

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	09/06/2023 16:48 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	08/06/2023 13:20 (SGT)
Exact Location of Accident	54 Commonwealth Dr, Block 54, Singapore 142054
Additional Location Information	MULTIY STOREY CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	EZ866Y
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	NG CHOR BENG
NRIC No	SXXXX196B
Email Address	stevenng39@gmail.com
Mobile Phone No	(Phone) +65-96395627
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Camry
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 - Reporting only
Vehicle Category	Private car
Transmission	Auto
CC	1998

INSURANCE COMPANY

Name of Insurance Company	Sompo Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	D22MTPV01008642

DRIVER

Name of Driver	NG CHOR BENG
NRIC No	SXXXX196B
Date Of Birth	14/02/1950
Occupation	Indoor

Date Of Driving Pass	21/08/1973
Driving experience	49 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96395627
Alt. Phone Number	-
Email Address	stevenng39@gmail.com
Address	BLK 53 COMMONWEALTH DRIVE #25-552
Address complement	-
Postcode	142053
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	Collided into Parked Vehicle
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)	6
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	WIFE
Gender	Female

PASSENGER 2

Name	SON IN LAW
Gender	Male

PASSENGER 3

Name	DAUGHTER
Gender	Male

PASSENGER 4

Name	KID(GRAND DAUGHTER)
Gender	Female

PASSENGER 5

Name	KID(GRAND DAUGHTER)
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?	-

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 FBS7913X
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Motorcycle
Name of Driver ISHAM
Contact Number (Phone) +65-97348414
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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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.

*Apohly. 09/June/2023
15:10 HR*

Policyholder's Signature / Date & Time

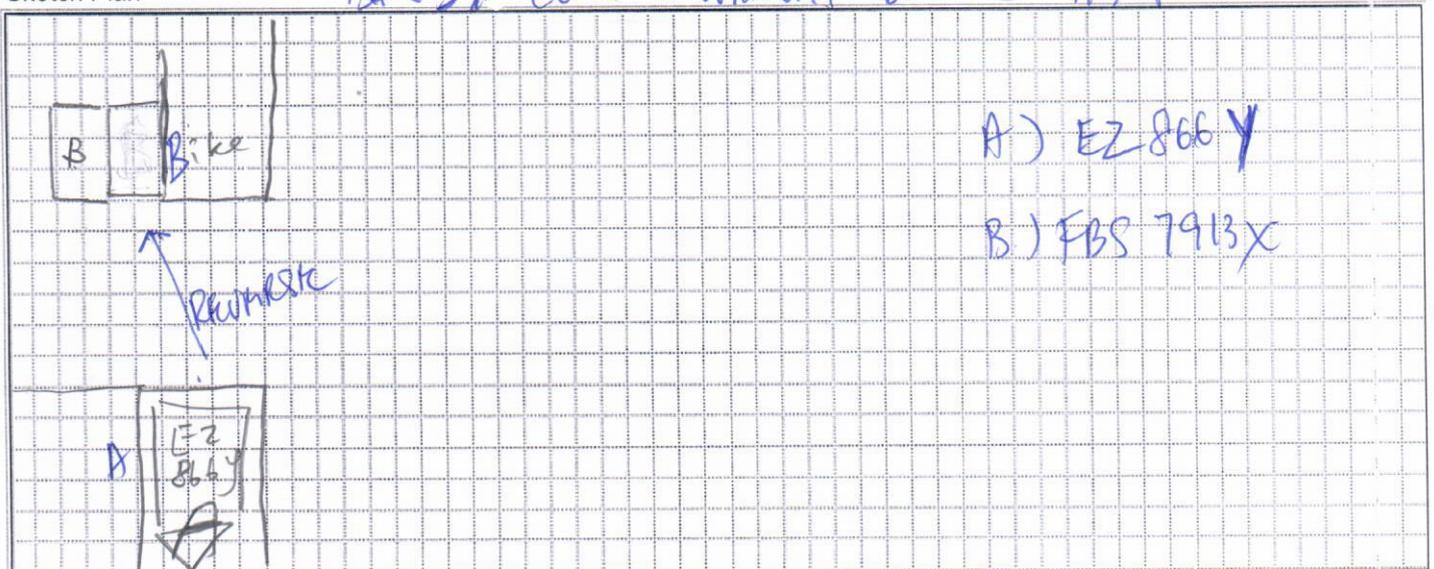
Actual Driver's Signature (if driver is not the policyholder) / Date & Time

09/06/2023

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Sketch Plan

RJK 56 Commonwealth Drive MSCP.



