

## 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	21/05/2018 13:35
Date Of Accident	19/05/2018 14:10
Exact Location Of Accident	UPP.PICKERING ST
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG7777K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	WINSTON MACHINE LAUNDRY SERVICE
Co Reg No	0
Email Address	LAUNDRY@DRY.SG
Mobile Phone No	
Alternative Phone No	OFFICE-68629950

### Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE-3.0 D DX (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	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	ERGO INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCV17S017802
Cover Note Number	

### Driver

Name of Driver	XIN FENG
Passport No/FIN	G3006846M
Date Of Birth	23/10/1982
Occupation	OUTDOOR
Date Of Driving Pass	10/03/2014
Driving Experience	4 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98824781
Fax Number	
Contact Number	
EEmail Address	FENGXIN389@GMAIL.COM

Address	BLK111 TOA PAYOH LORONG 1 #02-352
Postcode	318111
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	RAINING
Road Surface	WET

#### 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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO REPORT ATTACHED

#### 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	SKZ3464H
Vehicle Make/Model/Colour	TOYOTA
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



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

2018年5月19日下午14时10分时，天下着大雨我驾着4B4 TTTTK  
 号牌车从珍珠坊出来沿着东旋街直行拐源海湾方向十  
 字时前面的SKZ3464H号牌车突然急刹车，看到前面车猛然  
 刹车我也采取了刹车，可是由于他没有预兆的刹车，以及大雨  
 导致路面雨水太多，以致于刹车打滑使我车左前角碰上前车  
 (SKZ3464H)的右后角，前车的保险杠在右后角尾灯连接处  
 稍微裂隆。

DECLARATION

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

Policyholder's Signature  
 Date & Time:



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

*[Handwritten signature]*

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

*[Handwritten signature]* - 21/5/18

SKETCH PLAN

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5. Any false reporting may be referred to the Police for investigation.
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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.



*[Handwritten Signature]*

*[Handwritten Signature]* 21/5/18

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.:



970 Toa Payoh North 01- 12/14 Singapore 318992

6862 9950

laundry@dry.sg

**Letter of Authorize**

21<sup>th</sup> May 2018

ComfortDelgro Engineering

Dear Sir/Madam,

RE: Mr Xin Feng WP No: 0 7598524-

Please grant him for the Submission of the Accident Report.

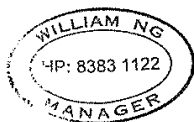
Hereby Authorize him to submit the report by himself.

Thank you.


If you have any questions, you can contact the undersigned.

Thank you.

Yours faithfully,




**REPUBLIC OF SINGAPORE DRIVING LICENCE**



Licence Number: **G 3 0 0 6 8 4 6 M**  
 Name: **XIN FENG**


Birth Date: **23 Oct 1982**  
 Issue Date: **10 Mar 2014**  
 Valid Till: **09 Mar 2019**

002282616J




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

Employer: **BEST LAUNDRY & DRY CLEANING**  
 Sector: **SERVICE**



Name: **XIN FENG**  
 Occupation: **OPERATIONS EXECUTIVE**

S Pass No. **0 7 5 9 8 5 2 4 -**  
 Date of Application: **05-07-2017**  
 Date of Issue: **14-07-2017**  
 Date of Expiry: **14-07-2019**



**L 8 1 2 5 8 7 1**

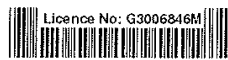
**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)**

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

EFFECTIVE DATE

10 Mar 2014

NP 428A



**VISIT PASS**  
 Immigration Regulations

Name  
**XIN FENG**



Date of Birth: **23-10-1982** Sex: **M** Nationality: **CHINESE**  
 FIN: **G3006846M** Date of Issue: **14-07-2017** Date of Expiry: **14-07-2019**

**MULTIPLE JOURNEY VISA ISSUED**

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





CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1966  
ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1969 (MALAYSIA)

CERTIFICATE NO. DMCV17S017802	C17069503
Type of CI: Commercial Vehicle	
Cover: Comprehensive	A000606 HONG WEI VEHICLE PTE LTD
1) Registration No. of Vehicle:	GBG7777K
2) Name of Policyholder:	WINSTON MACHINE LAUNDRY SERVICE
3) Commencement Date of Insurance:	30/08/2017
4) Expiry Date of Insurance:	29/08/2018
5) Persons or Classes of Persons entitled to drive	
1) Any person who is driving on the Policyholder's order or permission	
Excess (Section 1) : \$5700.00	
Windscreen - Below 10 tons : \$5100.00	
Windscreen - 10 tons & above : \$5200.00	
Young & Inexp Drivers(Section 1) : \$52,500.00	
6) Name of Finance Company/Hire Purchase Owner: MERCEDES-BENZ FINANCIAL SERVICES SINGAPORE LTD	
7) 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.	
8) Limitations as to Use	
(1) Use in connection with the Policyholder's business	
(2) Use for carriage of passengers (other than for hire or reward) in connection with the Policyholder's business	
(3) Use for social domestic and pleasure purposes	
This Policy does not cover	
(1) Use for hire or reward, 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 (for Items 7 & 8).	

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).

For and on behalf of  
ERGO Insurance Pte. Ltd.  
(Approved Insurer)

AUTHORIZED SIGNATURE

jenny\_toh/31/08/2017 14:32:05

Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo

