MANC18043716 / Auto N Cars Services Pte Ltd - HQ
ENTRY DATE & TIME: 02/04/2018 15:33
SUBMITTED BY: Jaden Choo Jing Tong

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 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.

ACCIDENT STATEMENT

Date Of Report	02/04/2018 15:33
Date Of Accident	02/04/2018 06:40
Exact Location Of Accident	ALONG SLE TOWARDS BKE AFTER WOODLAND AVE 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG7055K

Insured/Policyholder

Name Of Registered Owner	BACHY SOLETANCHE SINGAPORE PTE LTD
Co Reg No	198205162Z
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-65381715

Vehicle Particulars

Manufacturer	ISUZU
Model	TFR86JSR-2.5 D (M)
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCPHQ17-005633
Cover Note Number	

Driver

Name of Driver	WONG WEE HEONG
NRIC No	S1292305H
Date Of Birth	15/09/1958
Occupation	OUTDOOR
Date Of Driving Pass	07/10/1977
Driving Experience	40 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97574104
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 138 RIVERVALE ST #16-758 S(540138)
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	- - -

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?	YES
Was any injured conveyed to hospital by ambulance?	NO
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 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	SKP4571C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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.

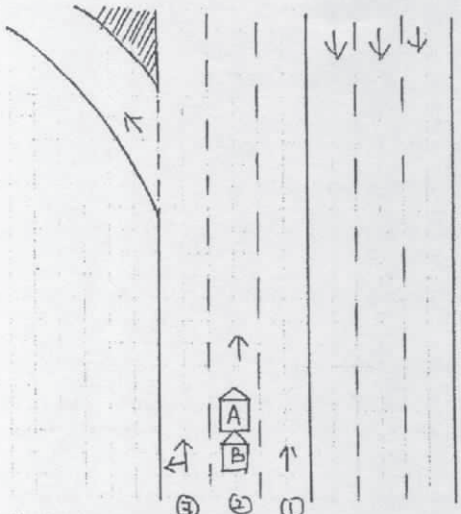
   (e) the information so collected under (d) above may be shared / disclosed:

   (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.

Policyholder's Signature Date & Time: 2-4-18 11:18 AM	Driver's Signature (If driver is not the policyholder) Date & Time: 2-4-18 11:18 AM	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

SKETCH PLAN



(A) GBG 7055K

(B) SKP 4571C.

Along SLE Towards BKE (After Woodlands Ave 2).

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 02-04-2018 @ about 0640hrs, I was driving my company lorry (GBG 7055K) along SLE Towards BKE (After woodlands Ave 2) in middle lane. Vehicle infront of me stopped, so i slow down and stop in time too. Suddenly i felt an impact from behind, whom i come out to inspect my lorry and i realized that, Veh B (SKP 4571C) did not stop in time and collided onto rear portion of my lorry. Hence, I hereto lodge this report to claim against Veh B (SKP 4571C)'s insurance for my accident damages. I will go to see doctor if i feel any uncomfortable after this.

DECLARATION

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

Policyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
Date & Time: 2-4-18 11:18 AM	(If driver is not the policyholder) Date & Time: 2-4-18 11:18 AM	Name: NRIC/FIN No.:

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	5162Z
Vehicle Details	
Vehicle No.:	GBG7055K
Vehicle to be Exported:	No
Intended De-registration Date:	23 Apr 2018
Vehicle Make:	ISUZU
Vehicle Model:	TFR86JSR
Primary Colour:	White
Manufacturing Year:	2017
Engine No.:	RR8143
Chassis No.:	MPATFR86JHT002641
Maximum Power Output:	-
Open Market Value:	$26,823.00
Original Registration Date:	03 Oct 2017
First Registration Date:	03 Oct 2017
Transfer Count:	0
Actual ARF Paid:	$1,342.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	$0.00
Intended COE Rebate Details	
COE Expiry Date:	02 Oct 2027
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	$42,809.00
COE Rebate Amount:	$40,418.00
Total Rebate Amount:	**$40,418.00**

The information contained herein is correct as at 23 Apr 2018

OK