



## 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	04/05/2023 12:08 (SGT)
Reported by	Actual Driver
Date of Accident	02/05/2023 21:00 (SGT)
Exact Location of Accident	Yio Chu Kang, Singapore
Additional Location Information	JINCTION WITH ANG MO KIO AVENUE 5
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG6820G
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	RONNIE RENE LOH LAYE
NRIC No	SXXXX815G
Email Address	annajulianatan@gmail.com
Mobile Phone No	(Phone) +65-91897474
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Opel
Model	Astra
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	1399

### INSURANCE COMPANY

Name of Insurance Company	EQ Insurance Company Ltd
Policy Number / Cover Note Number	DMPPHQ22-007656

### DRIVER

Name of Driver	TAN LEE CHENG
NRIC No	SXXXX593J
Date Of Birth	20/02/1966
Occupation	Indoor

Date Of Driving Pass .....	25/02/1992
Driving experience .....	31 YEARS AND 3 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-81008270
Alt. Phone Number .....	-
Email Address .....	annajulianatan@gmail.com
Address .....	102 GERALD DRIVE #03-74
Address complement .....	SELETAR SPRING CONDO
Postcode .....	798593
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 .....	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 .....	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) .....	2
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 .....	BERNICE
Gender .....	Female

#### 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 .....	FBQ1639M
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-

Vehicle Colour .....	-
Vehicle Category .....	Motorcycle
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) .....	-

SKETCH PLAN

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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.

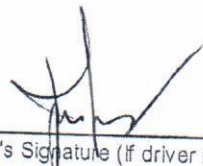
(collectively the "Purposes")

(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

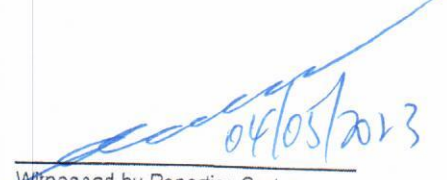
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date & Time

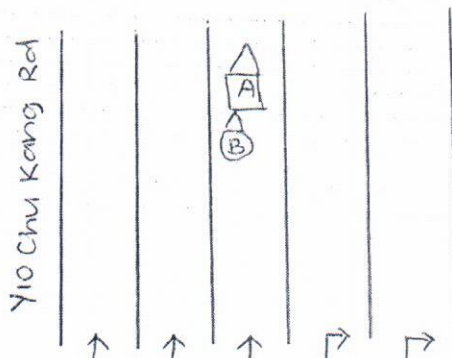


Driver's Signature (If driver is not the policyholder) / Date & Time

  
04/05/2013  
Witnessed by Reporting Centre Personnel

**Sketch Plan**

Ang Mo Kio Ave 5



A: SLG6820G

B: FBQ1639M

Describe Circumstances of the Accident

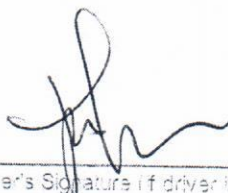
On the Stated date and time, I was travelling along  
Yio Chu Kang Road. The traffic light turned amber and I  
came to a stop at the junction of AMK Ave 5.  
Suddenly, I felt an impact on the rear portion of my  
vehicle.

Declaration

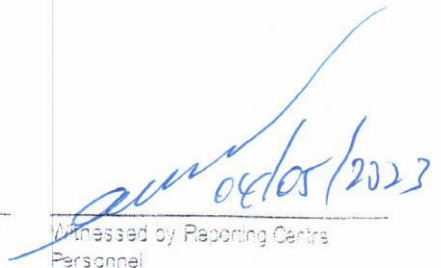
We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date &  
Time



