

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	04/07/2023 17:05 (SGT)
Reported by	Actual Driver
Date of Accident	03/07/2023 19:30 (SGT)
Exact Location of Accident	Geylang, Singapore
Additional Location Information	GEYLANG ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNH588M
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	VIVIX ENTERPRISE
Company Reg No	53391257A
Email Address	vivixenterprise@gmail.com
Mobile Phone No	(Phone) +65-88777687
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	E200
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?	Yes
Vehicle Category	Private hire
Transmission	Auto
CC	1991

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMHCSNW00015062200

DRIVER

Name of Driver	TAN WEE SAN
NRIC No	S7332644C
Date Of Birth	04/09/1973
Occupation	Outdoor

Date Of Driving Pass	03/12/2014
Driving experience	8 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-80621955
Alt. Phone Number	-
Email Address	vivixenterprise@gmail.com
Address	BLK 51 MARINE TERRACE #09-155
Address complement	-
Postcode	440051
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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)	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

REFER TO SKETCH PLAN
Side swipe also occurred after rear-end collision

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	SMQ9205Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	NA / Unknown
Name of Driver	-

Contact Number	(Phone) +65-90072819
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.
- (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.


VIVIX Enterprise
 UEN 53391257A

Policyholder's Signature / Date & Time



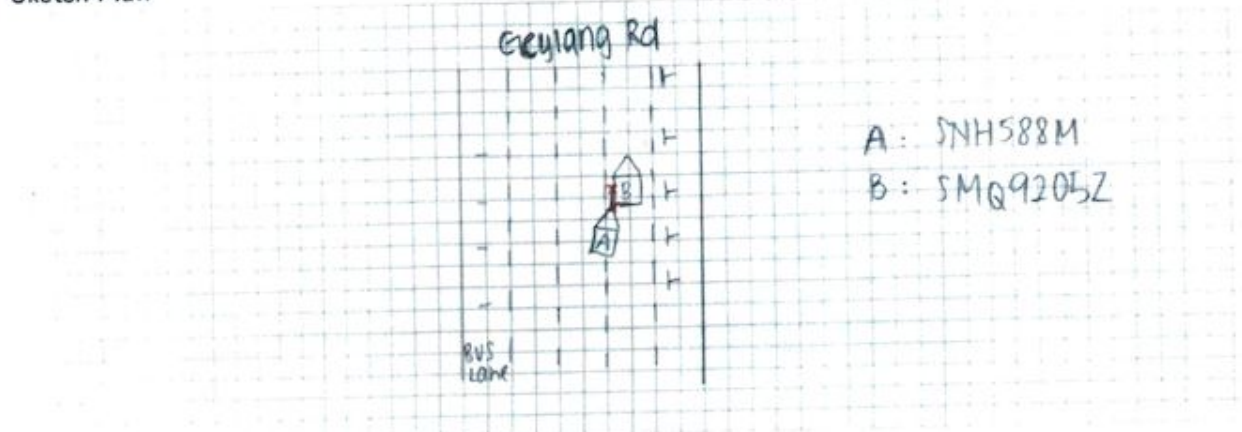
Driver's Signature (If driver is not the policyholder) / Date & Time





Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

On the stated date & time, I was travelling on ^{on} Geylang RD (near to Lorong 40). I was ended by side swipe on the left of bearing number plate 'SMQ9205 Z'.

Declaration

We declare the foregoing particulars are true in every respect.

 **VIVIX Enterprise**
UEN 53391257A

Policyholder's Signature / Date & Time



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




Witnessed by Reporting Centre Personnel



中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Hire Car

MZ406

E SN

AN0723A

Cov. Type: C

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)

CERTIFICATE No.	DMHCSNW00015062200	Engine No.: 26492030451791 Cha. No.: W1K2130802B003115
1. Index Mark and Registration Number of Vehicle	SNH588M	AUTOSAFE *****
2. Name of Policy Holder	VIVIX ENTERPRISE	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	29/08/2022 (00:00:00)	Excess Sect. I. S\$2,000.00 Excess Sect. I (Outside Singapore) S\$4,000.00 Excess Sect. II S\$2,000.00 Excess Sect. II (Outside Singapore) S\$4,000.00 EX ON WINDSCREEN S\$100.00
4. Date of Expiry of Insurance	28/08/2023	
<p>5. Persons or Classes of Persons entitled to drive*</p> <p>Any person who is driving on the Policyholder's order or with the Policyholder's 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.</p>		
<p>6. Limitations as to use:</p> <p>(1) Use for the carriage of passengers or goods in connection with the Policyholder's business. (2) Use for social domestic pleasure purposes and business purposes of any person to whom the vehicle is hired.</p> <p>The Policy does not cover</p> <p>(1) Use for racing, pace-making, reliability trial or speed-testing. (2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. (3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.</p>		
<p>HIRE PURCHASE CO.: SSL HOLDINGS PTE. LTD.</p> <p>* 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.</p>		

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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: Chua Suat Lay Sally
Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)
3 Anson Road #16-00 Springleaf Tower Singapore 079909

6389 6111

6222 1033

www.sg.cntaiping.com

