

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	11/11/2024 11:49 (SGT)
Reported by	Actual Driver
Date of Accident	11/11/2024 07:40 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	SLIP ROAD OF JURONG WEST ST 93 TO UPPER JURONG ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG6632B
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	MICROTECH ENGINEERING PTE LTD
Company Reg No	1XXXXX325G
Email Address	leochen@microtech-sg.com
Mobile Phone No	(Phone) +65-88789460
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Cabstar
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?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	2953
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Policy Number / Cover Note Number	24-MZC04467-R01

DRIVER

of Driver	CHEN ZHEN
No	SXXX697Z
Date Of Birth	01/07/1985
Occupation	Indoor
Driving Pass Date	20/12/2017
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	6 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-88769460
Alt. Phone Number	-
Email Address	leo.chen@microtech-sg.com
Address	APT BLK 257B, BOON LAY DRIVE, #07-241
Address complement	-
Postcode	642237
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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 ATTACHED

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	SHD6042Z
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Manufacturer
Model
Variant
Colour
Category
Name of Driver
Contact Number
Address
Address complement
Postcode
Insurance Company Name
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)

-
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-
Taxi
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-
-
-
-
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IMPORTANT NOTICE

SKETCH PLAN

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 - The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
 - Any false reporting may be referred to the Traffic Police Department for investigation.**
 - This report will be forwarded by the insurers to 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.
 - 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.
 - 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.



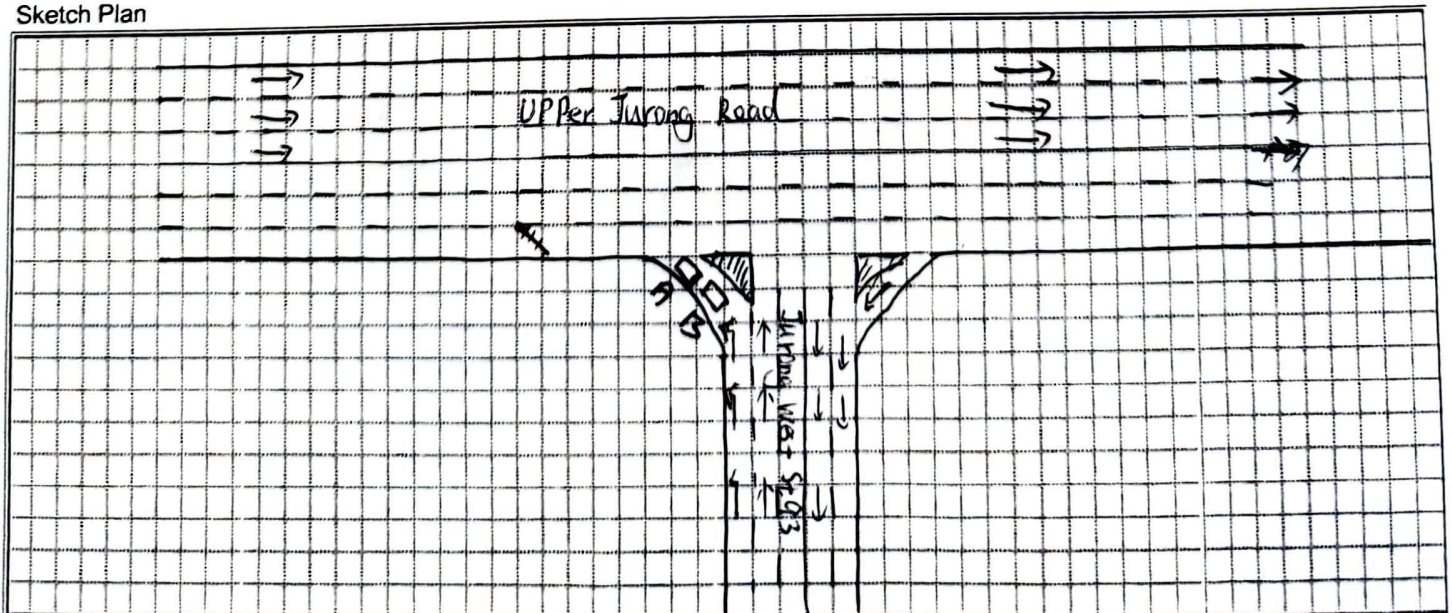
Policyholder's Signature / Date & Time

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

TC AUTOCORP PTE LTD
1 SUTHERLAND ROAD
SINGAPORE 828088
TEL: 8262 2212
FAX: 8262 3882

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

Sketch Plan



Circumstance of the Accident

On November 11, 2024, at approximately 7:45 a.m., the driver of Vehicle A (GBG6632B) was driving from Jurong West St. 93, turning onto Upper Jurong Road, and stopped in the waiting area before entering the main road to allow traffic on the main road to pass before merging. While waiting, the driver suddenly felt an impact from behind, which pushed the vehicle forward a short distance. After confirming there were no injuries and that the surroundings were safe, the driver exited to check. It was found that the rear of Vehicle A had been hit by the following vehicle, with license plate SHD 6042Z and the driver's identification number S1384711H.

The driver of the following vehicle (SHD 6042Z, Vehicle B) then moved the car toward the left side of the road to allow vehicles behind to pass. After getting out, the driver of Vehicle B (SHD 6042Z) apologized to the driver of Vehicle A (GBG6632B), admitting fault, saying he had not noticed the vehicle in front while looking to the right.


Both drivers confirmed that there were no injuries. They then exchanged contact information and identification numbers, took photos of the scene, and left the site.

Declaration


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


Policyholder's Signature / Date & Time




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

IC MICROTECH PTE LTD
1 SIXTH LOK YANG ROAD
SINGAPORE 628099
TEL: 6282 2212
FAX: 6282 3892


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