

## 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 First Submission .....	22/06/2024 10:53 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	21/06/2024 09:50 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	STEVENS ROAD TOWARDS DRAYCOTT DR
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SLQ8040A
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#### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	SPECON CONTRACTOR PTE LTD
Company Reg No .....	201718964H
Email Address .....	XUYONGJIAN199779@ICLOUD.COM
Mobile Phone No .....	(Phone) +65-93623891
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	Wish
Variant .....	-
Exact purpose for which vehicle was being used at time of accident .....	Employment
Are you claiming under your own insurance policy for repair to your vehicle? .....	Yes
Vehicle Category .....	Private car
Transmission .....	Auto
CC .....	1798

#### INSURANCE COMPANY

Name of Insurance Company .....	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number .....	DMPCSNW00010102400

#### DRIVER

Name of Driver .....	XU YONG JIAN
Work Permit No .....	G3298683N
Date Of Birth .....	08/09/1997
Occupation .....	Outdoor

Driving Pass Date .....	23/07/2021
Driving experience .....	2 YEARS AND 11 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-87994555
Alt. Phone Number .....	-
Email Address .....	XUYONGJIAN199779@ICLOUD.COM
Address .....	234 ANG MO KIO AVE 3 #02-1136
Address complement .....	-
Postcode .....	560234
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 .....	AFTER RAIN
Road Surface .....	Wet

#### 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? .....	Yes
Police Station Name .....	Traffic Police
Police Station Phone No .....	(Phone) +65-65470000
Alt. Police Station Phone No .....	(Fax) +65-65474900
Police Station Address .....	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO POLICE REPORT

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SLL1096L
Vehicle Manufacturer .....	Toyota
Vehicle Model .....	Wish
Vehicle Variant .....	-

Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	GABRIEL LEE HOCK HENG
Contact Number .....	(Phone) +65-81123035
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

**SKETCH PLAN****IMPORTANT NOTICE**

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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, 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")

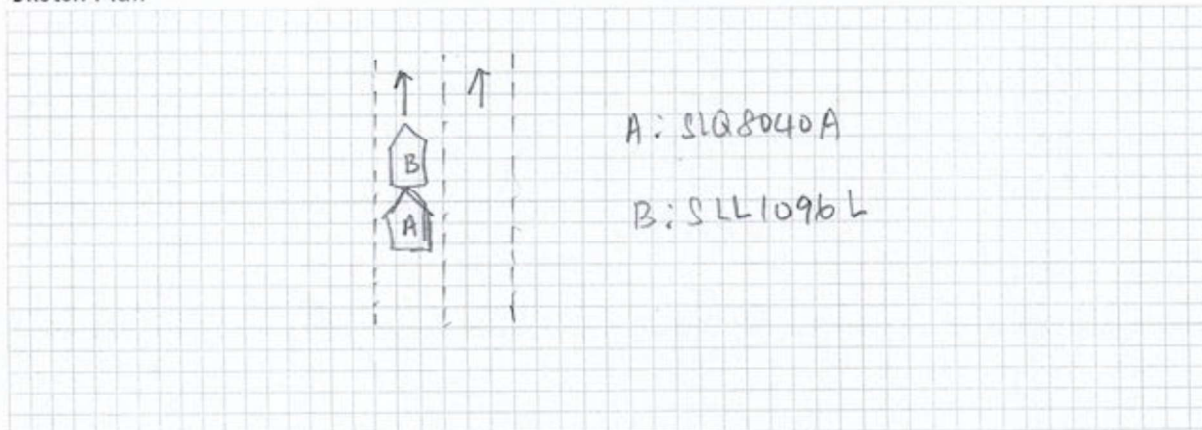
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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

  
Witnessed by Reporting Centre Personnel

**Sketch Plan**




**Describe Circumstances of the Accident**

ON 21/06/2024 @ 0950 HRS I WAS DRIVING ALONG STEVEN'S ROAD TOWARDS  
 DRAYCOTT DR. UPON REACHING THE TRAFFIC LIGHT JUNCTION, I  
 ACCIDENTALLY STEP ON TO BRAKES AND ACCELERATOR AND MY VEH  
 COLLIDED ONTO VEH B (SL61096L).  
 NOBODY WAS INJURED.

