

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 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	12/02/2018 16:04
Date Of Accident	10/02/2018 17:15
Exact Location Of Accident	ALONG WOODLANDS AVE 6 TWRDS WOODLANDS AVE 9
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GX7559A
Insured/Policyholder	
Name Of Registered Owner	3I TECHNOLOGIES PTE LTD
Co Reg No	-
Email Address	CHEEMAN@3ITECHNOLOGIES.COM
Mobile Phone No	(LOCAL) +65-93557291
Alternative Phone No	OFFICE-62626455

Vehicle Particulars

Manufacturer	NISSAN
Model	VAN
Exact Purpose for which vehicle was being used at time of accident	ON THE WAY HOME
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	GREAT AMERICAN INSURANCE COMPANY
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	MOMVC000004997-00-000
Cover Note Number	

Driver

Name of Driver	CHONG CHEE MAN
Passport No/FIN	F7616722L
Date Of Birth	12/11/1972
Occupation	INDOOR
Date Of Driving Pass	17/05/2005
Driving Experience	12 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93557291
Fax Number	
Contact Number	OFFICE-62626455
Email Address	CHEEMAN@3ITECHNOLOGIES.COM

Address	BLK 793 WOODLANDS AVENUE 6 #12-663
Postcode	730793
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	COLLISION - HEAD TO REAR
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?	YES
If Yes, Please state which Police Station	
Police Station Name	WOODLANDS EAST N.P.C
Police Station Address	ROAD: 3 WOODLANDS DRIVE 63 , POSTCODE: 737890 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180210/2150

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	FR2622B
Vehicle Make/Model/Colour	HONDA
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

SKETCH PLAN

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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:
 - (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 policyholder)
Date & Time:

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

Along Woodlands Ave to Tanagers Ave 9

A) GX 759A
B) FR 2622B

CAR PARK

PLS REFER TO POLICE REPORT
T/20180210/2150

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



Very respect,

12/02/2018
Reporting Centre Personnel's Signature
Name: *Rashid W. H. B.*
NRIC/FIN No.:



SINGAPORE POLICE FORCE



T/20180210/2150

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

1 of 3

Report No. T/20180210/2150

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/02/2018 20:08	Vide Report No.: J/20180210/0217	Station Diary No.: 177
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Informant's Particulars

Name of Informant: CHONG CHEE MAN			Address: 10 ANSON ROAD #10-06 INTERNATIONAL PLAZA SINGAPORE 079903	
ID Type / ID No.: FIN NO / F7616722L			Contact No.: Home/Office: Mobile: 93557291	
Nationality: MALAYSIAN			Email:	
Sex: Male	Age: 45	Date of Birth: 12/11/1972	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: CONSTRUCTION WORKER			Driving Licence Information: Class: 2B,3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Police Vehicle	Drink Drive: No	Date/Time of Accident: 10/02/2018 17:15	Type of Location: Straight Road
Location: Along Road 1 WOODLANDS AVENUE 6 TOWARDS WOODLANDS AVENUE 9				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control:	Traffic Volume: No Traffic	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FR2622B	Motorcycle	HONDA		Blue	Slightly Damaged	0
GX7559A	Van	NISSAN		Silver	Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20180210/2150

2 of 3

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

Report No. T/20180210/2150

CONTINUATION OF REPORT

Brief Details.

On 10/02/2018, at about 1715hrs. I was driving my van GX7559A along woodlands avenue 6, towards woodlands avenue 9. I was about to turn right into the cluster of Blk 792A Woodlands Avenue 6. I came to stop as I was waiting for the opposite traffic to be cleared. Subsequently, I heard a loud bang sound, a male riding a motorbike: FR2622B knocked onto my van. Afterwards I alighted and make a check and discovered a male was injured. Traffic Police and ambulance was at scene. The male subject was conveyed by the ambulance. I was informed to lodge a traffic accident report under IO Sharul Nizam, Tel: 65476904.



