

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	16/04/2018 19:31
Date Of Accident	14/04/2018 11:00
Exact Location Of Accident	CLEMENTI AVENUE 6 TUNNEL(SUBWAY)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GW4133U
Insured/Policyholder	
Name Of Registered Owner	GARDENIA FOODS (S) PTE LTD
Co Reg No	197801714R
Email Address	CHENGKIMKOON@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-94572866
Alternative Phone No	OFFICE-94572866

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA 150 D-3.0 D (M)
Exact Purpose for which vehicle was being used at time of accident	DOING DELIVERY
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	B 29068719 MFK
Cover Note Number	

Driver

Name of Driver	CHENG KIM SON
NRIC No	S1607299J
Date Of Birth	26/05/1963
Occupation	OUTDOOR
Date Of Driving Pass	02/09/1988
Driving Experience	29 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94572866
Fax Number	
Contact Number	OTHERS-94572866
Email Address	CHENGKIMKOON@YAHOO.COM.SG

Address	BLK 611 ANG MO KIO AVENUE 5 #06-2803
Postcode	560611
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	NO COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
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

PLEASE 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	SJA9161K
Vehicle Make/Model/Colour	AUDI
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LIU CHENG ZHI
NRIC/Passport Number	S2690203G
Contact Number	96787976
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	3

SKETCH PLAN

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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:

NRIC/FIN No.:

UNKNOWN HOW THE
INCIDENT

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 14th April 2018 @ 11:10am. a man name
Lui Cheng Zhi driver of vehicle no SJA 9161 K.
He approached me by stopping his vehicle into my
lane at the outside of Japanese School Secondary
(Singapore)
He claimed that my vehicle collided his vehicle
which I was not aware of it.
He further mentioned the collision happened at
the Clementi Ave 6 subway and that location
there was road works at the left lane. He
cited the accident happened when I switch from
left to right lane. The collision resulted scratch
marks on the left front portion.

DECLARATION

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

GARDENIA FOODS (S) PTE LTD

Policyholder's Signature
Date & Time:

16/4/2018 11:05pm
Driver's Signature
(If driver is not the policyholder)
Date & Time:

16/04/2018
Reporting Centre Personnel's Signature
Name: Rosalyn
NRIC/FIN No.:

ACCIDENT STATEMENT

ACCIDENT DATE: 14/04/2018 (DD/MM/YYYY), TIME: 11:00 (HH:MM)

LOCATION: CLIMENTI AVE 6 Subway

1. DETAILS OF VEHICLE

a) VEHICLE NUMBER: GW 41334
 b) INSURANCE COMPANY: MSIG
 c) POLICY NUMBER: B 290 68719 MRF
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: TOYOTA DYNA 1500
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: DELIVERY goods
 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: GARDENIA EOODS (15) P/L (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 19801714R CONTACT:
 c) ADDRESS: company registration: A01714/1978R

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

a) NAME: CHENG KIM SON (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S1607299/J CONTACT: 94572866
 c) ADDRESS: 516041, ANG MO KIO AVE 5 #06-2812
S156041)

* d) DATE OF BIRTH: 26/05/1963 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS

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

8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: STA 9161K MODEL: AU31
 b) DRIVER'S NAME: LIM CHENG ZHI
 c) NRIC/FIN/PASSPORT: S2690203G CONTACT: 96787976

9. THIRD PARTY VEHICLE

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

* No of passenger
 (including driver)
(1)

* No of passenger
 (including driver)
(3)

* No of passenger
 (including driver)
()

Email = chengkimson@yahoo.com.sg

Fax =

VIDEO =

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1607299J



Name
CHENG KIM SON

鍾金生

Race
CHINESE

Date of birth
26-05-1963

Country/Place of birth
SINGAPORE

Sex
M

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S1607299J

Name
CHENG KIM SON

Birth Date: 26 May 1963

Issue Date: 04 Sep 2009



5455267



NRIC No: S1607299J



Date of issue
16-04-2015

Address
APT BLK 611 ANG MO KIO AVENUE 6
#06-2803
SINGAPORE 560611

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2000kg

PASS DATE
02 Sep 1963

Licence No: S1607299J



**MSIG****MSIG Insurance (Singapore) Pte. Ltd.**

4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807

Tel +65 6827 7888, Fax +65 6827 7800

Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

Certificate of Insurance

ROAD TRANSPORT ACT 1987 (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 RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)

OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.2.300

Goods Carrying Vehicle - Sch I

COMMERCIAL VEHICLE - FLEET**Third Party**

Certificate No. B 29068719 MKF

1. Index Mark and Registration Number of Vehicle

GW4133U

2. Name of Policyholder

Gardenia Foods (S) Pte Ltd

3. Effective Date of the Commencement of Insurance for the purposes of the Act

01/01/2018

4. Date of Expiry of Insurance

31/12/2018

5. Persons or Classes of Persons entitled to drive*

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

* Provided that the person driving is permitted in accordance with the licensing or other laws or 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.

6. 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

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

* 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.

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

I/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) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurers

for Chief Executive Officer

VEHICLE REGISTRATION CARD

REPUBLIC OF SINGAPORE

REGISTRATION NO: GW4133U

Name of Owner
GARDENIA FOODS (S) PTE LTD

Address
150 SOUTH BRIDGE ROAD
#09-04
FOOK HAI BUILDING
SINGAPORE 058727

NRIC/Passport/Company Cert. No.: A01714/1978R
Effective Date of Ownership: 27/06/2003
Yr of Manufacture: 2003
Class: GOODS (CLOSED)
Body: VAN
Make: TOYOTA
Model: DYNA 150 D
Colour: WHITE
Passenger-Cap: 001
Chassis No: JTFUF34Y203001240
TR Chassis: 5L5336254
Engine No: 02986
Engine Cap: DIESEL
Propellant: 02200
Unladen Wt: 0003500
Max Laden Wt: 27/06/2003
Original Regn Date: 27/06/2003
Registration Date: 23726
OMV (\$): 005
Additional Regn Fee (%): NOT APPLICABLE
PARF Eligibility:

PARF Benefit (\$): 0
No. of Transfers: 00
Previous Ownership Dates:

IU Label: 1041832030
Card Serial No: 204758578 / 03
Printing Date: 17/07/2003

COE NO : 2003050105000807E
Vehicle Category : C
Quota Premium : \$ 11113
COE Expiry Date : 26/06/2013

TO REVALIDATE THE COE, THE
PREVAILING QUOTA PREMIUM
PAYABLE IS THAT OF
CATEGORY C