# SINGAPORE ACCIDENT STATEMENT

# **Accident Details**

Who reported the accident? Owner Driver / Both				
Date of Accident:	01/06/2023			
Time of Accident:	1-22	(AM / PM)		
Location of Accident:	Carpark of BIK505 Ar	in Molcio Ave 8		
Country/State of Loss:	SG			
Type of Accident:	Head to Side			
Weather Condition: Clea	Raining	Road Surface: Dry / Wet		
If Not in List, please specify				
Are you claiming under your volicy for repair to your v		Yes No		
If No, please state action	to be taken	Third Party / Reporting Only		
Was any foreign vehicle i	nvolved in accident?	Yes (No)		
If yes, please state Vehicle	e No & Vehicle Type:			
No. of vehicles Involved in	n the accident (include o	wn vehicle) 02		
Has the driver been appro accident claims assistance		son(s) soliciting/offering Yes No		
Was the accident reporte	d to the police?	Yes No		
f yes, police station name	e:			
Was notice of Prosecution	n given?	Yes / No		
f yes, against whom?	Safe-Arrange Control of the Control	1		
Files				
Are accident photos avail	able for attachment?	Yes No		
Was there any video captured?		Yes / No		
Was there any audio capt	rured?	Yes No		

Details of Own Vehicle				
Vehicle Registration No:	SN2 60 08 K			
Vehicle Category:	CAR			
Vehicle Manufacturer: _	SOIT Vehicle Model: TOYOTA CHR			
Transmission:	Manual / Auto Cc: 1800			
Exact purpose for which ve	chicle was being used at the time of accident:			
Private Car Srivate Use Y Employment				
No. of passengers (including	ig driver) 02			
Passenger Name:	Grab Passenger			
Gender:	fale / Female			
Passenger Name:				
Gender:	1ale / Female			
Own Vehicle Policy				
Handling Insurer:	TUC			
Coverage Type: ACT / Cor	mprehensive / Third Party / Third Party, Fire & Theft			
Fleet Policy: Ye	es / No			
Registered Owner Name:	Mg Wee Bong, Steven			
ID Type: U	EN/NRIC/Passport or FIN / Work Permit			
Registered Owner ID:	570295047			
Email:	Steven-ng@ hotmail - com			
Mobile No:	9839 4571			
Alt. No Type:	Home / Office / Not in List			
If Not in List, please specify				
Owner Alt Phone No:				

<b>Driver's Information</b>	
Is the driver the policy hold	lere Yes No
Name of Driver:	NG WEE BENG STEVEN
Gender:	Male Female
ID Type:	NRIC / Passport or FIN / Work Permit
Driver's ID:	870295047
Date of Birth:	15.08.1970
Driving Pass Date:	09.01.1990
Mobile No:	91274132
Email:	steven-ng@hotmail.com
Address 1:	BLK 524 BEDOK NORTH STREET 3
Address 2:	#03-384 (S) Postal Code: 460524
Occupation:	Indoor Outdoor
Driver Owner Relationship	OWAER
Does Driver own other vehi	cles? Yes/No
If yes, please provide Vehicl	e Registration No:
Handling Insurer:	
TP Vehicle or Property	
Was there any other vehicle	e or property damaged? Yes No
If yes, please provide:	
(ii) Vehicle Category:	(including driver)
Passenger Name:	

Gender:

Male / Female

<u>Translation</u>				
Was the Sketch Plan Statement translated from another language?				
Yes / No				
Name of Translator:				
ID Type: NRIC / Passport or FIN / Work Permit				
Phone No:				
Email:				
What is the original language used in the statement?				
English / Mandarin / Malay / Tamil / Others:				
Please attach the following documents:				
- Original report in original language - Translated report to English				
Injured Person's Details				
Was anyone injured in the accident? Yes No				
Any injured conveyed to hospital by Ambulance? Yes No				
If yes, please provide:				
(i) Name:				
(ii) Gender: Male / Female				
(iii) Injured Person in which Vehicle?				
(iv) Full Address:				
Witness Details				
Was there any witnesses? Yes / No				
If yes, please provide:				
Witness Name:				
Witness Contact:				

Describe Circumstance of the Accident
On the abase mortance date, time and location. I was travelling in
my varide CA) with on passengen on board. Upon enearly the carparx,
I was travelling Straight. Vehicle(B) was coming out from a
parking 1st did not check if there was any on coming which and
more out about abruptly hence collided onto the right portion of my
vehicle (A) causing damages to my vehicle (A).
vehiole CA) SNI 6098 K
vopide CB) SLT 887134

Declaration

I/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 (Name as in NRIC/ID card)

#### SKETCH PLAN

#### **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 Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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, acknow ledge, 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time Sketch Plan	Driver's Signature (If driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel
	Carpark of RIK 505 Ang Mo Klo	AVE 8
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### 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)

ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5134311073 Cover : drivo CLASSIC

Index mark and Registration Number of Vehicle : SNJ6098K
 Chassis Number : ZYX102040918

2. Name of Policyholder : NG WEE BENG STEVEN

3. Effective Date of Insurance : 03 Mar 20234. Expiry Date of Insurance : 02 Mar 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/her 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#
  - (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

#### This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) Use for any purpose in connection with the Motor Trade.
  - # Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

**EXCESS (SECTION 1)** : S\$2,000 **EXCESS (SECTION 2)** : S\$1,500 WINDSCREEN EXCESS : S\$100 : N/A ADDITIONAL EXCESS REPAIR AT OWNER'S PREFERRED WORKSHOP : NO INSURE WITH COF : YES **NCD PROTECTION** : NO ROADSIDE ASSISTANCE AND WELLNESS COVER : YES TRANSPORT ALLOWANCE : NO **EXCESS WAIVER** : NO

PRIMARY DRIVER : NG WEE BENG STEVEN

NAMED DRIVER (1) : N/A
NAMED DRIVER (2) : N/A

HIRE PURCHASE COMPANY : HONG LEONG FINANCE LIMITED

SUM INSURED : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

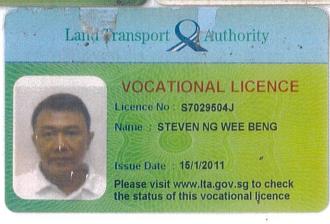
Agency : ASSURE PTE. LTD. (00000572842)

Date of Issue : 03 Mar 2023 10:41 hrs

#### For INCOME INSURANCE LIMITED

Chief Executive









### > Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC

Owner ID: 504J

Vehicle Details

Vehicle No.:SNJ6098KVehicle to be Exported:Yes

Intended Deregistration Date: 05 Jun 2023

Vehicle Make: TOYOTA

Vehicle Model: C-HR 1.8 HYBRID G AUTO 5DR

Primary Colour: White

Manufacturing Year: 2017

 Engine No.:
 2ZR8110564

 Chassis No.:
 ZYX102040918

 Maximum Power Output:
 90.0 kW (120 bhp)

Open Market Value: \$33,970.00
Original Registration Date: 21 Jun 2017

First Registration Date: 21 Jun 2017
Transfer Count: 1

Actual ARF Paid: \$9,558.00 Intended PARF Rebate Details

PARF Eligibility: Yes

PARF Eligibility Expiry Date: 20 Jun 2027

PARF Rebate Amount: \$6,690.00
Intended COE Rebate Details

COE Expiry Date: 20 Jun 2027

COE Category: E - Open - all except motorcycle

COE Period(Years): 10

 QP Paid:
 \$52,000.00

 COE Rebate Amount:
 \$21,016.00

 Total Rebate Amount:
 \$27,706.00

The information contained herein is correct as at 05 Jun 2023