MNA117135763 / National Assessment Centre Services - Ubi ENTRY DATE & TIME: 12/10/2017 15:00

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 Authorised 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 ability.
- 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 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.

aforesaid.	nereby consent to the archiving of this report at the centre and to copies of the report being made available	
	ACCIDENT STATEMENT	
Date Of Report	12/10/2017 15:00	
Date Of Accident	12/10/2017 01:35	
Exact Location Of Accident	JURONG PORT ROAD	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBE9280Z	
Insured/Policyholder		
Name Of Registered Owner	XIN SHUN CHENG SEAFOOD SUPPLIER PTE LTD	
Co Reg No	201410936K	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-96875757	

OFFICE-96875757

Alternative Phone No **Vehicle Particulars**

Manufacturer **TOYOTA**

DYNA 3.0 DIESEL TURBO M/T 2WD LORRY Model

Exact Purpose for which vehicle was being used at WORK

time of accident

Are you claiming under your own insurance policy

for repair to your vehicle?

NO

If No, Please state action to be taken THIRD PARTY

Vehicle Category COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage **COMPREHENSIVE**

Fleet Policy NO

Policy Number 5079746245-01

Cover Note Number

Driver

Name of Driver TOMMY HO YONG SOON

NRIC No S7720348F Date Of Birth 27/07/1977 Occupation **OUTDOOR** Date Of Driving Pass 22/06/1998

19 YEARS AND 3 MONTHS **Driving Experience**

Gender MALE

Mobile Number (LOCAL) +65-96875757

Fax Number

Contact Number OTHERS-96875757

EMail Address NOEMAIL Address BLK 327A ANCHORVALE ROAD

#13-336

Postcode 541327

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Vehicle

.

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident SIDE SWIPE
Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO
Was any body injured in the Accident? NO
Was any other material or property damaged? YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.
Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLS REFER TO THE ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? YES
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number XE1325
Vehicle Make/Model/Colour TRD852Z

Details Of Properties

Name of Driver ZHAO JUNJUN
NRIC/Passport Number G5062127N
Contact Number 81741818

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

Sketch Plan

SKETCH PLAN

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- 5. Any false reporting may be referred to the Police for investigation.
- 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.
- By the lodgment 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:
 - 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time: Oriver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

NRIC/FIN No.

TCH PLAN			
alan Buroh	K K		
2000	1		
-	AB		A - GBE9280 B - XE 1325/
Jurong 1908+ Road			B - XE 1325/ TRD852
CRIBE CIRCUMSTANCES OF	THE ACCIDENT		
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	Jo Miles		
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/			
CLARATION	ň		
e declare the foregoing particula			\
海鄉州水	Driver's Signature	Reporting Centre F	ersannel's Signature
virolder's Signature & Vinte:	(If driver is not the policyholder) Date & Time:	Name: NRIC/FIN No.:	- Towns

I STOPPED MY LORRY AT THE TRAFFIC JUNCTION AT THE EXTREME LEFT LANE DUE TO RED LIGHT TRAFFIC.

WHILE WAITING, ALL OF A SUDDEN I FELT A GREAT IMPACT AND LOUD BANG COMING FROM MY RIGHT SIDE OF MY STATIONARY LORRY.

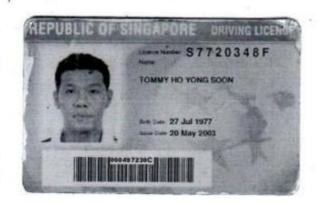
AND I SAW A HUGE HEAVY VEHICLE DROVE PASS MY PATH AND HIT THE RED LIGHT, AFTER I ALIGHTED AND CHECK REALIZED THE HEAVY VEHICLE XE132S/TR852Z WHO COLLIDED ONTO MY STATIONARY LORRY THIS INCIDENT WAS CAPTURE BY MY IN -UNIT CAMERA FOOTAGE.

NO ONE WAS INJURY.

DATE OF ACCIDENT: 12/10/2017

TIME: 01:35AM













Accident Photo



Accident Photo



Accident Photo







