SL0M247U0002 / Lai Huat (Meng Kee) Motor Pte Ltd ENTRY DATE & TIME: 30/07/2024 17:33 (SGT) SUBMITTED BY: LHMK -3 VERSION: 1 (30/07/2024 17:33 (SGT))

# 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 witholding 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 Reported by Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

30/07/2024 17:33 (SGT) Both Policyholder and Actual Driver 29/07/2024 12:50 (SGT) Sumang Ln & Sumang Walk, Singapore Junction Singapore

# **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SLT7967S

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner Company Reg No

**Email Address** Mobile Phone No

Alternative Phone No

Yes

Sanyu CE Pte Ltd 2XXXXX494G

sanyucepl@gmail.com (Phone) +65-64838477

VEHICLE PARTICULARS

Manufacturer

Model Variant

Exact purpose for which vehicle was being used at time of

accident

Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category

Transmission

CC

Mercedes E220d

**Employment** 

Yes

Private car

Auto

1950

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

China Taiping Insurance (Singapore) Pte. Ltd.

DMPCSNW00149442302

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

Thng Jun Xiang, Francis SXXXX326I 11/12/1972 Outdoor



**Driving Pass Date** Driving experience

Gender

Mobile Number

Alt. Phone Number **Email Address** 

Address

Address complement

Postcode

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

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 Weather Conditions

Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident

Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)

soliciting/offering accident claims assistance? 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?

Police Station Name Police Station Phone No Alt. Police Station Phone No Police Station Address

Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

Please refer to the police report no: E/20240730/2006.

ATTACHMENT(S)

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

Yes No

29/07/1998 26 YEARS

Male

(Phone) +65-87771109

francisthng@gmail.com

Blk 189C Rivervale Drive #04-996

543189

No

Authorised driver

No

Fire, explosion or lightning

Clear Dry

No

Nο

No

1

Nο

Yes

Bishan Neighbourhood Police Centre (Phone) +65-18005529999

(Fax) +65-65561905

20 Bishan Street 23 Singapore 579757

No

Accident report SL0M247U0002

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1. If ease report <u>correctly</u> the details of the accident to approdius the claims officers.
- 2. This floor must be completed by the Policyboides and or the Actual Drugs
- 3 Information provided must be as truthful and accurate as spassible. Any wirth 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 cart of the insurance companies.

#### 5. Any false reporting may be referred to the Traffic Police Department for investigation.

- 6 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.
- 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 aforeshid.

#### 8 Consent under the Personal Data Protection Act (PDPA)

i understand, acknowledge, agree and consent that

(a) My misurer implications 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 replicatively the **Personal Information**") and disclose and transfer such Personal information to all insurers who have insured vehicles) involved in this accident (all insurers) who have insured vehicles) 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

ti) processing thandling 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 daims finduding the mailing of correspondence, statements, invoices, reports or notices to me, which could involve displayers 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 is called we've 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.

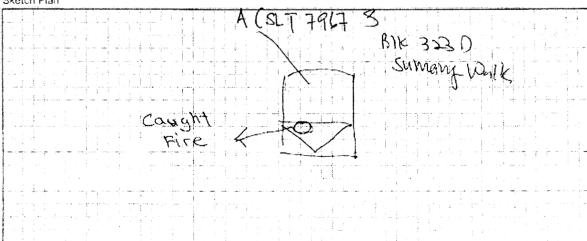
Policyholder's Signature / Date & Time

30/01/2024

Actual Dover's Signature (if dover is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel
(Name as in NRIC-ID card) Jenny Lim

Sketch Plan



suum 20022

Describe Circumstance of the Accident			
Please refer	to the police	veport	
WORLDSTEEL, 11	e en	- 100 (800)	
			S. 1. No.
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			AND THE RESIDENCE OF THE PERSON OF THE PERSO
			11. 44.
		in .	
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Declaration

Poscyholder's Signature | Date & Time | Actual Driver's Signature (if driver's not the policyholder) | Witnessed by Reporting Centre Personnel |
| Date & Time | Name as in NRKUID card | Jeppy

Jenny Lim

v Austrial





1 of 2

Report No. E/20240730/2006

### **POLICE REPORT (NP299)**

Police Station Of Origin Bishan N.P.C 20 Bishan Street 23 SINGAPORE 579757 Tel No: 1800-5529999

Date/Time Report Made	Vide Report No. F/20240729/0098			Station Diary No. 29	
30/07/2024 10:22					
Name Of Informant	Address				
THNG JUN XIANG, FRANCIS	APT BLK 189C RIVERVALE DRIVE #04-996 SINGAPORE 543189				
ID Type / ID No.	Contact No.				
NRIC NO / \$72463261	Home/Office		Mobile		
			87771109		
Nationality	Email Address				
SINGAPORE CITIZEN		anne a recognica de antida de a	namentus salaman particular.		
Occupation	Sex	Age	Date of Birth	Race	
CONSTRUCTION STAFF	Male	51	11/12/1972	Chinese	
Institution/School Name	Language English				
Date/Time Of Incident	Location Of Incident				
29/07/2024 12:55	APT BLK 323D SUMANG WALK PUNGGOL BAYVIEW				
	SINGAPORE 824323				
	at the loading bay				

# Brief details.

On 29th July 2024 at 1250hrs, I was driving my vehicle registration number: SLT7967 (Mercedes AE220D) from Sembawang Road towards to Sumang Lane. At the junction of Sumang Lane/ Sumang Walk, I spotted that there was a huge smoke came from the engine part. Thus, I drove to the nearest location (B/323D, Sumang Walk at the loading bay) to check on the engine area. While I opened the bonnet, I spotted a fire came from one the engine's part and I quickly took a pail of water to extinguish the

Signature Of Officer Recording The Report: E / SI MOHAMAD FARID BIN JAMAL	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 30/07/2024 10:22
Officer In-Charge Of Case: E / Tanglin Police Divisional Investigation Branch / SGT 3 BRYAN LIM KAH LOK Contact No.: 63918466	Classification Of Case:





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**POLICE REPORT (NP299)** 

**CONTINUATION OF REPORT** 

Report No. E/20240730/2006

fire. I was not injured and SCDF came shortly.

I had been using the mentioned vehicle for almost 6 years and I had reported to my insurance company. I was advised to lodge a Police report for insurance claimed.

Person Name	THNG JUN XIANG, FRANCIS (Informant)	

Signature Of Officer Recording The Report:

E / SI MOHAMAD FARID BIN JAMAL

Signature Of Interpreter:
Not applicable

Date/Time:
30/07/2024 10:22

Classification Of Case:

E / Tanglin Police Divisional Investigation Branch /
SGT 3 BRYAN LIM KAH LOK
Contact No.: 63918466