SK0U234D0004 / KAN FOOK SING MOTOR WORKSHOP [533758] ENTRY DATE & TIME: 13/04/2023 12:49 (SGT) SUBMITTED BY: Boo Miow Hwa VERSION: 1 (13/04/2023 12:49 (SGT))



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
- 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.

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 13/04/2023 12:49 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 11/04/2023 08:40 (SGT) Exact Location of Accident Singapore Additional Location Information JALAN AHMAD IBRAHIM BEFORE BENOI ROAD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Auto

1395

Vehicle Registration Number SMX7101R INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner YUEN SAI KIT IVAN NRIC No S9346419B Email Address ivanyuenski@gmail.com Mobile Phone No (Phone) +65-96224826 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Seat Model TOLEDO 1.4 TSI 125 STYLE 7AT Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to your vehicle? Yes Vehicle Category Private car

INSURANCE COMPANY

Transmission

CC

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd. Policy Number / Cover Note Number SP2004251822-01

DRIVER

Name of Driver NRIC No Date Of Birth, Occupation

YUEN SAI KIT IVAN S9346419B 03/12/1993 Indoor

Date Of Driving Pass 01/07/2016 Driving experience 6 YEARS AND 9 MONTHS Gender Mobile Number (Phone) +65-96224826 Alt. Phone Number **Email Address** ivanyuenski@gmail.com Address APT BLK 41 SIMS DRIVE #14-257 (S) 380041 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 Collision - Head to Rear 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? 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 REFER WITH ATTACHED. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Reasons for not uploading a video of the accident WITH INSURED. **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

Name of Driver

MR CHIA

Accident report SK0U234D0004

Contact Number	(Phone) +65-97386530
Address	â
Address complement	<u> </u>
Postcode	¥
Insurance Company Name	¥
Nature Of Damage	<u> </u>
Details of property damaged in accident	9
No. Of Passenger (Including Driver)	2

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report gone of the distains of the accident to speed up the claims process
- 2. This Form must be as not sted by the Po cynother and or the Actual Boxes
- 3 Information provided must be as truthful and accounte as possible. Any wilful misrepresentation or withholding of material facts may; llow insorance companies to regulate policy liability.
- 4. The issue and acceptance of this Form by insurance companies to not an addission of policy (inbit) 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 Insurerse Association of Singapore (GIA) (or archiving and that copies of this report will for a fee be made evaluable upon application by interested parties.
- By the ladgement of this report to the insurers, you hereby consent to the archiving of this report of the centre and to copies of the
 report being made available aforesaid.

6. Consent under the Personal Data Protection Act (PDPA)

Lundersland, acknowledge, agree and consent that

- (a) 5ty insurer, my workshop and the General Insurance Association of Singapore (IGIA.) may lare permitted to collect, use idisclose and/or process any personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Porsonal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers liawyors law firms, the Monetary Authority of Singapore and any relevant government agency/suthority (such as the police), for the purpose(s) of:
- (i) processing then ding and/or dealing with my claims including the settlement of the claims and any recessory 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 met
- (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 envelopesimal packages); and/or
- (v) complying with applicable law in administering, processing thandling 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 aw firms, may are permitted to cortect, 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 seed outside of Singapore, for one or more of the above Purposes.



iescribe Circumstance of the Accident	- H
Rear-ended car in front.	1.1
vehice in front slow down and	I follow.
Howarer, by car Strip roll forward.	- list+
Touch orto the rea of his ca	- 240H3391
	4
ote. Please note that your insurer may have 14days time frame for you to submit an own damage claim on	der your own policy
lease check your policy for more information.	15

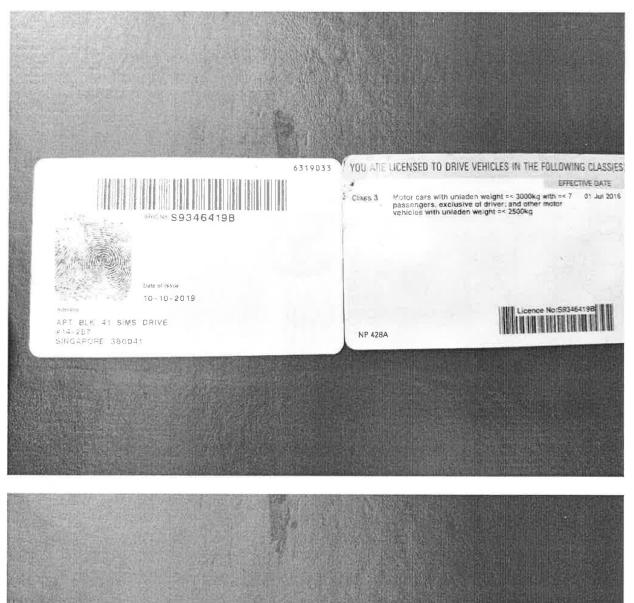
Declaration

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

Pelicyfolder's Signature / Date & Time

Onwor's Signature (1 driver is not the posicyholder) / Plane & Timbe Wenessed by Repeating (Name no in NRIC Distard)

2







Allianz Insurance Singapore Pte. Ltd.

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1887 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS; RULES 1859 (FEDERADON OF MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAPITAS OF THE NEVISED ED HON/IREPUBLIC OF SINGAPORE)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION; RULES 1956 (REPUBLIC OF SINGAPORE)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION; RULES, 1950

OR ANY ANTHOUGHT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Cartificate Number

: SP2004251822-01

Date of Issue

: 25 January 2023

Coverage

Comprehensive

Palicyna'der

: YUEN SALKIT IVAN

Period of Insurance

27 January 2023 to 25 January 2024 (both dates inclusive)

Registration No.

: SMX7101R

Chassis number of Vehicle

: V\$\$ZZZNHZK1011500

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.

Priority II with person divilig is projetted in according with the branking or other ways acroglication to according Major Vehicle or has tion permitted and a not disquelified by order of Court of Low or by reason of any constanct or equilations in the behalf from this cy the Motor White And provided further that the Motor Web circles organized under the Prod Traffic Assharest peen agreefed at the size of netidors leas er dumaya

Limitation as to Use*:

Used only for social, demostic and pleasure purposes and for the Policyholder's business.

The Policy does not cover:

- (a) use for hire or reward
- (a) use for racing pace-making, reliability trials or speed testing
- (c) use for the cassage of goods (other than samples) in connection with any trade or business
- (d) use for any purposes in connection with the Motor Trade

Transplan rendered mapping the by Section 8 of Mator Vericles (Trick Party Ricks and Compensation) Act (Chapter 189) and Section 95 of the Roda Transport Act, 1987 (Majoysia), are not to be included under these headings

IWE 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.

25 January 2023

Issued Date

Hicham Raissi Chief Executive Officer Allianz Insurance Singapore Pte, Ltd.

Intermediary Code

: 0000387 HO SEET PENG

Excess

: Own Damage

: Windscreen Damage

SGD sen

700 00

Allianz Insurance Singapore Pte, Ltd. (UEN 2019)3813C

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