

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	04/01/2025 11:50 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	29/11/2024 18:25 (SGT)
Exact Location of Accident	Balestier Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBC3465H
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	YONG XIN RENOVATION
Company Reg No	53379111A
Email Address	YONGXIN9111@GMAIL.COM
Mobile Phone No	(Phone) +65-98113710
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Dyna
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 - Reporting only
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	3000
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMCVSNW00034772400

DRIVER

Name of Driver	YOU ENGUI
NRIC No	S7762045A
Date Of Birth	10/06/1977
Occupation	Outdoor
Driving Pass Date	04/04/2023
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	1 YEAR AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98113710
Alt. Phone Number	-
Email Address	YONGXIN9111@GMAIL.COM
Address	640 WOODLANDS RING ROAD #05-07
Address complement	-
Postcode	730640
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	OWNER
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	Side Swipe
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

VEHICLE A WAS ON SECOND LANE, COUNTING FROM THE RIGHT. VEHICLE B WAS ON THE FIRST LANE, COUNTING FROM THE RIGHT. SUDDENLY, BOTH VEHICLES SLIGHTLY TOUCH ONTO EACH OTHER. WE MOVED OUR VEHICLES TO THE RIGHT LANE. THERE WERE SMALL SCRATCHES ON BOTH VEHICLES. NOBODY WAS INJURED.

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	SMT2810G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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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

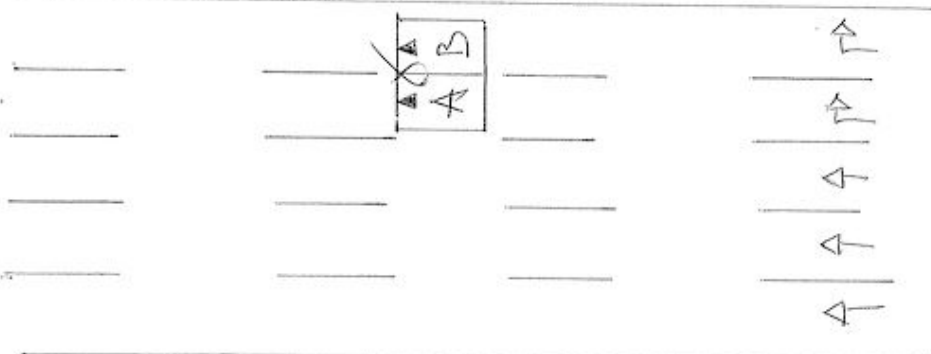
Witnessed by Reporting Centre Personnel

Sketch Plan

BALESTIER ROAD.

A: GBC 346SH

B: SMT 2810G.





















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

ORIGINAL

THE SCHEDULE

Agency : AN0641A Class of Policy : Motor Commercial Vehicle Policy No. : DMCVSNW00034772400
Account : AN0641A Issued on : 05/06/2024 in SINGAPORE
Client : Y039270C Acceptance Date : 05/06/2024

Period of Insurance : 22/06/2024 to 21/06/2025, both dates inclusive

Insured's Name : YONG XIN RENOVATION

Address : 640 WOODLANDS RING ROAD
#05-07
Singapore 730640

Business/Occupation : GENERAL CONTRACTORS (BUILDING CONSTRUCTION INCLUDING MAJOR UPGRADING WORKS)

Premium	:	Basic Annual Premium	:	S\$1,721.32
	:	No Claim Discount -20%	:	S\$ 344.26
	:	Motor Promotion	:	S\$ 137.71
	:	Total Annual Premium	:	S\$1,239.35
	:	Less Disc.	:	S\$0.00-
	:	Premium Due	:	S\$1,239.35
	:	Premium GST	:	S\$111.54
	:	Total Due	:	S\$1,350.89

Risk No.1 Motor Commercial Vehicle

Make/Model : Toyota DYNA 150 MANUAL

No. of seats : 2

Registration : GBC3465H

Body Type : Lorry

Engine No. : 1KD2143582

Chassis No. : JTFAT35Y20K201857

Tonnage : 1.7t

Certificate Ref. : MZ300/C

Year of Manuf/Regn : 2011/2011

Type of Cover : Third Party Fire & Theft

Sum Insured:Market value at the time of loss

The following clauses and endorsements apply to this policy

Subject to Endt. 3(q).

MODIFIED VEHICLES (FOR COMMERCIAL VEHICLES/BUSES/RENTAL VEHICLES)

It is hereby declared and agreed that the Company shall not be liable for any claims under SECTION I or II or both if the vehicle has been modified without prior notice/declaration to the Company.

Subject otherwise to the terms, exceptions and conditions of the Policy.

MEMORANDUM : CONDITION NO. 4 - NOTIFICATION OF ACCIDENTS

It is hereby noted and agreed that Condition No. 4 of the Policy is amended to read as follows:-

Notification Clause

- a) In the event of any accident involving the Motor Vehicle, irrespective of whether it would give rise to a claim, the Insured shall, together with the Motor Vehicle, call at the Company's Approved Authorised Workshop and/or Reporting Centre and report the accident within 24 hours of

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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

ACCOUNTING AND CORPORATE REGULATORY AUTHORITY
(ACRA)

Whilst every endeavor is made to ensure that information provided is updated and correct, ACRA disclaims any liability for any damage or loss that may be caused as a result of any error of omission.

Business Profile (Business) of YONG XIN RENOVATION (53379111A)

Date: 04 Jan 2025

Particulars of Authorised Representative(s) ¹

Name	Identification Number	Nationality/ Citizenship	Date of Appointment
Address			

¹ Authorised Representative was formerly known as Manager before 03 Jan 2016 for business firms

Existing Sole-Proprietor(s) / Partner(s)

Name	Identification Number	Nationality ² / Place of origin ³	Position	Date of Appointment
Address				
YOU ENGUI	S7762045A	CHINESE	OWNER	22 MAR 2018

640 WOODLANDS RING ROAD, #05-07,
SINGAPORE 730640

² Includes nationality and citizenship

³ Includes place of incorporation, place of origin and place of registration

Verify Document Instantly

Check if this document is issued
by ACRA.

<https://www.acratrustbar.gov.sg/verify/1GcZX6EpWy>

