

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	02/01/2018 15:22
Date Of Accident	29/12/2017 15:40
Exact Location Of Accident	ALONG DUNEARN ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	XB6696H
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Insured/Policyholder

Name Of Registered Owner	SIN HIAP HOE TRANSPORT PTE LTD
Co Reg No	197401305C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62660808

Vehicle Particulars

Manufacturer	RENAULT
Model	PREMIUM HD
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	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	SMT08496
Cover Note Number	

Driver

Name of Driver	CHEE KONG YEW
Passport No/FIN	F0021423W
Date Of Birth	27/03/1963
Occupation	OUTDOOR
Date Of Driving Pass	17/04/2007
Driving Experience	10 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98673763
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	45A PANDAN ROAD SINGAPORE
Postcode	609287
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
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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 ATTACHED SKETCH PLAN

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	SGS459C
Vehicle Make/Model/Colour	NISSAN / LATIO / SILVER
Details Of Properties	REAR BUMPER RIGHT HAND PORTION
Vehicle Category	PRIVATE CAR
Name of Driver	SAW CHWEE GUAN
NRIC/Passport Number	S1849656I
Contact Number	UNKNOWN
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

SKETCH PLAN

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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.

SIN HIAP HOE TRANSPORT PTE LTD
 Co. Reg. No. 197401305C
 GST Reg. No. M2-0019852-2
 45A Pandan Road, Singapore 609287
 Tel: 6266 0808 Fax: 6268 7785

Policyholder's Signature
 Date & Time:

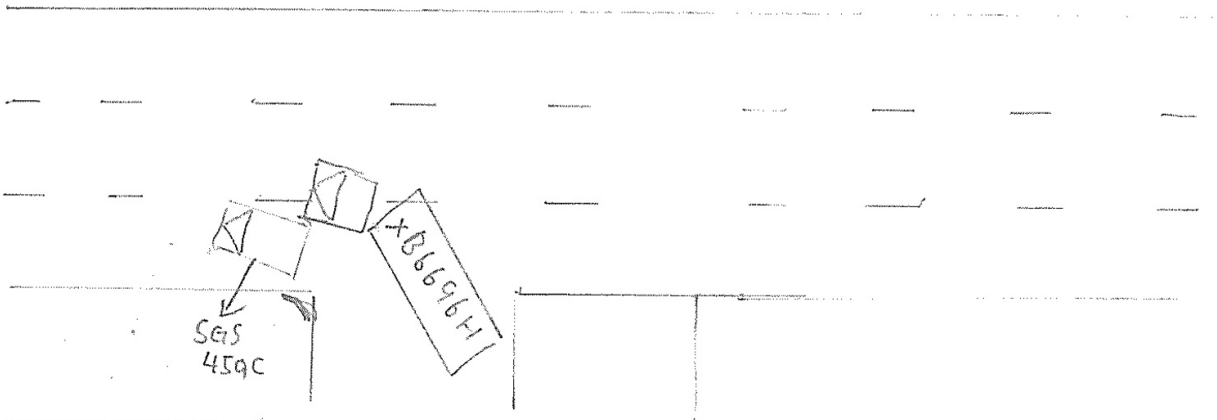
Driver's Signature
 (If driver is not the policyholder)
 Date & Time:

chee kong yew
 2/1/2018

WONG CHEE WEI ENGINEERING PTE LTD
 EXTERNAL BUSINESS DIV, PANDAN BRANCH
 NAME & SIGNATURE: *Wong Chee Wei*
 DESIGNATION: *Manager* DATE: *2/1/2018*

Reporting Centre Personnel's Signature
 Name: **WONG CHEE WEI**
 NRIC/FIN No: *72180994*

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

WHILE EXITING THE PETROL STATION, MY TRUCK - XB6696H
GRAZED ONTO REAR RAG OF 3RD PARTY CAR - SGS 459C

SIN HIAP HOE TRANSPORT PTE LTD
Co. Reg. No. 197401305C
GST Reg. No. M2-0019852-2
45A Pandan Road, Singapore 609287
Tel: 6268 0808 Fax: 6268 7785

DECLARATION

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

Policyholder's Signature
Date & Time:

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

COMFORTDELGRU ENGINEERING PTE LTD

EXTERNAL BUSINESS DIV. PANDAN BRANCH

NAME & SIGNATURE:

DESIGNATION:

DATE: 2/1/18

Reporting Centre Personnel's Signature
Name: WONG CHEE WEI
NRIC/FIN No. 772180994



INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792K | GST. Reg. No. M2-0078806-X
 64 Cecil Street #04/ #05/ #06-02 IOB Building Singapore 049711
 Office (65) 63476100 Email insure@iii.com.sg
 Fax (65) 62244174 Website www.iii.com.sg

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)

This certificate is not transferable to a new owner of the vehicle. If for any reason the Insurance is terminated during its currency, the Certificate must be returned to the Insurer, or if the Certificate has been lost or destroyed a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the legislation relating to compulsory Insurance.

