

Email: sm@idac.com.sg Tel no: 6555 6888

\*If no proper documents are produced, IDAC shall not file the report. Information will be discarded after one week.

Date of Accident: 06 / 04 / 2023 (dd/mm/yy)

Time of Accident: 14 : 06 (24-HR-FORMAT)

Vehicle No. : SMQ 357 C Vehicle Make & Model / Engine (cc): Honda Jazz (1500cc) Private Hire: ( Y / N )

Exact location of Accident: Sungei Kadut

Policyholder's Name / IC No. : Star Sin Trading Pte Ltd ROC/UEN (Company) 198803822Z

Driver's Name / IC No. : Tan Boon chye (S1578148C) (As Above)

Driver's Contact No. : 9348 9559 Company Contact No / Owner Contact No: \_\_\_\_\_

Driver's Address: 139A Upper Paya Lebar Road (S) 534 845

Owner Email address: \_\_\_\_\_ Insurance Company : China Taiping

Driver Email address: boonchetan 54@gmail.com

**Relationship between Owner & Driver:** (Please **CIRCLE** one only)

Owner / Spouse / Children / Friend / Parents / Sibling / Relative / Employee / Hirer or Others specify: Worker

**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)

**Exact purpose for which the vehicle was being used at time of accident?**

**Occupation (nature of job)**  Indoor /  Outdoor

Private use /  Work purpose

\*No. of Passengers (Including Driver): 2

\*Passenger Name: Isak Bin Majanah Gender: (Male) / Female x(1)

\*Passenger Name: \_\_\_\_\_ Gender: Male / Female x( )

**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 Camera?**  Yes /  No Remarks: \_\_\_\_\_

**Any Injuries:**  Yes /  No (If YES) Injured Person's Name: Tan Boon Chye & Isak Bin Majanah

Injuries Sustain: \_\_\_\_\_ Injured Person in Which Vehicle: SMQ 357 C

**Police Report filed:**  Yes /  No (If YES) Which Police Station: \_\_\_\_\_

### **The Other Party(s) Details:**

1. Driver's Name / IC No. : Paguirisamy Radje Vehicle No: YP 5222 M

Driver's Contact No: 8453 9047 Insurance Company: \_\_\_\_\_

2. Driver's Name / IC No (If Any): \_\_\_\_\_ Vehicle No: MC 6087 Y

Driver's Contact No: \_\_\_\_\_ Insurance Company: \_\_\_\_\_

\*Independent Witness (If Any): \_\_\_\_\_ Contact No: \_\_\_\_\_

Preferred Workshop Name: Hua Meng Spray Painting Workshop Contact No: \_\_\_\_\_

**SKETCH PLAN**

I hereby authorise your goodself to send my accident report to my workshop via email :  
Email : huameng@live-com-sg

**IMPORTANT NOTICE**

Signature : \_\_\_\_\_ X

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 Authorised 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. The 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.

**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.

**STAH SIN TRADING PTE LTD** X  
No. 10 SUNGEI KADUT DRIVE  
SINGAPORE 729574

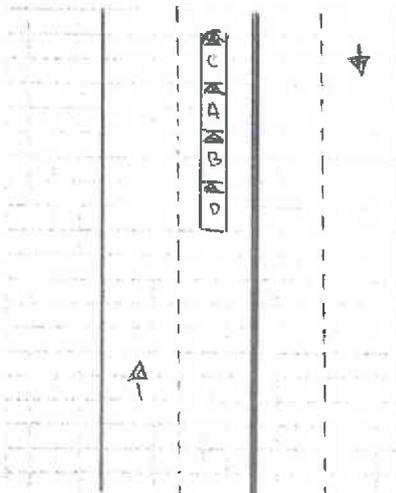
TEL: 63658879 FAX: 63670830

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

**Sketch Plan**



A : S M Q 357 Q  
B : Y P 522 J M  
C : M C 6087 Y

Sungei Kadut

**Describe Circumstances of the Accident**

I drive along Sungei Kadat on 06.04.2023 at about 1406 pm.

Lorry C has stopped in front of vehicle A, but Lorry B suddenly collides with the rear of

Vehicle A, causing Vehicle A to collide with the rear of Lorry C.

**Declaration**

We declare the foregoing particulars are true in every respect.

STAR SIN TRADING PTE LTD  
NO. 10 SUNGEI KADUT DRIVE  
SINGAPORE 729574  
TEL: 63658879 FAX: 63670830

X



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel



Motor Private Car

MX4F

N SN

**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)

AN0421A

Cov. Type:C

CERTIFICATE No.	DMPCSNW00209722200	Engine No.: L15A71004402	
		Cha. No.:JHMGE88509S203566	
1. Index Mark and Registration Number of Vehicle	SMQ357C	AUTOSAFE	=====
2. Name of Policy Holder	STAR SIN TRADING PTE LTD		
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	05/09/2022 (16:34:58)	Named Drivers Ex Sect. I	SS\$500.00
		Additional Ex Other than Named Drivers:	
		Ex Sect. I - Age <= 25	SS\$3,000.00
		Ex Sect. I - Age >= 26	SS\$500.00
4. Date of Expiry of Insurance	04/09/2023	* Age as at date of accident	
		EX ON WINDSCREEN .	SS\$100.00
5. Persons or Classes of Persons entitled to drive*	Any person who is driving on the Policyholder's order or with their 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\$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.		

\* 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: VITESSE SOLUTIONS  
Authorised Officer

  
Authorised Signatory