**Declaration**

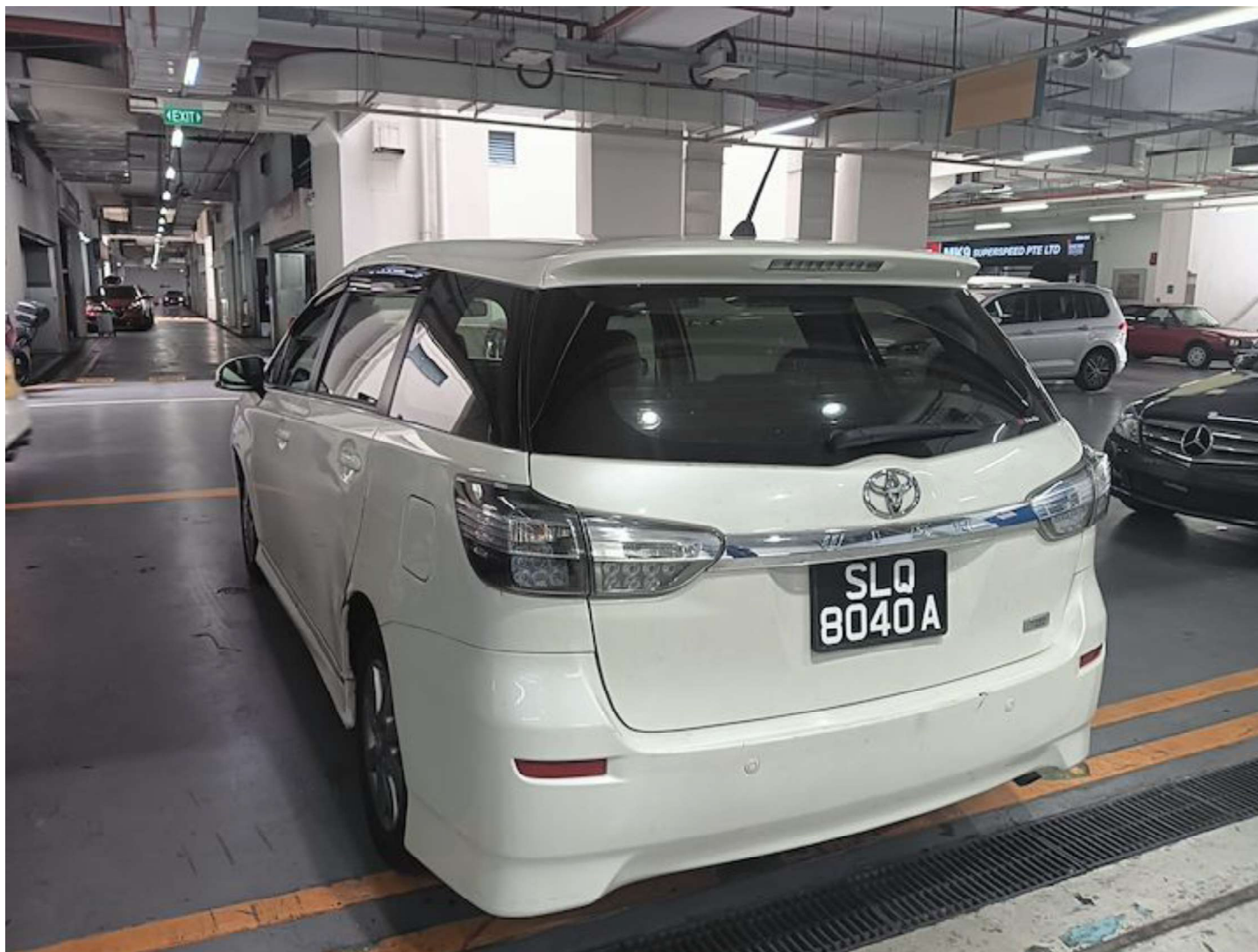
We declare the foregoing particulars are true in every respect.

