

NATIONAL Assessment Centre Services. (n11112041)



## 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	20/04/2023 17:11 (SGT)
Reported by	Actual Driver
Date of Accident	20/04/2023 16:00 (SGT)
Exact Location of Accident	CTE, Singapore
Additional Location Information	TOWARDS JURONG (BUKIT TIMAH)
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJD3688G
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	FOO KIAN BENG
NRIC No	SXXXX962A
Email Address	kelvinfoo@op3creative.com
Mobile Phone No	(Phone) +65-96289871
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	BMW
Model	X7
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	2998

### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNW00043332301

### DRIVER

Name of Driver	MAO LINGLI
NRIC No	SXXXX296B
Date Of Birth	22/11/1981
Occupation	Indoor

Date Of Driving Pass	18/09/2013
Driving experience	9 YEARS AND 7 MONTHS
Gender	Female
Mobile Number	(Phone) +65-97760568
Alt. Phone Number	-
Email Address	kelvinfoo@op3creative.com
Address	BLK 46 MOUNT VERNON ROAD #17-49
Address complement	-
Postcode	368063
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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?	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLR4720S
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-

Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number .....	SLV7848S
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	-
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-



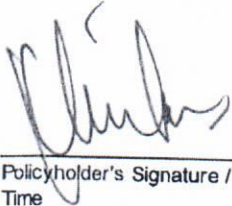
**Describe Circumstances of the Accident**

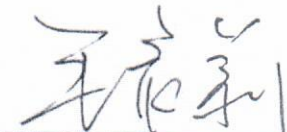
On 19.04.2023 about 1600hrs

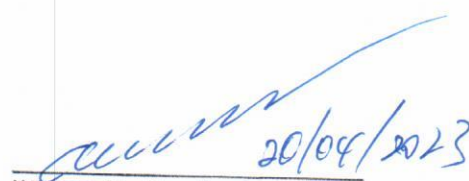
I was travelling along CTE and I slowing down due to the front traffic. Suddenly, the vehicle (SLR 4720S) collided onto rear portion of my vehicle (SJD 3688G). I was involved in the 3 car chain-collision.

**Declaration**

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

  
Witnessed by Reporting Centre Personnel

Date of Accident : 20.04.2013 Accident Time : 1600 hrs (24-HR-Format)  
 Who reported the accident? : Owner / (Driver) / Both  
 Accident Place : CTE toward Jurong Bukit Timah  
 Vehicle No (Car Plate No) : SJD 3688G Make/Model: BMW X7  
 Insurance Company : China Taiping Policy No: DMP CSNW00043332301  
 Fleet Policy : YES / (NO)  
 Type of Coverage : (Comprehensive) / Third Party / Third Party Fire & Theft  
 Name of Owner / IC No : Foo Kian Beng (S6812962A)  
 Owner Contact No : 9628 9871 Owner's Hp \_\_\_\_\_ Company Tel \_\_\_\_\_  
 Driver Name / IC No : Mao Lingli (S8189296A)  
 Driver's Date of Birth : 22.11.1981 Driver's License Pass Date: 18.09.2013  
 Relationship of Driver : (Spouse) / Parents / Children / Sibling / Employee / Other: \_\_\_\_\_  
 Driver's Address : Blk 46 Mount Vernon Rd #17-49 Singapore 368063  
 Driver's Contact No : 1) 97760568 2) \_\_\_\_\_  
 Driver's Occupation : (INDOOR) / OUTDOOR (e.g. working inside or outside office)  
 Email Address : kelvinfoo @ op3creative . com  
 Weather & Road Surface : (CLEAR & DRY) / RAINING & WET / AFTER RAIN & WET  
 Reporting Type : Reporting Only / (Claim Third Party) / Claim Own Insurance  
 Number of Passenger(include Driver) : 1 Driver  
 Was there any video footage? : YES / (NO)  
 Exact purpose used at time of accident : (Private Use) / Private Hire / Work Purpose  
 Any injury (If Yes, Pls State) : NIL

**Other Party Driver's Particular (if any)**

VEH B : <u>SLR 4720S</u>	Name & Contact No: _____
VEH C : <u>SLV 7848S</u>	Name & Contact No: _____
VEH D : _____	Name & Contact No: _____
VEH E : _____	Name & Contact No: _____

**\*NEW - Passenger's Name & Gender:**





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

R SN

AN0421A

Cov. Type: C

CERTIFICATE No.

DMPCSNW00043332301

Engine No.: 13445512B58B30C

Cha. No.: WBACW22080LD25983

1. Index Mark and Registration  
Number of Vehicle

SJD3688G

2. Name of Policy Holder

FOO KIAN BENG

3. Effective date of the Commencement of  
Insurance for the purposes of the Regulations,  
(Ordinance or Enactment)

11/04/2023

(00:00:00)

Named Drivers Ex Sect. I

S\$1,500.00

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

4. Date of Expiry of Insurance

10/04/2024

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. : UNITED OVERSEAS BANK LIMITED

\* 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

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)

3 Anson Road #16-00 Springleaf Tower Singapore 079909

6389 6111

6222 1033

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