Describe Circumstance of the Accident

On 8/6/2023 around 120pm, I was reversing my car. Accidentally, my car pushed down FBS 7913X to the left side of the bike. I got down from my car to see the damages. I saw the headlamp glass was broken & left rear fender have scratches. The rest of the motorcycle was alright. I left my contact number on the motorcycle for him to contact us. We also lifted the motorcycle back to its standing position. The owner of FBS 7913X called me today around 12pm and told me the repairs cost about \$2000. He said he will arranged towing of his motorcycle to vespa authorised workshop. ~~Monitoring~~ sporting motors (refer by Nutt motorcycle) I am
We are not claiming any insurance for my own car E2866Y.

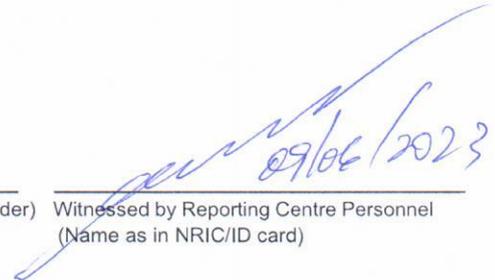
Declaration

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

 21/06/2023
16:55

Policyholder's Signature / Date & Time

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

 09/06/2023

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

IDAC ACCIDENT STATEMENT

DATE OF ACCIDENT : 8/6/2023	TIME OF ACCIDENT :
VEHICLE NO : E28664	TRANSMISSION : <u>AUTO</u> / MANUAL
MAKE & MODEL : TOYOTA CAMRY 2.0	LOCATION : BIK 53 COMMONWEALTH DRIVE LEVEL 3 CARPARK
EXACT PURPOSE USE DURING ACCIDENT : EMPLOYMENT / <u>PRIVATE USE</u> / PRIVATE HIRE	CLAIM TYPE : OD / THIRD PARTY / <u>REPORTING ONLY</u>
INSURANCE COMPANY : SOMPO.	POLICY NO : D22MTP V01008642.
TYPE OF COVERAGE : <u>COMPREHENSIVE</u> / THIRD PARTY / THIRD PARTY & THEFT	VEHICLE TYPE : <u>(SALOON)</u> COUPE/MPV/VAN/LORRY/MOTORCYCLE)
NAME OF OWNER : NG CHOR BENG.	NRIC : S1495196B
ADDRESS : BIK 53 COMMONWEALTH DRIVE # 25-552 S142053.	CONTACT NO :
EMAIL ADDRESS :	VIDEO RECORDING : YES / NO
NAME OF DRIVER : <u>AS ABOVE</u> IF NO :	NRIC : <u>S1495196B</u> CONTACT NO : <u>96395627</u> .
DRIVER OWNER RELATIONSHIP : <u>OWNER</u>	PASSENGER : MALE (<input checked="" type="checkbox"/>) FEMALE (<input type="checkbox"/>)
DATE OF BIRTH : 14/02/1950.	DRIVING PASSING DATE : 21/8/1973.
OCCUPATION : <u>INDOOR</u> / OUTDOOR	ADDRESS :
ANY INJURIES : <u>NO</u> , IF YES :	POLICE REPORT : <u>NO</u> / IF YES WHERE ?
WEATHER CONDITION : <u>CLEAR</u> / RAINING / OTHERS	ROAD SURFACE : <u>DRY</u> / WET / OTHERS
VEHICLE B REG NO : _____	VEHICLE C REG NO : _____
DRIVER NAME : <u>NG CHOR</u>	DRIVER NAME : _____
NRIC : <u>S1495196B</u>	NRIC : _____
CONTACT : _____	CONTACT : _____
VEHICLE D REG NO : <u>BFB8 7915X</u>	ANY WITNESS ? NO, IF YES :
DRIVER NAME : <u>ISHAM</u>	NAME : _____
NRIC : <u>9</u>	CONTACT : _____
CONTACT : <u>97388414</u>	
WAS NOTICE OF PROSECUTION GIVEN? (YES / NO) IF YES, AGAINST WHOM : _____	WERE SEAT BELTS WORN ? : YES / NO WERE INJURY CONVEYED BY AMBULANCE : YES / NO