X  
  
 Policyholder's Signature / Date &  
 Time 09/07

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

  
 Witnessed by Reporting Centre  
 Personnel

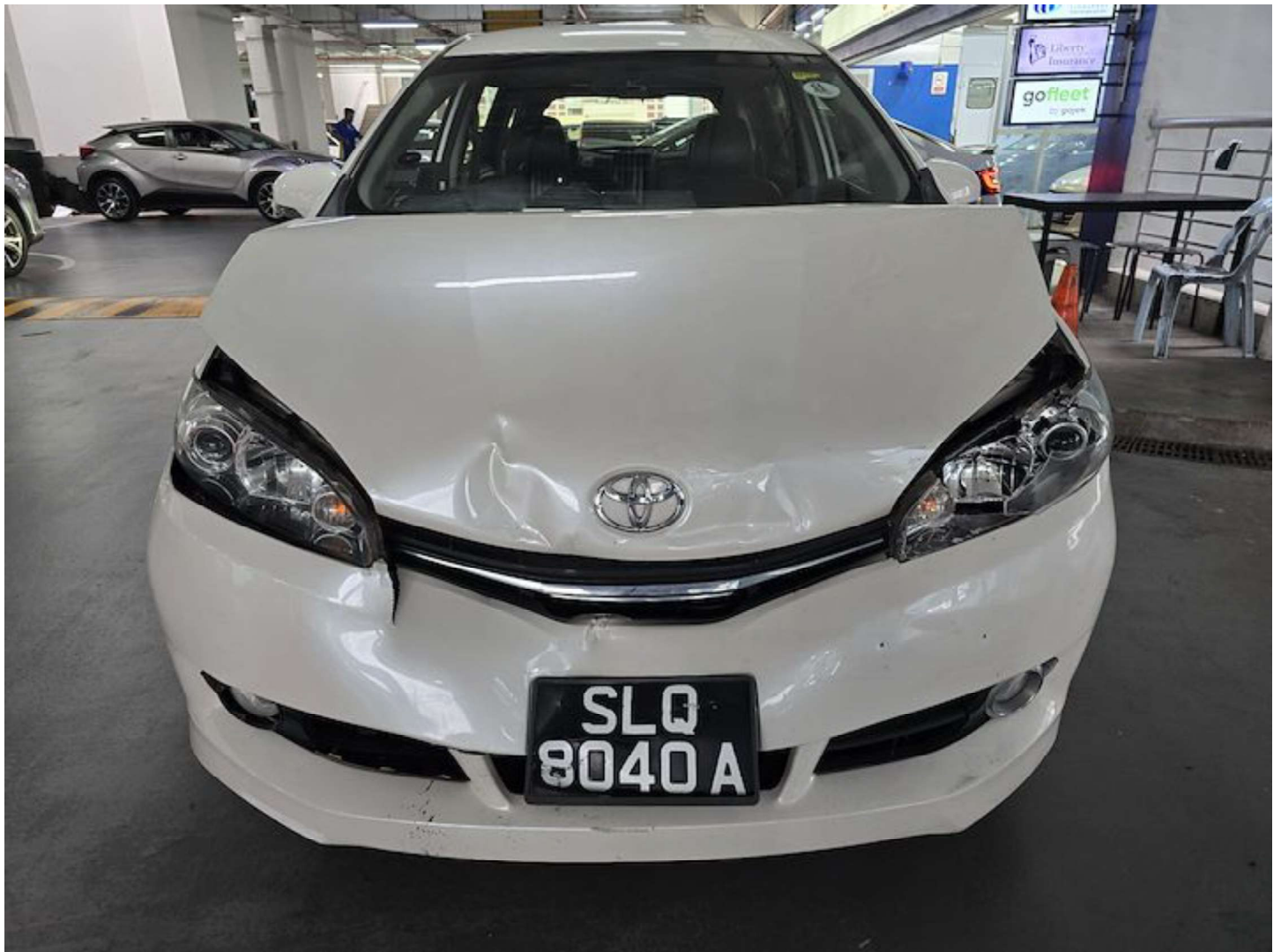




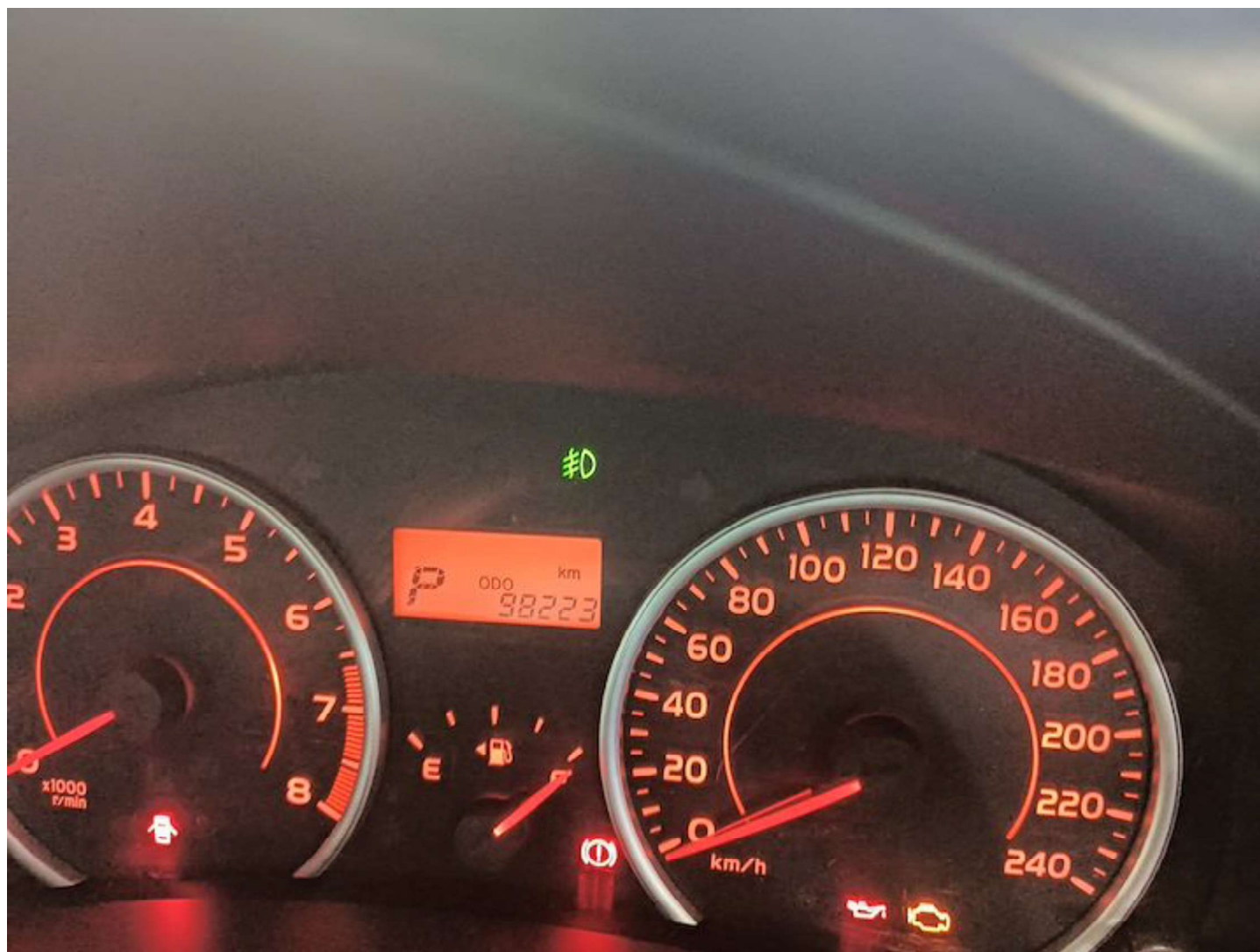






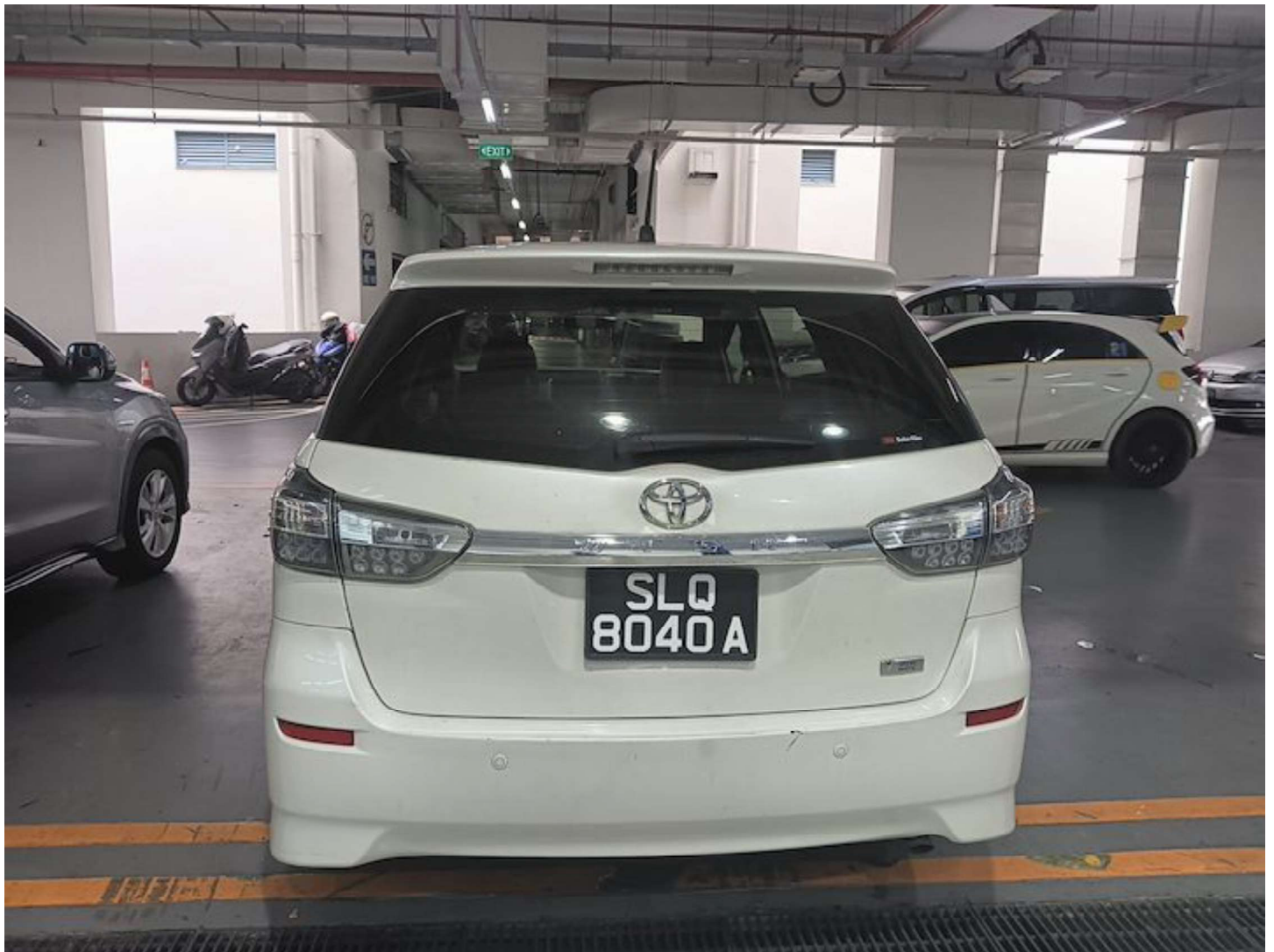








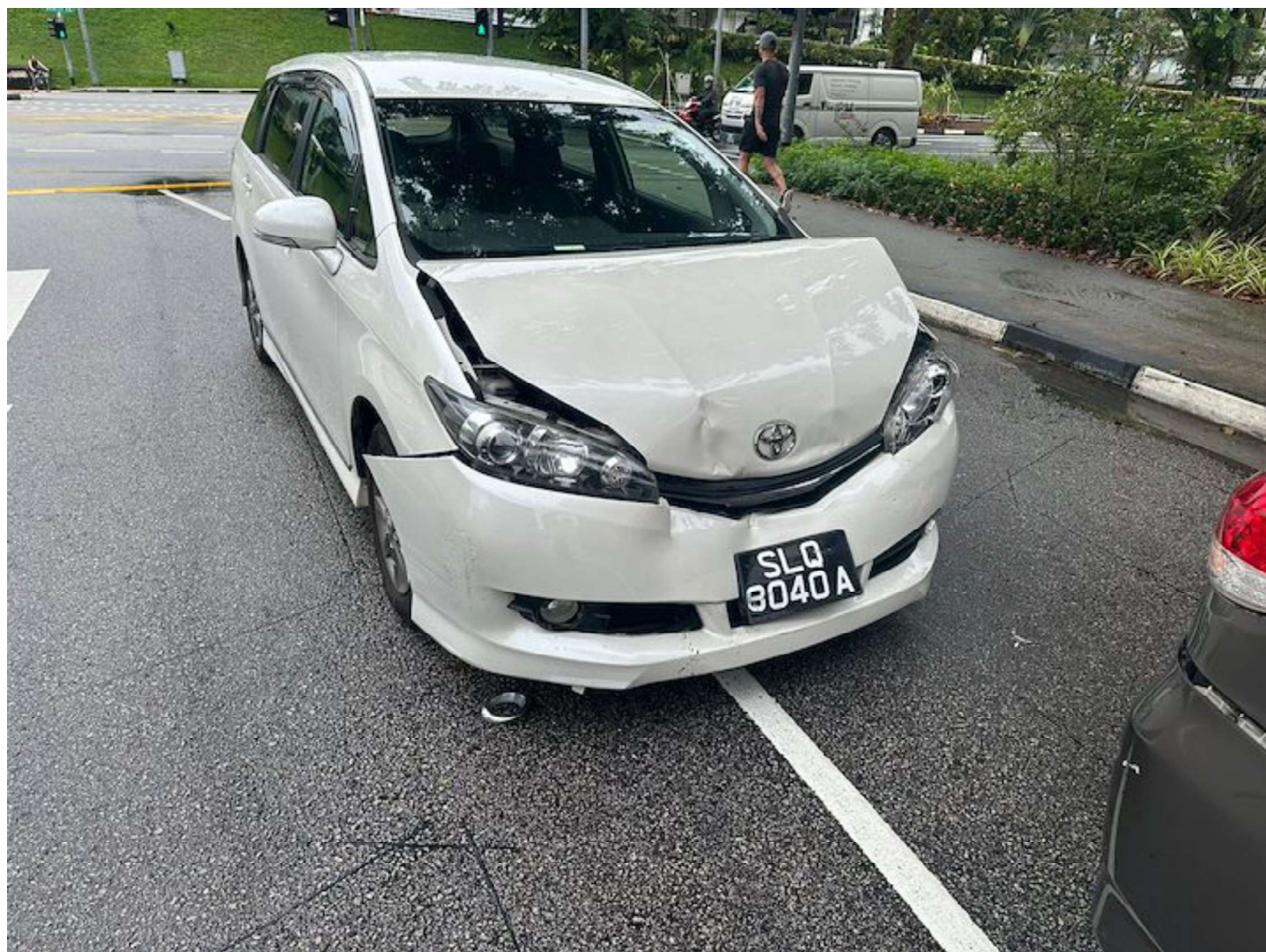






















**SINGAPORE  
POLICE FORCE**



T/20240621/7063

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 3

Report No. T/20240621/7063

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/06/2024 15:33		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: XU YONGJIAN			Address: 234 ANG MO KIO AVENUE 3 #02-1136 SINGAPORE 560234		
ID Type / ID No.: FIN NO / G3298683N			Contact No.: Home/Office: Mobile: 87994555		
