

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 withholding 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.
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 Report	27/11/2017 16:49
Date Of Accident	25/11/2017 10:45
Exact Location Of Accident	ALONG THE SLIP ROAD EXIT TO SLE TOWARDS BKE
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GX1953J
Insured/Policyholder	
Name Of Registered Owner	POH KIAT ELECTRICAL
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-96409988
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	-
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?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	ERGO INSURANCE PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMCV16S013996
Cover Note Number	
Driver	
Name of Driver	TIEN KIM CHWEE@TAN KIM CHWEE
NRIC No	S0827618H
Date Of Birth	26/05/1949
Occupation	OUTDOOR
Date Of Driving Pass	29/08/1979
Driving Experience	38 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96409988
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	APT BLK 886D WOODLANDS DRIVE 50 #09-549 SINGAPORE
Postcode	734886
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHMENT

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGD2639R
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	JIMMY LAU CHU KEONG
NRIC/Passport Number	S7312988E
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

Accident Sketch Plan

SKETCH PLAN

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7. 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:
 - (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.
- (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:
 - (i) 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
 - (ii) for complying with requirements under any regulations, laws or court orders.

寶捷電器
POH KIAT ELECTRICAL

BLK 175 #12-855

Yishun Ave 7

Singapore 760175

Policy Tel: 67548800 Fax: 60278660

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

CITY AUTO PTE LTD

Blk 8 Sin Ming Road

#01-58/60/62 Sin Ming Ind Est

Singapore 575643

Tel: 6453 1235 Fax: 6453 7944

(Claims Section)

Reporting Centre Personnel's Signature

Name: VERONICA LAW

NRIC/FIN No.:

A - GX1963J

B - SG1D2639R

B. SGD 2639R

SLE

Slip Road
Woodlands Ave

Refer to attachment.

Refer to attachment.

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

寶捷電器

BLK 175 #12-855

Yishun Ave 7
Policyholder's Signature
Singapore 760175
Date & Time
Tel: 87348960 Hp: 90278660

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

Blk 8 Sin Ming Road

#01-58/60/62 Sio Ming Ind Est
Singapore 675643

Tel: 6453 1235 Fax: 6453 7944

Reporting Centre (Claims Section) Signature _____

Name: VERONICA LAW

NRIC/FIN No.:

Accident Sketch Plan

On the 25/11/17 at about 10.45am, I was driving a motor van GX1953J travelling on the right lane beside the centre road divider along the slip road exit to SLE toward BKE. On arrival at about 20meter away the Exit there was a road merged area, I was continue driving without while at the ending of the road merged area is alrea portion dy become 1 lane traffic, I suddenly I feel like something bang on my centre of my van body. I was then look at the right side rear view mirror I noticed there was hit by the motor SGD2639R.

Both of us was then drive further stop at the road side to check the damage and excheng particulars. That all.

Damage to my Van: Left Side body centre portion slightly damage.

Damage to SGD 2639 R: Front right bumper slightly damage.

寶捷電器
POH KIAT ELECTRICAL
BLK 175 #12-855
Yishun Ave 7
Singapore 760175
Tel: 67548960 Hp: 90278660



ERGO

COMMERCIAL VEHICLE (PRIVATE USE)

CP1
R. SB
A000415
Cov.Type: F**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)**CERTIFICATE NO.**

DMCV16S013996

1) Index Mark and Registration
No. of Vehicle:

GX1953J

2) Name of Policyholder:

POH KIAT ELECTRICAL

3) Commencement Date of Insurance:

12 December 2016

4) Expiry Date of Insurance:

11 December 2017

5) Persons or Classes of Persons entitled to drive

1) Any person who is driving on the Policyholder's order or permission

6) 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.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

7) Limitations as to Use

1) Use in connection with the Policyholder's business.

2) Use for carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.

3) Use for social domestic and pleasure purposes.

This policy does not cover

1) Use for hire or reward racing pace-making reliability trial or speed-testing.

2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

HIRE PURCHASE CO. : THIAM HENG AUTO (S) PTE 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 (for Items 6 & 7)

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)

Legend

Cov Type:

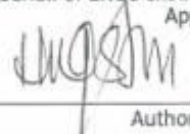
C - Comprehensive

F - Third Party, Fire & Theft

T - Third Party

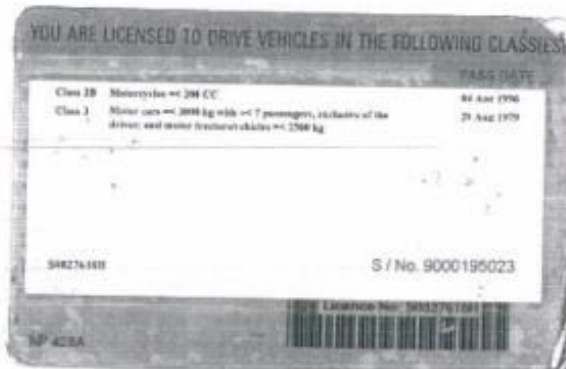
For and on behalf of **ERGO Insurance Pte. Ltd.**

Approved Insurer



Authorized Signature

NRIC & Driving license



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