**SINGAPORE
POLICE FORCE**



T/20180210/2150

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

3 of 3

Report No. T/20180210/2150

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 Of Officer Recording The Report:

J /

LEE CHING HAO NICHOLAS

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / DDGVT /

Sr Staff Sgt MU WEI JUN

Contact No: 65476225

SN 130

Authentication Stamp

NP168

Signature :

Singapore Police Force

Signature Of Informant:

Date/Time:

10/02/2018 20:08

Classification Of Case:

ACCIDENT STATEMENT

ACCIDENT DATE: 10/02/2018 (DD/MM/YYYY), TIME: 17:15 (HH:MM)

LOCATION: Along Woodlands Ave

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: GX 7559A
 b) INSURANCE COMPANY: GAT
 c) POLICY NUMBER: _____
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: _____
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: from one 24x way home
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) (NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: 3E Tuntanogin (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 c) ADDRESS: _____

* CONTINUE TO 3. d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Chen Choke Man (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 c) ADDRESS: BK 793 Woodlands Ave 6
#12-66? 730793
 *d) DATE OF BIRTH: _____ (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES/NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES/NO)

7. a) REPORTED TO POLICE (YES/NO)

IF YES, PLEASE STATE WHICH POLICE STATION: WOODLANDS EAST MPC

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: FR 2622B MODEL: Honda
 b) DRIVER'S NAME: _____
 c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
 e) DRIVER'S NAME: _____
 f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

Email: CHEE MAN@3ITECHNOLOGIES.COM

Fax: _____

V1080

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

Employer:
3I TECHNOLOGIES PTE. LTD.

Sector: **CONSTRUCTION**

Name:
CHONG CHEE MAN

Occupation:
CONSTRUCTION WORKER

Work Permit No.
S 22055264

Date of Application:
07-12-2011

Date of Issue:
10-07-2017

Date of Expiry:
22-07-2019







L0125547

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number: **F7616722L**

Name:
CHONG CHEE MAN

Birth Date: **12 Nov 1972**

Issue Date: **14 Apr 2015**

Valid Till: **16 May 2020**





SG 50

VISIT PASS
Immigration Regulations

Name:
CHONG CHEE MAN



Date of Birth: **12-11-1972** Sex: **M** Nationality: **MALAYSIAN**

FIN: **F7616722L** Date of Issue: **10-07-2017** Date of Expiry: **22-07-2019**

YOU ARE TO SURRENDER 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

Class 2B Motorcycles ≤ 200 cc

Class 3 Motor Cars ≤ 3000 kg with ≤ 7 passengers, exclusive of the driver; and other motor vehicles ≤ 2500 kg

EFFECTIVE DATE:
17 May 2005
17 May 2005

NP 478A

Licence No: **F7616722L**



CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) Motor Vehicles (Third Party Risks and Compensation) Rules, 1950
- Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia)

Policy Details

Certificate Number	: MOMVC000004997-00-000	Cover	: Commercial Vehicle (Third Party Fire & Theft)
Policyholder Name	: 3I Technologies Pte Ltd	Chassis Number	: JN1HG2E25Z0701023
NCD Entitlement	: Nil	Engine Number	: ZD30042531
Hire Purchase	: N/A	Registration Number	: GX7559A
Period of Insurance	: From 04/07/2017 (00:00) To 03/07/2018 (23:59) (Both Dates Inclusive)		

Persons or Classes of Persons entitled to Drive

a) 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 or so has been Vehicle 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

Limitations as to Use

a) Use in connection with Policyholder's business
b) Use for carriage of passengers (other than for hire and reward) in connection with the Policyholder's business
This Policy does not cover:

a) Use for Hire and Reward
b) Use for racing, pace making, reliability trial or speed testing

* 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

Excess (Section 1)	: N/A
Excess (Section 2)	: N/A
Windscreen Excess	: N/A

Driver Details

Named Driver 01 : Any persons who is driving on the policyholder's order or with their permission

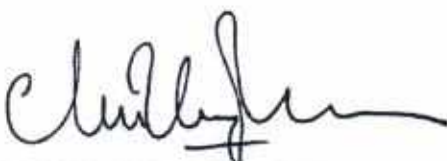
Name of Intermediary : LCH Lockton Pte. Ltd.

Date of Issue : 06/07/2017

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision 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

Great American Insurance Company



Authorised Signatory

lgph

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: MAY48021427 Vehicle Registration No: GX7559A
Name (as shown in NRIC): CHONG CHIEH MAN NRIC/FIN/Passport No: F7616722L
☒ Vehicle Driver / ☐ Vehicle Owner (*) Please delete as appropriate

Address: _____ Singapore ()

Contact (Tel): _____ Mobile No.: 93557291

Email Address: _____

Date of Accident: 10/02/2018 Time of Accident: 17:15

Place of Accident: BLK 6 WOODLANDS AVE 6 TOWARDS WOODLANDS AVE 9

Insurance Company: GREAT AMERICAN INSURANCE

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Insurance should be GREAT AMERICAN & NOT DIRECT. ASD

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name: Resdi Wongs
NRIC/FIN No.:
Date: 13/02/2018