Nationality: CHINESE			Email: XUYONGJIAN199779@ICLOUD.COM		
Sex: Male	Age: 26	Date of Birth: 08/09/1997	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: Building construction engineer			Driving Licence Information: Class: Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 21/06/2024 09:50	Type of Location: T-Junction
Location:  STEVENS ROAD				
Weather: Cloudy		Road Surface: Wet		
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLQ8040A	Motor car					0

<b>Details of Person Involved</b>	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





**SINGAPORE  
POLICE FORCE**



T/20240621/7063

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

2 of 3

Report No. T/20240621/7063

CONTINUATION OF REPORT

Driver			
Name	XU YONGJIAN		ID No. G3298683N
Related Vehicle	SLQ8040A (Motor car)		Contact No. 87994555
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave (MC)	NIL		Degree of Injury NIL

**Brief Details.**

On 21/06/2024 @ 09:50, I was driving along steven road towards draycott drive, upon reaching the traffic linght junction, i accidentally step on braices and accelerator and my vehichle collided onto vechicle B ( SLL1096L). Nobody was injured.





**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000



T/20240621/7063

3 of 3

Report No. T/20240621/7063

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / AEIT /  
LEE GUANG HUI  
Contact No.: 65476414

NP168

Signature Of Informant:  
The identity of the person making this report has been  
