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.

- 4. The issue and acceptance of this is form by instrained 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 10/04/2023 12:11 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 06/04/2023 22:11 (SGT) Exact Location of Accident Woodlands Centre Rd, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Honda

1500

Vehicle Registration Number SNJ7732G

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner FONG TUCK HOY NRIC No S1536873Z Email Address FONGALVIN1962@GMAIL.COM Mobile Phone No (Phone) +65-91245050 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Vezel Variant Exact purpose for which vehicle was being used at time of accident Private hire Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Policy Number / Cover Note Number DMHCSNW00004562300

DRIVER

CC

Name of Driver FONG TUCK HOY NRIC No S1536873Z Date Of Birth 06/07/1962 Occupation Outdoor

Date Of Driving Pass 01/03/1980 Driving experience 43 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-91245050 Alt. Phone Number Email Address FONGALVIN1962@GMAIL.COM Address **BLK 247 KIM KEAT LINK #05-31** Address complement Postcode 310247 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Nο 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 - Change/cross lane Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement PASSENGER 1 Name **CARMEN** Gender **Female DETAILS OF POLICE ACTION** Was the accident reported to the police? Yes Police Station Name Traffic Police Police Station Phone No (Phone) +65-65470000 Alt. Police Station Phone No (Fax) +65-65474900 Police Station Address 10 Ubi Avenue 3 Singapore 408865 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT: T/20230408/7011. ATTACHMENT(S) Are accident photos available for attachment? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

No

Was there any video captured by Car Camera?

Vehicle Registration Number SI	LU9279B
Vehicle Manufacturer	
Vehicle Model	
Vehicle Variant -	
Vehicle Colour	
Vehicle Category Pr	rivate car
Name of Driver	
Contact Number	
Address	
Address complement -	
Postcode -	
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident VE	EHICLE B
No. Of Passenger (Including Driver)	

INCONTANT NOT

SKETCH PLAN

IMPORTANT NOTICE

- 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 GtA 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.

#

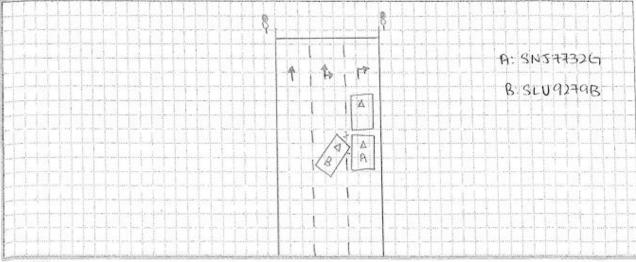
Policyholder's Signature / Date & Time

#.

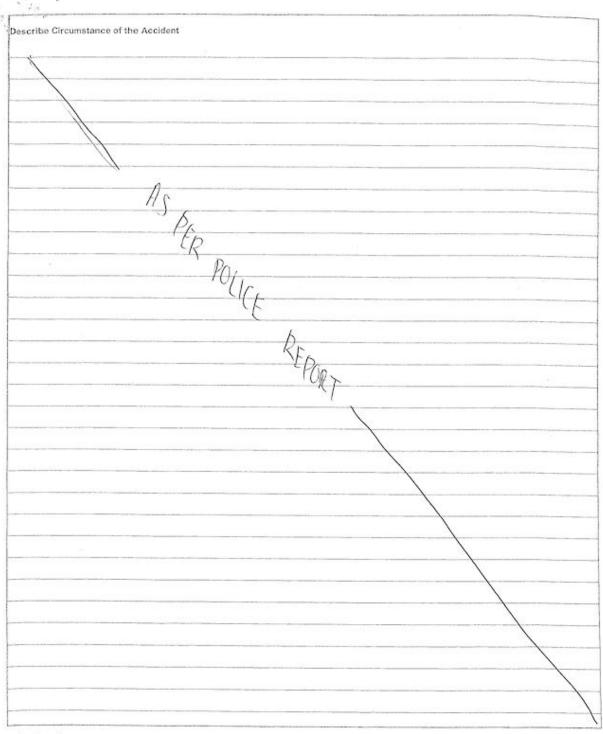
Actual Driver's Signature (if driver is not the policyholder) / Date & Time

