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 <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 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.	ent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	25/01/2018 16:42
Date Of Accident	24/01/2018 20:20
Exact Location Of Accident	EXIT FROM BLOCK 507 WEST COAST DRIVE CARPARK
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	PC3213C
Insured/Policyholder	
Name Of Registered Owner	GRAND SINCERE TRANSPORTATION
Co Reg No	-
Email Address	RICHWANGLIMO@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92393657
Alternative Phone No	OFFICE-92393657
Vehicle Particulars	
Manufacturer	TOYOTA
Model	HIACE
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5095317691
Cover Note Number	
Driver	
Name of Driver	WANG KENG MUI
NRIC No	S1296338F

Name of Driver

NRIC No

S1296338F

Date Of Birth

Occupation

Date Of Driving Pass

WANG KENG M

S1296338F

17/04/1958

OUTDOOR

01/08/1978

Driving Experience 39 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-92393657

Fax Number

Contact Number OTHERS-92393657

EMail Address RICHWANGLIMO@GMAIL.COM

Address BLK 676 HOUGANG AVENUE 8

#04-565

Postcode 530676

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 COLLIDED INTO PEDESTRIAN

Weather Conditions RAINING
Road Surface WET

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?

NO

NO

NO

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering assistance

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

Police Station Name KAMPONG JAVA NEIGHBOURHOOD POLICE CENTRE

NO

YES

Police Station Address ROAD: 21 KAMPONG JAVA ROAD, POSTCODE: 228892, COUNTRY:

SINGAPORE

Police Station Contact **TEL NO**: 1800-2959999 - **FAX NO**: 63918499

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T20180125/2054

Attachment(s)

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

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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. 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.
- 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)
 - (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.

Policyholder's Signature Date & Time:

Driver's Signature

(If driver is not the po Date & Time

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.: LOS J. WHATPH

Accident Sketch Plan

SKETCH PLAN EXTT	from BUKSOT WAS	1 coast DRIVE CARP	ARK
		700	
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A)PC 33			
B) PADAST	EIAM A	1	
DESCRIBE CIRCUMSTANCE	ES OF THE ACCIDENT		
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DECLARATION /We declare the foregoing parti	culars are true in every respect.	al selle	la lacet
Policyholder's Signature Date & Time:	Oriver's Signature (If driver is not the policyholder) Date & Time: 25/1/2018	Reporting Centre Personned's Signame: NRIC/FIN No.:	- Indiana - Indiana

POLICE REPORT





Date of Expiry:

Police Station Of Origin: Kampong Java N.P.C 21 Kampong Java Road SINGAPORE 228892 Tel No: 1800-2959999

Chinese

Occupation:

Van driver

1 of 3 Report No. T/20180125/2054

REPORT O	F A TRAFFIC	CACCIDENT		
Date/Time Report Made: 25/01/2018 11:59		Vide Report No.:	Station Diary No.: 296	
Informa	nt's Partici	ulars		
Name of	Informant KENG MUI		Address: APT BLK 676 HOUGAN 530676	IG AVENUE 8 #04-565 SINGAPORE
ID Type / ID No.: NRIC NO / S1296338F		Contact No.: Home/Office:	Mobile: 92393657	
National SINGAP	ity: ORE CITIZ	ŒN	Email:	
Sex: Male	Age: 59	Date of Birth: 17/04/1958	Type of Informant: Driver	
Race Chinese		Language: Chinese	Institution / School Name:	

Driving Licence Information:

Class: 3

Seneral Inform	nation of the Accident	and the second		
Type of Accident:	Non-Injury Pedestrian / Cyclist	Drink Drive; No	Date/Time of Accident: 24/01/2018 20:20	Type of Location T-Junction
Location: Along Road 1 WEST COAS Exit of Blk 50 Weather:	T DRIVE 7 West Coast Drive	Road Surface:	F	Road Speed Limit
Raining		Wet		
Traffic Flow: Two Way		Traffic Control: Not Controlled	1.0	raffic Volume: light
Type of Collis	sion: de Against - Pedestrian		2	Anyone conveyed by ambulance: No

