

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	28/02/2018 10:27
Date Of Accident	27/02/2018 14:00
Exact Location Of Accident	BRADDELL ROAD BARTLEY ROAD NEAR LP- 93/1
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG6582L
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Insured/Policyholder

Name Of Registered Owner	WANXIN TRADING PTE LTD
Co Reg No	201219602e
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91702861
Alternative Phone No	Office-67444518

Vehicle Particulars

Manufacturer	NISSAN
Model	CABSTAR-3.0 5M/T ABS 2DR 2WD EURO 5 (A)
Exact Purpose for which vehicle was being used at time of accident	WORK
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1700058415
Cover Note Number	

Driver

Name of Driver	CHONG KIM SENG
NRIC No	S2193456I
Date Of Birth	07/05/1967
Occupation	OUTDOOR
Date Of Driving Pass	14/11/1988
Driving Experience	29 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91702861
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 181 AMK AVE 5 #05-2920
Postcode	560181
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	JPQ142 (MOTORCYCLE)
Number of vehicles involved in the accident	4
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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)	2
Passenger 1	Name: : SOH BOON HEE Gender: : Male

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	KEBUN BARU NPP
Police Station Address	ROAD: 111 ANG MO KIO AVE 4 , POSTCODE: 560111 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER POLICE REPORT NO : T/20180227/2151

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	YN7210U
Vehicle Make/Model/Colour	
Details Of Properties	LORRY
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	REAR DAMAGE
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GX2927D
Vehicle Make/Model/Colour	
Details Of Properties	VAN
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	SLIGHTLY DAMAGE
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	JPQ142
Vehicle Make/Model/Colour	
Details Of Properties	MOTORCYCLE
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	SERIOUSLY DAMAGE
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	UNKNOWN
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	JPQ142
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

Sketch Plan

SKETCH PLAN

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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.

萬鑫貿易有限公司
WANXIN TRADING PTE. LTD.
Company / GST Registration No: 201219602E
11 Tai Seng Drive, #05-02, GTW Building
Singapore 535226 Tel / Fax: 6744 4518

Policyholder's Signature
Date & Time:

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

28/2/2017
1000hrs

TAN CHONG MOTOR SALES-PTE LTD
17 Toa Payoh Lorong 8
Singapore 319254
Tel: 6357 0756 Fax: 6356 4922

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

APR 2017
S13381886



**SINGAPORE
POLICE FORCE**



T/20180227/2151

Police Station Of Origin:
Kebun Baru NPP
111 Ang Mo Kio Avenue 4 SINGAPORE
560111
Tel No: 1800-4589999

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Report No. T/20180227/2151

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/02/2018 18:29	Vide Report No.:	Station Diary No.: 38
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Informant's Particulars			
Name of Informant: CHONG KIM SENG		Address: APT BLK 181 ANG MO KIO AVENUE 5 #05-2920 SINGAPORE 560181	
ID Type / ID No.: NRIC NO / S2193456I		Contact No.: Home/Office: Mobile: 91702861	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 50	Date of Birth: 07/05/1967	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: Delivery driver		Driving Licence Information: Class: 3,4 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 27/02/2018 14:00	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 BRADDELL ROAD BARTLEY ROAD near LP 93/1				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBG5743X	Lorry				No Damage	0
GBG6582L	Lorry				Slightly Damaged	1
GX2927D	Van				Slightly Damaged	0
JPQ142	Motorcycle				Seriously Damaged	0
YN7210U	Lorry					0

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20180227/2151

Police Station Of Origin:
Kebun Baru NPP
111 Ang Mo Kio Avenue 4 SINGAPORE
560111
Tel No: 1800-4589999

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Report No. T/20180227/2151

CONTINUATION OF REPORT

Brief Details.

On 27/2/2018 at about 1400hrs, when I was driving my lorry GBG6582L along Braddell Road towards Bartley Road near to lamp post 93/1, a van GX2927D in front of my suddenly jammed brake and I was unable to stop in time and collided into his vehicle. Subsequently, a motorcycle JPQ142 collided into my vehicle from the rear.

I got down my lorry and found out that there are 2 more vehicles in front. Some items dropped out of the first vehicle, GBG5743X, causing a chain collision involving 4 vehicles, YN7210U, GX2927D, my vehicle GBG6582L and a motorcycle JPQ142. To my understanding, only the motorcyclist was injured and he was conveyed to a hospital by ambulance at scene. My lorry suffered some dents at the front and rear area. TP office was also at scene, reference to E/20180227/0106.

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180227/2151

Police Station Of Origin:
Kebun Baru NPP
111 Ang Mo Kio Avenue 4 SINGAPORE
560111
Tel No: 1800-4589999

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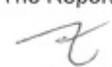
Report No. T/20180227/2151

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: ^{SN 085} F /  Sgt 2 JAYZ TAN ZHANG JIE Signature: 	Signature Of Informant: 
Signature Of Interpreter: Police Force Not applicable	Date/Time: 27/02/2018 18:29
Officer In Charge Of Case: TP / GIT / SI THABAGESH JEYATHESH Contact No.: 65476232	Classification Of Case:

Authentication Stamp
NP168

Accident Photo



Accident Photo



Accident Photo



Driving License



Accident Photo



Accident Photo

