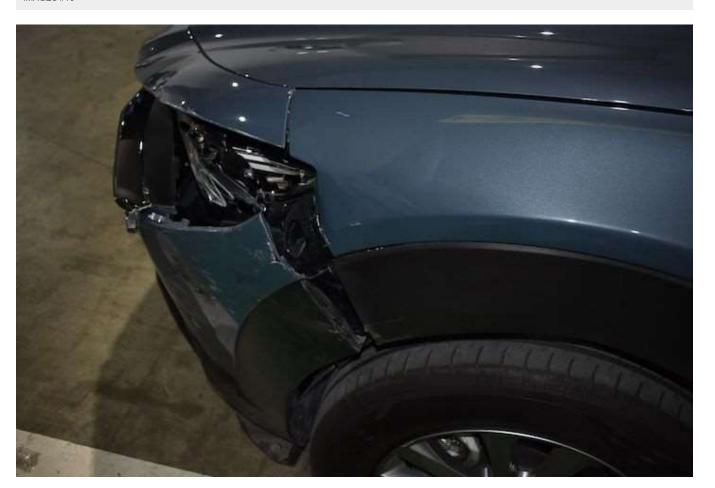




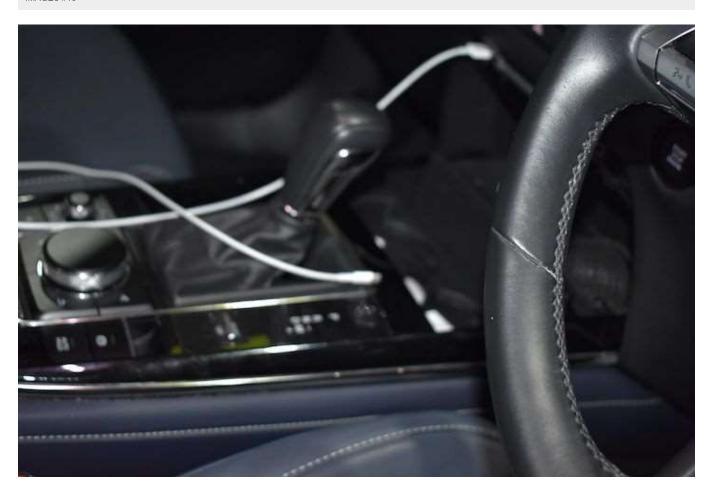


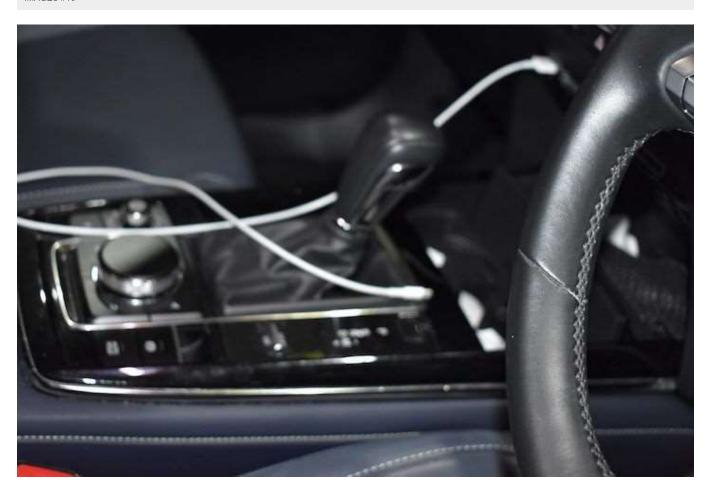


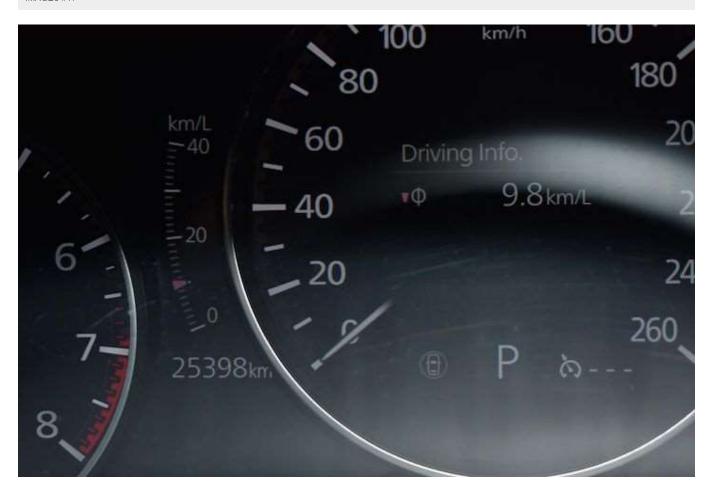




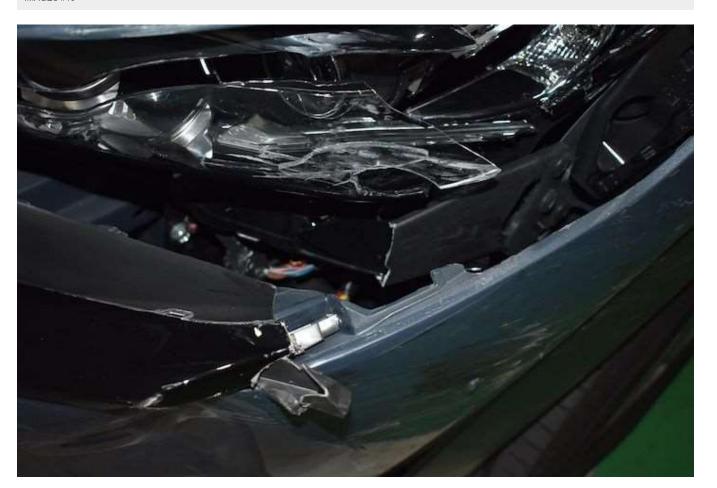


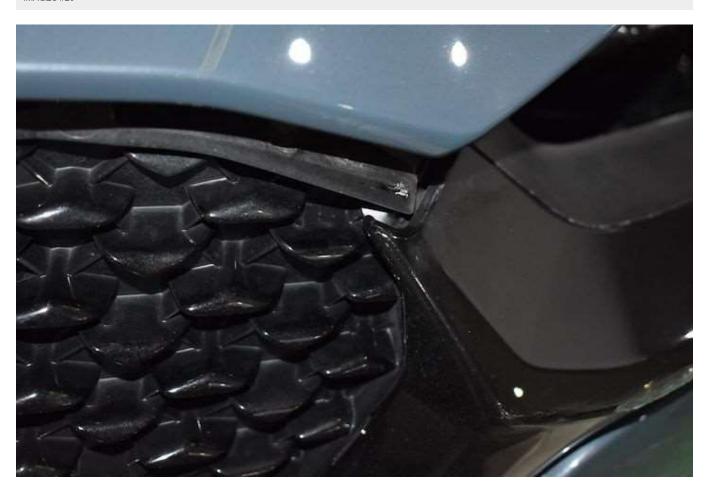


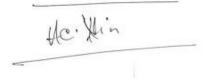














# Allianz Insurance Singapore Pte. Ltd.

## CERTIFICATE OF INSURANCE

NOTOR 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

: SP2003105274-01

Date of Issue

: 11 October 2022

Coverage

: Comprehensive

Policyholder

: PHANG DE REN

Period of Insurance

: 15 October 2022 to 14 October 2023(both dates inclusive)

Registration No.

: SMW311C

Chassis number of Vehicle

; JM6DM2W74M0101665

### 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

#### 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.

11 October 2022

Issued Date

Chief Executive Officer Allianz Insurance Singapore Pte. Ltd.

Intermediary Code

: 0000051 SINGCAPITAL PTE LTD

Own Damage : Windscreen Damage SGD SGD 600.00 100.00

Allianz Insurance Singapore Pte. Ltd. | UEN 201903913C

79 Robinson Road #09-01 Singapore 068897 | Tel: +65 6714 3369 | Website: www.allianz.sg