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

Sketch Plan



vJun2022



Declaration

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

Policyholder's Signature / Date & Time Actual Driver's Signature (if driver is not the policyholder) Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

v.Jun2022





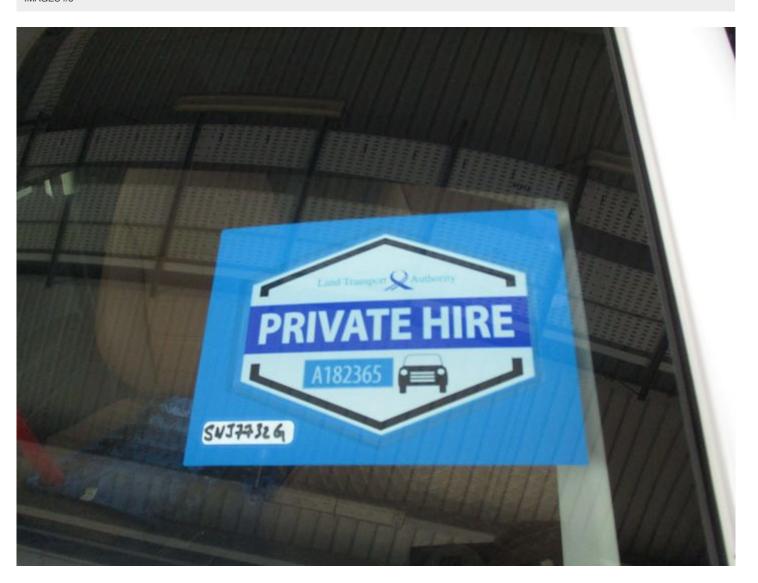






















Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20230408/7011

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/04/2023 12:33		Vide Report No.:	Station Diary No.:		
Informa	nt's Partic	ulars			
Name of Informant: FONG TUCK HOY		Address: 247 KIM KEAT LINK #05-31 SINGAPORE 310247			
ID Type / ID No.: NRIC NO / S1536873Z			Contact No.: Home/Office:	Mobile: 91245050	
National SINGAP	ty: ORE CITIZ	'EN	Email: FONGALVIN1962@GI	MAIL.COM	
Sex: Male	Age: 60	Date of Birth: 06/07/1962	Type of Informant: Driver		
Race: Chinese		Language: English	Institution / School Name:		
Occupation: Self Employed		Driving Licence Inform Class:	ation: Date of Expiry:		

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 06/04/2023 22:10	Type of Location T-Junction
Location: WOODLAND Weather:	S CENTRE ROAD	Road Surface:		Road Speed Limit:
Clear		I I I Irv		
Clear Traffic Flow: One Way		Dry Traffic Control: Traffic Light - Wor	king	Traffic Volume: Heavy

Vehicle No.	Туре	Make	Model	Color	Conditio	No of
SLU9279B	Car					0
SNJ7732G	Car					0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



T/20230408/7011

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20230408/7011

CONTINUATION OF REPORT

Driver					
Name	FONG TUCK HOY			ID No.	S1536873Z
Related Vehicle	SNJ7732G (Car)			Contact No.	91245050
Hospital/Clinic	NIL			Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	05000	Date	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	NIL	

Brief Details.

I was travelling along Woodlands Centre Road on 06/04/2023 at about 10.11pm with my car bearing car plate number SNJ7732G. I was travelling straight when suddenly Vehicle B bearing car plate number SLU9279B cut into my lane and collided onto the left side portion of my vehicle. I alighted, took photos and signaled SLU9279B driver to stop at the road side as we are blocking the way, But when I went back to my vehicle to drive to the road side, SLU9279B just drove away, did not exchange particulars and left (Hit & Run).





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20230408/7011

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 08/04/2023 12:33
Officer In Charge Of Case: TP / TPIB / NEO ZHI YUAN Contact No.: 65476079	Classification Of Case:

NP168



中国太平保险(新加坡)有限公司

INA TAIPING INSURANCE (SINGAPORE) PTE. LTD

Motor Hire Car

MZ406L/B

CERTIFICATE OF INSURANCE

N SN

otor 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)

AN0761A Cov. Type:C

CERTIFICATE No.

DMHCSNW00004562300

Engine No.: L15Z1004452 Cha. No.:RV31003650

1. Index Mark and Registration Number of Vehicle

SNJ7732G

AUTOSAFE

2. Name of Policy Holder

FONG TUCK HOY

Excess Sect I

S\$1,250.00

Effective date of the Commencement of 24/02/2023 Insurance for the purposes of the Regulations, (12:22:41) Ordinance or Enactment

Excess Sect. I (Outside Singapore) Excess Sect. III S\$2,500.00

Excess Sect II (Outside Singapore).

\$\$1,250.00 \$\$2,500.00

4. Date of Expiry of Insurance

23/02/2024

EX ON WINDSCREEN

\$\$100.00

5. Persons or Classes of Persons entitled to drive*

Persons or Crisposa or Persons delicated below.

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.

FONG TUCK HOY

- 6. Limitations as to use:*
 - (1) Use for the carriage of passengers or goods in connection with the Policyholder's business.
 (2) Use for social domestic pleasure purposes and business purposes 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 frailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

HIRE PURCHASE CO.: MY AUTO CAPITAL 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.

Authorised Signatory

Issued By: MY INSURANCE AGENCY PTE, LTD. Authorised Officer

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

Q 6389 6111

6222 1033

www.sg.cntalping.com