SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report <u>correctly</u> 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 <u>truthful and accurate</u> 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.
- 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	14/12/2017 10:17
Date Of Accident	13/12/2017 08:45
Exact Location Of Accident	AT CLEMENTI CRESCENT
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBF8938L
Insured/Policyholder	
Name Of Registered Owner	POLYPET
Co Reg No	53013965X
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97988938
Alternative Phone No	OFFICE-97988938
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	TOYOTA HIACE VAN TURBO 5 DR MANUAL
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN1658801701
Cover Note Number	
Driver	
Name of Driver	LOO TET SIONG
NDIC No.	600222821

 Name of Driver
 LOO TET SION

 NRIC No
 \$0032382I

 Date Of Birth
 18/03/1952

 Occupation
 OUTDOOR

 Date Of Driving Pass
 26/07/1974

Driving Experience 43 YEARS AND 4 MONTHS

Gender MALE

Mobile Number
Fax Number

Contact Number

EMail Address NOEMAIL

Address

Postcode

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 Registration Number of Driver's Own

_

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident COLLIDED INTO PARKED VEHICLE

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? I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO 1

NO

YES

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

NO NO

YES

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1
SHC3802Y

Vehicle Registration Number Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

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

PolyPet

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

Date & Time:

0 36

Reporting Centre Personnel's Signature

NRIC/FIN No.:

Name

Accident Sketch Plan

KETCH PLAN					Date of Accident: 13/12/			
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COURT CIRCUMSTAN	CES OF THE ACCUSE.			-				
SCRIBE CIRCUMSTANC	CES OF THE ACCIDENT							
ON 13/12/17 AT ABO	UT 0845 MY VEH WAS PARKED	AT CLEMENT	CRE	sc	ENT	r. V	/EHB(SH	HC3802Y)
	AND KNOCKED ONTO MY RIGI							
		HI FRONT DC	JOR. V	EH	BV	VAS	DRIVING	FASIW
CAUSED THIS ACCID	ENT.							
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		Report			- CITC	440	Land .	
CLARATION		1 majori	ing carry					
	articulars are true in every respect.					(000 o	WORK'S	
olyPet	elos.					10	CLAMMS	
	Driver's Signature (If driver is not the policyhold	ler)	Repo		g Cer	10	WORKS *	Signature

CERT OF INS



中国太平保险(新加坡)有限公司

Co. Reg. No. 200009384F

MOTOR COMMERCIAL VEHICLE

NZ300/C R SN AV0478A Cov. Type: C

CERTIFICATE OF INSURANCE

Molor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) Molor Vehicles (Third-Party Risks and Compensation) Rules, 1960 Rose Transport Art, 1987 (Mishight) Motor Vehicles (Third-Party Risks) Rules, 1969 (Malaysia)

ORIGINAL

ing ne No :1x02639659 CERTIFICATE No. DVCVSN1658801701 Chano: 3TFHT02P700203110

1. Index Mark and Registration Number of Vehicle

AUTOSAFE

2. Name of Policy Holder

M/S POLYPET

Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment

01 September 2017 Excess Sect I 5\$500.00 EX ON WENDSCREEN \$\$200.00

4. Data of Engiry of Insurance.

31 August 2018

5. Persons or Classes of Persons entitled to drive"

Any person who is driving on the Policyholder's order or with their permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Venicle or has been so permitted and is not discuslified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor vehicle.

G. Limitations as to use."

- (1) Use in connection with the Policyholder's business.
- (2) Use for the carriage of passengers (other than for hime or reward) in connection with the Policyholder's business.
- (3) Use for social, comestic or pleasure purposes.

The Policy does not cover.

- (1) Use for hire or reward or racing, pace-woking, reliability trial or speed testing.
- (2) Use whilst crawing a trailer except the towing of any one disabled mechanically propelled vehicle.

HIRI PURCHASE CO. : FONG LEONG FINANCE LTD AS HP CANER

*Limitations randored inocording by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 180) and Section 95 of the Road Transport Act 1987 (Malaysia), are not to be included under these headings.

I/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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD.

Issued By: _____INSURE HUB PTE LTD... Authorised Officer

many

3 Anson Road #16-00 Springleaf Tower Singapore 079909 Tel: 6389 6111 Fax: 6225 3592 Website: www.ag.ontaiping.com























