#### 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

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	ACCIDENT STATEMENT
Date Of Report	01/02/2018 15:45
Date Of Accident	31/01/2018 13:30
Exact Location Of Accident	ORCHARD ROAD IN FRONT PARAGON SHOPPING MALL
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBA9690U
Insured/Policyholder	
Name Of Registered Owner	HWEE SENG (ELECTRONICS) PTE LTD
Co Reg No	A198001809H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-90301361
Vehicle Particulars	
Manufacturer	NISSAN
Model	URVAN 5DR(D)-3.0 (A)
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	THIRD PARTY
Vehicle Category	GOODS VEHICLE
Insurance Company	
Name of Insurance Company	GREAT EASTERN GENERAL INSURANCE LIMITED
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2017-V0090772-VCV-R004
Cover Note Number	
Dulyan	

#### Driver

Name of Driver

QUAN DEQIANG

Work Permit No

G2610030K

Date Of Birth

10/08/1976

Occupation

OUTDOOR

Date Of Driving Pass

30/10/2015

Driving Experience 2 YEARS AND 3 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91265137

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

Insurance Company of Driver's Own Vehicle

NO

NO

**General Information of the Accident** 

Type Of Accident **COLLISION - HEAD TO REAR** 

Weather Conditions **CLEAR** DRY Road Surface

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.

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?

If Yes, against whom?

**Circumstances of Accident** 

AS ATTACHED STATEMENT

Attachment(s)

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

Was there any audio recorded?

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number SFP9898L Vehicle Make/Model/Colour **JEEP Details Of Properties FRONT** 

PRIVATE CAR Vehicle Category Name of Driver RAYMOND SER

NRIC/Passport Number

**Contact Number** 94550910

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### SKETCH PLAN

#### **IMPORTANT NOTICE**

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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) 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:
  - (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: Quan De Giang

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

Reporting Centre Personnel's Signature Name: NRIC/FIN No.: SKETCH PLAN Bioloford Coad

A: GBA 9690U B: &FP 9898L.

# DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 31/1/2018 @ about 13:20 hrs, my vehicle (A) was
stationary along Orchard Road due to the red
light ahead before the fuction of Rideford
On 31/1/2018 @ about 18:20 hre, my vehicle (A) was stationary along Orchard Road due to the red light ahead before the furti junction of Rideford Road. While waiting for the green light to be appeared. Suddenly Weh B hit onto my vehicle rear portion, caused the damage.
be appeared. Suddenly Veh B not onto my
vehicle rear portion, caused the daniese
My colleage Mr Abdullah Atiz was on heard
My colleange Mr Abdullah Ariz was on board too, No injury involved in the accident.

**DECLARATION** 

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

Policyhorder's Signature Date & Time:

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

Anikka Lai cso

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

For Customer Service please visit 1 Pickering Street #01-01 Great Eastern Centre Fax: (65) 6327 3080 Tel: (65) 6248 2888

# Certificate of Insurance



#### ORIGINAL

Road Transport Act 1987 (Federation of Malaysia)
The Motor Vehicles (Third-Party Risks) Rules, 1959 (Federation of Malaysia)
The Motor Vehicles (Third-Party Risks and Compensation) Act. (Cap.189 of the Revised Edition) (Republic of Singapore)
The Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960. (Republic of Singapore)

FORM M2300

Policy No. : 2017-V0090772-VCV-R004 Policy Type : Commercial Vehicle Risk# : 0001 Cover : Third Party, Fire & Theft

DESCRIPTION OF VEHICLES:

Vehicle Registration : GBA9690U Vehicle Make & Model : NISSAN URVAN PANEL LWB 3.0

Name of Insured : HWEE SENG (ELECTRONICS) PTE LTD

Period of Insurance: 18-04-2017 (0000HRS ) to 17-04-2018

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 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.

- LIMITATIONS AS TO USE

  Use in Connection with the Policyholder's business.
  Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
  Use for social, domestic and pleasure purposes.

  The policy does not cover:

  Use for racing,pace-making,reliability trial or speed-testing.
  Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.
  Use for the carriage of passengers for hire or reward.

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.

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)

Signed for and on behalf of the Corporation

Authorised Signature

21-03-2017

#### Sketch Plan Pg. 4

WORK PERMIT

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

Employer
HWEE SENG (ELECTRONICS) PTE LTD

Sector SERVICE



QUAN DECIANG

Work Penal B 0 7658401-

Date of Application 07-09-2017 Date of Issue 27-09-2017 Date of Expir, 06-09-2019



REPUBLIC OF SHEET SHE DRIVING LICEN

Licence Number: G2610030K

QUAN DEGIANG







\*1

VISIT PASS Immigration Regulations

Name QUAN DEQIANG



Date of Birth Sex 10-08-1976 M

Nationality CHINESE

Date of Expiry Date of Issue G2610030K 27-09-2017 06-09-2019

MULTIPLE JOURNEY VISA ISSUED

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

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES) EFFECTIVE DATE MOTOR CARS AND MOTOR TRACTORS THE WEIGH OF WHICH UNLADEN DOES NOT ENCEED 2500 KILOGRAMS 30 Oct 2015 S / No.9000226157 NP 428A













