

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	03/05/2023 17:51 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	02/05/2023 17:00 (SGT)
Exact Location of Accident	CTE, Singapore
Additional Location Information	ANG MO KIO AVE 1 TWDS AMK AVE 3
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMW2134J
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAY KUAN HOE
NRIC No	S1232022A
Email Address	SLTANJANETTAN@GMAIL.COM
Mobile Phone No	(Phone) +65-96748420
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Sienta
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	1600

INSURANCE COMPANY

Name of Insurance Company	Great American Insurance Company
Policy Number / Cover Note Number	MOMVP0000050595-00-000

DRIVER

Name of Driver	TAY KUAN HOE
NRIC No	S1232022A
Date Of Birth	30/09/1957
Occupation	Outdoor

Date Of Driving Pass	30/01/1978
Driving experience	45 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96748420
Alt. Phone Number	-
Email Address	SLTANJANETTAN@GMAIL.COM
Address	BLK 42 JALAN BAHAGIA #01-120
Address complement	-
Postcode	320042
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	2
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
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

I WAS DRIVING ALONG CTE ANG MO KIO AVE 1 TOWARDS ANG MO KIO AVE 3 ON LANE 1. DUE TO IN FRONT VEHICLE SLOW DOWN AND STOPPED, I ALSO STOPPED BUT BEHIND VEHICLE SUDDENLY HIT OTNO MY REAR BECAUSE SHE COULDN'T BRAKE IN TIME.

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	SJM338P
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	VEHICLE B
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	TAY KUAN HOE
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SMW2134J
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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.

[Handwritten Signature]

Policyholder's Signature / Date & Time

[Handwritten Signature]

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

Witnessed by Reporting Centre Personnel

Sketch Plan

[Handwritten Signature]

Describe Circumstances of the Accident

I WAS DRIVING (TE ANG MO KIO AVE) 1
 TOWARDS ANG MO KIO AVE 3 ON LANE 1.
 DUE TO IN FRONT VEHICLE SLOW DOWN &
 STOPPED. I ALSO STOPPED BUT BEHIND
 VEHICLE SUDDENLY HIT TO MY REAR BECAUSE
 SHE COULDN'T BRAKE IN TIME.

Declaration

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

X Jah
 Policyholder's Signature / Date &
 Time

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

Witnessed by Reporting Centre
 Personnel















TOYOTA MOTOR CORPORATION JAPAN
MODEL DBA-NSP170G-MWXQB
ENGINE 2NR-EKE 1496 mL
FRAME No. NSP170-7230885
COLOR TRIM PLANT OPTION
1E7 FA20 N21
TRAILER K312 -01A 680



GREAT AMERICAN INSURANCE COMPANY

UEN: T15FC0029B GST REG. NO.: M90370081T
 3 TEMASEK AVENUE, #16-01 CENTENNIAL TOWER
 SINGAPORE 039190
 TEL: +65 6804 6000
 FAX: +65 6235 2616

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) Road Transport (Amendment) Act, 2019 (Malaysia)

Policy Details

Certificate Number : MOMVP000005059-00-000	Cover : Private Car (Comprehensive)
Registration Number : SMW2134J	Chassis Number : NSP1707230885
NCD Entitlement : 50% No Claim Discount	Engine Number : 2NR1165545
Policyholder Name : Tay Kuan Hoe	
Hire Purchase : Maybank Singapore Limited	
Period of Insurance : From 09/11/2022 (00:00) To 08/11/2023 (23:59) (Both Dates Inclusive)	

Persons or Classes of Persons entitled to Drive

- a) The Policyholder
- b) 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 or so has been Vehicle 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

Limitations as to Use

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

This Policy does not cover:

- a) Use for Hire and Reward
- b) Use for racing, pace making, reliability trial or speed testing
- c) Use for carriage of goods (other than samples) in connection with any trade of business
- d) Use for any purpose in connection with 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

Excess (Section 1) : SGD 600.00	Workshop : Any Workshop
Excess (Section 2) : N/A	Off Peak Car : No
Windscreen Excess : SGD 100.00	NCD Protection : Yes
Additional Excess : Please refer overleaf	

Driver Details

Main Driver : Tay Kuan Hoe	
Named Driver 1 : Tay Kai Xuan	
Named Driver 2 : N/A	
Named Driver 3 : N/A	
Name of Intermediary : NLE Insurance Agencies Pte Ltd	
Date of Issue : 06/10/2022	

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Signed for and on behalf of

Great American Insurance Company

Authorised Signatory

jchen