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



08/10/2023

Witnessed by Reporting Centre  
Personnel

JWL

Date of Accident : 02/05/2023 Accident Time: 2100hrs (24-HR-FORMAT)  
 Accident Place : Junction of Yio Chu Kang Rd & AMK Ave 5  
 Vehicle Reg. No (Car plate No.) : SLG6820G Vehicle Make/Model: Opel Astra  
 Insurance Company : EQ Policy No. DMPPHQ22-007656  
 Name of Registered Owner : Company / Individual Ronnie Rene Loh Laye  
 ID of Registered Owner : Co Reg No: \_\_\_\_\_ Owner's NRIC No: S1811815G  
 : Co Contact No: \_\_\_\_\_ Owner's Contact No: 9189 7474  
 DRIVER'S Name : Tan Lee Cheng DRIVER'S NRIC No: S1765593J  
 DRIVER'S Date of Birth : 20/02/1966 DRIVER'S License Pass Date 25/02/1992  
 Relationship bet. Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: \_\_\_\_\_  
 DRIVER'S Address : 102 Gerald Drive #03-74 Seletar Springs Condo  
 DRIVER'S Contact No / Alt No. : (1) 8100 8270 (2) \_\_\_\_\_ S(798593)  
 DRIVER'S Occupation : INDOOR (eg. working inside or outside of an ofc)  
 Email Address : annajulianatan@gmail.com  
 Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET  
 Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance  
 Number of Passengers (including Driver) 2 Passenger Name: Bernice Gender: M/F  
 Was the accident reported to the police? YES \ NO Passenger Name: \_\_\_\_\_ Gender: M/F  
 Was there any video Captured by car camera: YES \ NO Any Injuries: YES \ NO Injured Name: Ronnie  
 Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

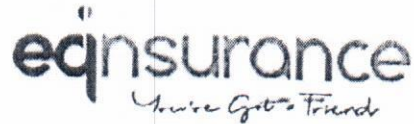
Other Party Driver's Particulars (if any)

Vehicle Reg No: <u>FBQ1639M</u>	Vehicle Reg No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name DRIVER: _____	Name DRIVER: _____
IC No. DRIVER: _____	IC No. DRIVER: _____
DRIVER'S Contact & add: _____	DRIVER'S Contact & add: _____

Other Party Driver's Particulars (if any)

Vehicle Reg No: _____	Vehicle Reg No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name DRIVER: _____	Name DRIVER: _____
IC No. DRIVER: _____	IC No. DRIVER: _____
DRIVER'S Contact & add: _____	DRIVER'S Contact & add: _____

EQ Insurance Company Limited  
5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110  
tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg  
reg no. 1978-00490-N



**CERTIFICATE OF INSURANCE**  
ROAD TRANSPORT ACT 1987 (MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP 189 OF THE REVISED EDITION)  
(REPUBLIC OF SINGAPORE)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 EDITION (REPUBLIC OF SINGAPORE)  
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

**PRIVATE CAR**  
**Comprehensive Classic**

Certificate No. : DMPHQ22-007656

1. Index Mark and Registration Number of Vehicles  
SLG6820G

2. Name of Policyholder  
RONNIE RENE LOH LAYE

3. Effective Date of the Commencement of Insurance for the purpose of the Act  
10/10/2022

4. Date of Expiry of Insurance  
09/10/2023

5. Person 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.

Classic Plan - EQ authorized workshop only  
Form: MX2  
Excess:  
Insured & Named Driver S\$500.00 (Section 1 - Own Damage)  
Unnamed Driver S\$1,000.00 (Section 1 - Own Damage)  
YEIDR Additional S\$3,000.00  
WindScreen S\$100.00

EQ Motor Accident  
Hotline

**6311 3211**



\* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage.

**6. Limitation as to use\***

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover:


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

\*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) or and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase : Maybank Singapore Limited

A000298/Tong Hin Insurance Agency Pte Ltd  
Date of Issue : 22/09/2022 11:59

  
Authorized Signatory  
EQ Insurance Company Limited

**Note**

Young, Elderly &/or Inexperience Driver (YEIDR) refers to any person authorized to drive who is below 26 years old or above 70 years old and/or the holder of a qualified driving licence of less than 2 years duration.

 A Member of Citystate

 CamScanner

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