The Certificate must be returned if the Insurance is suspended during its currency.

III SPECIAL RISKS POOL

Agency Code: 9009999	Excess: S\$5,000/- all claims
Third Party	
CERTIFICATE NO.	SMT08496
1. Index Mark and Registration Number of Vehicle	XB 6696 H
2. Name of Policy Holder	Sin Hiap Hoe Transport Pte Ltd
3. Effective date of the commencement of Insurance for the purposes of the Act	13th October 2017
4. Date of Expiry of Insurance	12th October 2018
5. Persons or Classes of Persons entitled to drive* (1) Whilst the vehicle is being used in connection with the Policyholder's business. Any person provided he is in the Policyholder's employ and is driving on their order or with their permission. (2) Whilst the vehicle is being used for social, domestic or pleasure purposes. 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 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.	
6. Limitations as to use* (1) Use in connection with the Policyholder's business. (2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business. (3) Use for social, domestic and pleasure purposes. The Policy does not cover (1) Use for racing, pace-making, reliability trial, or speed-testing. (2) Use whilst drawing a greater number of trailers in all than is permitted by Law. (3) Use for the carriage of passengers for hire or reward.	
<small>*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.</small>	

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).

Date of Issue: **IL/21.09.2017**

for India International Insurance Pte. Ltd.
Managers for the Special Risks Pool

M.Z. 301CT (GOODS CARRYING)
HIRE TYPE

Authorized Signatory

Geographical Area: **'THE REPUBLIC OF SINGAPORE ONLY'**

IMPORTANT NOTICE

Policyholders are hereby warned that under the Motor Vehicle (Third Party Risks and Compensation) Act (Cap 189), it shall be unlawful for any person to use or to cause or permit any other person to use a motor vehicle without a valid policy of insurance under the Act.

Policyholders are further warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap 189).

The Policy will cease to be valid once the motor vehicle has been sold to another person unless the transfer of interest has been duly notified to and agreed to by the insurance company concerned. If the insurance company agree to cover the new owner they will endorse the policy accordingly and will issue a new Certificate of Insurance in the new owner's name.


IN THE EVENT OF AN ACCIDENT NOTIFICATION SHOULD BE GIVEN IMMEDIATELY TO THE COMPANY. FAILURE TO DO SO WILL RESULT IN UNDERWRITERS DECLINING LIABILITY.

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **F0021423W**
 Name: **CHEE KONG YEW**

Birth Date: **07 Mar 1963**
 Issue Date: **23 May 2013**
 Valid Till: **28 May 2018**

0021838408





WORK PERMIT
 Employment of Foreign Manpower Act (Chapter 91A)
 Republic of Singapore

Employer: **SIN HIAP HOE TRANSPORT PTE. LIMITED**

Sector: **SERVICE**

Name: **CHEE KONG YEW**
 Occupation: **TRAILER-TRUCK DRIVER**

Work Permit No.: **3 69526014**
 Date of Application: **02-11-2016**
 Date of Issue: **11-09-2017**
 Date of Expiry: **10-09-2019**


L8302463

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	EFFECTIVE DATE
Class 2B Motorcycles =< 200 cc	19 Jun 1996
Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg	19 Jun 1996
Class 4 *Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg *Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg	06 Mar 1997
Class 5 Motor vehicles not constructed to carry any load and the unladen weight > 7250kg	17 Apr 2007

NP 428A


Licence No: F0021423W




VISIT PASS
 Immigration Regulations

Name: **CHEE KONG YEW**

Date of Birth: **07-03-1963** Sex: **M** Nationality: **MALAYSIAN**
 FIN: **F0021423W** Date of Issue: **12-09-2017** Date of Expiry: **10-09-2019**



YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