authenticated by Singpass. No signature is required.

Date/Time:  
21/06/2024 15:33

Classification Of Case:

LETTER OF ACKNOWLEDGEMENTDate: 21/6/2024

ACCIDENT INVOLVING SLQ 8040A & SLL 1096L ON 21/06/2024  
 ALONG STEVENS ROAD TOWARDS DRAYCOTT DR

To Whom It May Concern:

I, SPECON CONTRACTOR P/L (NRIC: 201718964H) am the policy holder of SLQ 8040A.

I acknowledged that I am aware of the accident stated above, due to unforeseen circumstances; I am unable to be presence for the accident report personally.

Hence, I would like to authorise the driver of the vehicle during the said accident to lodge the accident report.

For any enquires regarding this matter, you may contact me at:

Contact Number: X 8100 2311

Email Address: X Vincent.P@Specon.com.Sg

Thank You & Warmest Regards,

  
 Policy Holder's Signature CHOP



# LEASING AGREEMENT

Serial No: 230822

Date: 1/1/2023

## Company Information

Name: Sunray Woodcraft Construction Pte Ltd

Address: 9 Sungai Kadut Street 3, Singapore 729143

NRIC/ROC: 190703016K

## Contact Person (in-charge):

Mobile No:

## Driver Information

Name: Xu Yong Jian

NRIC / Passport/ Permit No G3298683N

Date of Birth: 8/9/1997

Mobile No:

Address:

Driving Licence No: G3298683N

Class: 3C

Pass Date: 23/7/2021

## Vehicle Information

Registration No: SLQ8040A

Make/Model: TOYOTA WISH 1.8 CVT

Registration Date: 24/07/2017

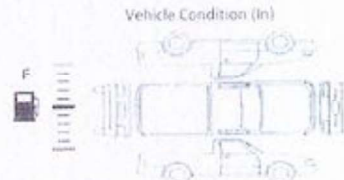
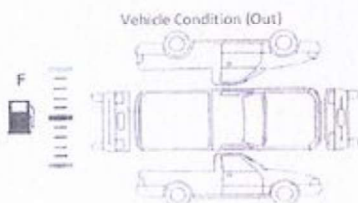
Road Tax Expiry: 23 Jan 2025