Certificate of Insurance

ROAD TRAFFIC ACT (CHAPTER 276) (REPUBLIC OF SINGAPORE)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
ROAD TRANSPORT ACT 1987 (MALAYSIA)
ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (MALAYSIA)

Certificate/Policy No. : D22MTPV01008642
Insured : NG CHOR BENG
Motor Vehicle (Registration No.) : EZ866Y
Coverage : Comprehensive - ExcelDrive PRESTIGE
Policy Commencement Date : 24 JUNE 2022 00:00
Policy Expiry Date : 23 JUNE 2023 23:59
Maximum Liability (Section I) : Market value at time of loss
Excess* : \$600 - Section I
Voluntary Excess* : N.A.
Windscreen Excess* : S\$100.00 for each and every applicable claim.
* Subject to GST wherever applicable

Persons or Classes of Persons entitled to drive*

1. The Insured.
2. Any other person who is driving on the Insured's order or with his permission.
3. In the event of the death of the Insured.
 - a. any member of the Insured's family, or a paid driver who has been driving the Motor Vehicle during the life of the Insured and permission to drive had not been withdrawn prior to the death of the Insured; and
 - b. any other person who has been given permission to drive the Motor Vehicle prior to the death and such permission had not been withdrawn by the Insured.

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. And provided further that the Motor Vehicle is registered under the Road Traffic Act (Chapter 276) and its registration under the Road Traffic Act (Chapter 276) has not been cancelled at the time of the accident, loss or damage.

Limitations As To Use

Use only for social, domestic and pleasure purpose and for the Insured's business. The Policy does not cover use for hire or reward, racing, pace-making, speed testing, reliability trial, the carriage of goods other than samples in connection with any trade or business or use for any purposes in connection with the Motor Trade.

ExcelDrive Workshops and Accident Reporting

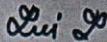
It is a condition precedent to liability that the Insured shall call at the Company's Accident Reporting Center with the Motor Vehicle within 24 hours of the accident or by the next working day thereof.

All accident repairs to the Motor Vehicle must be carried out at ExcelDrive Workshops, otherwise the claim is not payable under the Policy. For ExcelDrive Prestige Plan, accident repairs to the Motor Vehicle can be carried out at any workshop other than ExcelDrive Workshops.

For the list of Accident Reporting Centres and ExcelDrive Workshops, please visit our website at www.sompo.com.sg or call our Emergency Hotline: (65) 6226 3323.

I/We HEREBY CERTIFY that the policy to which this Certificate relates is issued in accordance with (1) the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia); and (2) the Policy terms, conditions and exceptions of the Private Car Policy ref MTP-30

Sompo Insurance Singapore Pte. Ltd.



Authorised Signatory

Date/Time of issue : 20 MAY 2022 18:23

IMPORTANT NOTICE

- o Keep the Certificate in your Motor Vehicle;
- o Under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189), it shall be unlawful for any person to use or cause to permit any other person to use a Motor Vehicle without a valid policy of insurance under the Act;
- o On the sale of the Motor Vehicle or if for any reason the Insurance is terminated during its currency, the Insured must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a statutory declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189);
- o This Policy will cease to be valid once the Motor Vehicle has been sold to another person. The Policy is not transferable to the new owner of the Motor Vehicle.

Intermediary Code & Name : 11S04406 & SIME DARBY INSURANCE BROKERS (S) PTE LTD CI Code: 22A D4DSBJ4IRM1YWKAO