Details of V	ehicle Invo	lved	elacteric.		1	
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
PC3213C	Van					0

Details of Person Involved		-
Any Pedestrian Involved: No		-
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA	

POLICE REPORT



T/20180125/2054

Police Station Of Origin: Kampong Java N.P.C 21 Kampong Java Road SINGAPORE 228892 Report No. T/20180125/2054

2 of 3

Tel No: 1800-2959999

CONTINUATION OF REPORT

Driver						040000005
Name	WANG KENG MUI			ID No.		S1296338F
Related Vehicle	PC3213C (Van)			Conta	ct No.	92393657
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g	Class: 3 Date of Expiry: NIL
	NIL	IV.	Date Dis		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree	of Injury	NIL	

Brief Details.

I am the above mentioned person residing at the above location.

On 24/01/2018 at about 2020hrs, I was driving my van bearing registration PC3213C at the car park of Blk 507 West Coast Drive, exiting to the main road of West Coast Drive. As it was raining heavily, I slowly inched out to check for both oncoming traffic. When I was making a right turn after ensuring there were no traffic, I realized brushed against a elderly female Chinese on my right side of vehicle. However I still provided her with my vehicle number and contact number.

Immediately, I rendered my assistance to her by calling ambulance for her and she refused. I also tried to obtain her particulars and offered to send her to clinic and she refused. She only provided me her address as Level 11 of Blk 507 West Coast Drive. When I enquired on her purpose of crossing the road, she assumed that I was giving her way. Thus, she decided to cross over.

I am lodging the report for any investigations that is required. My vehicle has in built camera and I have remove the SD card for further investigations.

POLICE REPORT





Police Station Of Origin: Kampong Java N.P.C 21 Kampong Java Road SINGAPORE 228892 Tel No: 1800-2959999 3 of 3 Report No. T/20180125/2054

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature O E / Sgt 2 TAN J	f Officer Recording The Report: UN WEN	Signature Of Informant:		
Signature O Not applicab	f Interpreter:	Date/Time: 25/01/2018 11:59		
TP/AEIT/	narge Of Case: ARSITA BINTE BOHARI : 65476219	- Classification Of Case:		
Authenticatio NP168	Stamp SINGAPORE POLICE FORCE	5N 167		
	SIGNATURE			

10 Sin Ming Drive Singapore 575701 Tel: 1800-CALL LTA (1800-2255 582) Fax: (65) 6553 5329

04 Nov 2017

Our ref 0411170203N057010001

GRAND SINCERE TRANSPORTATION APT BLK 408 ANG MO KIO AVENUE 10 #01-785 SINGAPORE 560408

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Dear Sir/Madam

NOTIFICATION ON SUCCESSFUL REPLACEMENT OF VEHICLE REGISTRATION NO. PC6397K WITH VEHICLE REGISTRATION NO. PC3213C

You may be pleased to know that your application of 04 Nov 2017 for replacement of registration number is approved.

The details of the vehicle after the transaction are as follows:

Vehicle Registration No. : PC3213C (Previously PC6397K)

Vehicle Make

: TOYOTA

Vehicle Model

: HIACE COMMUTER 3.0 GL AUTO

Chassis No.

: KDH2230027428

Engine No./ Motor No. : 1KD2598886 / -



Grand Sincere Transportation

Blk 408 Ang Mo Kio Ave 10 #01-785 Singapore 560408

Hp: 92731323 Fax: 64582703

Reg. No: 53071577E

To Whom It May Concern:

Dear Sir/Mdm,

This is to certify that Mr Wang Keng Mui, NRIC number S1296338F is an employee at Grand Sincere Transportation and working as a driver, vehicle license plate number - PC3213C since 1 November 2017.

If you have any enquires regarding Mr Wang Keng Mui's employment, please contact me at 92731323.

Sincerely,

Mike Yong Manager

