Mileage Out:

km

Mileage In:

km



\*Charges of fuel shortage: \$20/quarter tank

## Leasing Information

Period of Rent / Lease: 1/1/2023 - 1/1/2025

Rental / Lease Rate: \$4,000 (inclusive of gst)

Vehicle Leased Out On - Date/Time:

Vehicle Returned On - Date/Time:

Deposit: -

Others (if any):

Amount Received including Deposit:

Remarks (if any):

Insurance Coverage (Section I & II - Within Singapore)

Own Damage Excess \$2,000.00

(Section I) 3rd Party Damage Excess \$3,000.00

(Section II)

Authorized Drivers Only Employees of Hirer (Please provide us with copies of all Drivers' licences & NRIC)

**Commercial Vehicle** - An additional Excess \$1000 apply if it is driven by hirer/driver who has less than 2 year driving license or who is less than 22 years old or who is a foreigner (non Singaporean or Non Singapore PR).

**Private Vehicle** - The Policy does not cover hirer/driver who is below 23 years old, or more than 65 years old or with less than 2 years driving experience

## Important Note:

1. Above is subject to approval, stock availability, taxes and government legislation.
2. Deposit refund - approximately two weeks upon return of above vehicle subject to no outstanding traffic fines / summons / accident claims etc.
3. Only drivers registered and accepted by **SPECON CONTRACTOR PTE LTD** are authorized to drive the vehicle. Should the vehicle be damaged or stolen while being driven by unauthorized drivers who are NOT REGISTERED with us, the Hirer will be liable for the full cost of repair or the full value of the vehicle and any other associated losses suffered by the Owner.
4. The Hirer shall not permit the vehicle to be used for purposes which conflict with the Law in connection with theft, drug peddling or trafficking, smuggling or any other criminal action. Should the vehicle be confiscated by the Government under such circumstances, the Hirer shall indemnify the Owner the FULL value of the vehicle plus all other associated costs and expenses incurred.
5. In the event of early termination by Hirer, **SPECON CONTRACTOR PTE LTD** has FULL rights to charge an early termination penalty. This penalty will be calculated based on the monthly rent/lease rate multiple by the remaining months left to the end of contract (as stated above).

The Hirer agrees and accepts the above and all our Terms and Conditions stipulated overleaf.

Approved by

Name / NRIC No:

Name:



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

Motor Private Car

MX4WF

## 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)

N SN

AN0509A

Cov. Type: C

CERTIFICATE No.	DMPCSNW00010102400	Engine No.: 2ZR1990516 Cha. No.: JTDGG20W10J007589
1. Index Mark and Registration Number of Vehicle	SLQ8040A	AUTOSAFE =====
2. Name of Policy Holder	SPECON CONTRACTOR PTE LTD	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	24/01/2024 (00:00:00)	Named Drivers Ex Sect. I \$S750.00 Additional Ex Other than Named Drivers: Ex Sect. I - Age <= 25 \$S3,000.00 Ex Sect. I - Age >= 26 \$S500.00 * Age as at date of accident EX ON WINDSCREEN \$S100.00
4. Date of Expiry of Insurance	23/01/2025	
5. Persons or Classes of Persons entitled to drive*	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 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:	Use for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade of business of use for any purpose in connection with the Motor Trade.  Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss) will be doubled. A Flat \$S5,000 Excess shall apply for Theft Losses occurring outside Singapore. One time Waiver of Excess for the first \$S500 will apply to the Insured and Named Drivers in the event Of Own Damage Claim at our Authorised Workshops for each Policy Year.	
HIRE PURCHASE CO. : HONG LEONG FINANCE LTD * 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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: NITA PTE LTD  
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