

## 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 .....	03/04/2023 14:47 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	02/04/2023 17:30 (SGT)
Exact Location of Accident .....	81550 Gelang Patah, Johor, Malaysia
Additional Location Information .....	EDL HIGHWAY TO JB CHECKPOINT
Country/State of Loss .....	Malaysia

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SMJ9756L
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	TAN BOON HENG, VINCENT
NRIC No .....	SXXXX006Z
Email Address .....	VINTAN85@HOTMAIL.COM
Mobile Phone No .....	(Phone) +65-91793880
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Honda
Model .....	Fit
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 .....	1317

#### INSURANCE COMPANY

Name of Insurance Company .....	Direct Asia Insurance (Singapore) Pte Ltd
Policy Number / Cover Note Number .....	MT/01090076

#### DRIVER

Name of Driver .....	TAN BOON HENG, VINCENT
NRIC No .....	SXXXX006Z
Date Of Birth .....	07/05/1985
Occupation .....	Outdoor

Date Of Driving Pass .....	13/10/2011
Driving experience .....	11 YEARS AND 6 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-91793880
Alt. Phone Number .....	-
Email Address .....	VINTAN85@HOTMAIL.COM
Address .....	BLK 450D BUKIT BATOK WEST AVE 6
Address complement .....	#12-663
Postcode .....	654450
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 .....	DRIZZLE
Road Surface .....	Wet

#### 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) .....	4
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

Name .....	ALVIN
Gender .....	Male

#### PASSENGER 2

Name .....	DOREEN
Gender .....	Female

#### PASSENGER 3

Name .....	TAN
Gender .....	Male

#### 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

#### REFER TO SKETCH PLAN & SUMMARY

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
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Was there any video captured by Car Camera? ..... No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SJB4274X
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	MOHAMMAD AZMI BIN MOHAMMAD ALI
Contact Number .....	(Phone) +65-97662174
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

Describe Circumstance of the Accident

On 02/04/2023, at about 17:50 PM; I was travelling towards EDL Highway towards JB Checkpoint. Suddenly, veh B SJB 4274X suddenly hit into my rear (veh SMJ 9756 L). Nobody was injured.

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



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

TED SEOK LAN

**SKETCH PLAN****IMPORTANT NOTICE**

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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.
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**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

TOWARDS JB CUSTOM

Veh A SMJ 9736 L  
Veh B SJB 4274 X











**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No: SW0E23430007 Vehicle Registration No: SMJ9756L  
 Name (as shown in NRIC): Tan Boon heng, Vincent NRIC/FIN/Passport No: SxxxX006Z  
 (\*Vehicle Driver/Vehicle Owner) (\*) Please delete as appropriate  
 Address: Blk 450D, Bukit BATOK WEST # 12-663 Singapore (654450)  
 Contact (Tel): \_\_\_\_\_ Mobile No.: 9179 3880  
 Email Address: Vintan85@hotmail.com  
 Date of Accident: 2.4.2023 Time of Accident: 17.30 pm  
 Place of Accident: Towards JB CHECKPOINT  
 Insurance Company: DIRECT ASIA

**(B) ADDITIONAL INFORMATION /AMENDMENTS:**

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

Amend to 3rd party claims.

[Signature]  
 Policyholder / Driver's Signature  
 Date: 5/4/2023

[Signature]  
 Reporting Centre Personnel's Signature  
 Name: PAULINE WEBB  
 NRIC/FIN No.: SXXXX086J  
 Date: 5/4/23



Contact us at  
Hotline: (65) 6665 5555  
E-mail: customerservice@directasia.com

## CERTIFICATE OF INSURANCE

**Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act")**  
**Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore)**  
**Road Transport Act, 1987 (Malaysia)**  
**Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)**

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

<b>Certificate No.</b>	: MT/01090076
<b>Type of Coverage / Driver Plan</b>	: Car Comprehensive (Value Plan)
<b>1) Vehicle Registration No.</b>	: SMJ9756L
<b>Chassis No.</b>	: GK31345970
<b>2) Name of Policy Holder</b>	: TAN BOON HENG VINCENT
<b>3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act</b>	: 26/09/2022 00:00
<b>4) Date/Time of Expiry of Insurance</b>	: 25/09/2023 23:59
<b>5) Persons or Classes of Persons Entitled to Drive</b>	
(a) Any person who is named on the policy who is driving on the Policyholder's permission.	
The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.	
<b>6) Limitations as to use*</b>	
Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business. Grab Hitch will only be covered if this is the declared usage stated on your Policy Schedule.	
*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.	
<b>Sum Insured</b>	: Market Value
<b>Own Damage Excess</b>	: S\$ 600.00
<b>Windscreen Excess</b>	: S\$ 100.00
<b>Choice of workshop</b>	: DirectAsia approved workshops
<b>Finance company / Hire Purchase</b>	:
<b>Main driver</b>	: TAN BOON HENG VINCENT
<b>Named driver</b>	: None
<b>Important Note: This policy is on a named driver basis. The Policyholder has to be named as the Main Driver or Named Driver to be covered. Any unnamed drivers will not be covered.</b>	

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

Issued on: 22/08/2022

Direct Asia Insurance (Singapore) Pte. Ltd.

  
Underwriting Manager

Direct Asia Insurance (Singapore) Pte Ltd  
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