

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	28/06/2018 15:51
Date Of Accident	28/06/2018 09:50
Exact Location Of Accident	TELOK PAKU ROAD TOWARDS LOYANG AVENUE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP2249G
Insured/Policyholder	
Name Of Registered Owner	SINNWANNG EXPRESS ENTERPRISE PTE LTD
Co Reg No	201112096W
Email Address	SINNWANNG@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-81558563
Alternative Phone No	OFFICE-67463476

Vehicle Particulars

Manufacturer	ISUZU
Model	NNR85UH4A-3.0 D (M)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN1728071801
Cover Note Number	

Driver

Name of Driver	FENG FEI
NRIC No	G3457351X
Date Of Birth	06/10/1990
Occupation	OUTDOOR
Date Of Driving Pass	28/01/2013
Driving Experience	5 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81558563
Fax Number	
Contact Number	OFFICE-67463476
Email Address	SINNWANNG@SINGNET.COM.SG

Address	BLK 4008 ANG MO KIO AVENUE 10 #01-02/03 TECHPLACE 1
Postcode	509025
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	SIDE SWIPE
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)	2
Passenger 1	NAME: : RAJ GENDER: : MALE

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	SG5551G
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)	

Accident Sketch Plan

SKETCH PLAN

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B. 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.



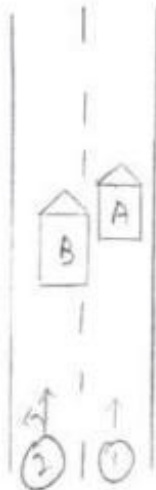
Policyholder's Signature
Date & Time:

for [signature]
Driver's Signature
(if driver is not the policyholder)
Date & Time:

28 Oct 2018
Reporting Centre Personnel's Signature
Name: *Reski Wintan*
NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN



A = YP2249G

B = SG5551G

Telok Paku Road
towards Loyang Avenue

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to attach

DECLARATION

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

Policyholder's Signature
Date & Time:



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

Longfei

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


28/06/2018
Posh Watson

ATTACHMENT

On 28.06.18 at about 09:55hours along Telok Paku Road towards Loyang Avenue. I was travelling straight on the lane 1, suddenly I heard a bang from behind. When I alighted I realised it was vehicle (B) had hit onto rear left hand side portion of my vehicle (A). I wish to state that I have 1 passenger inside my vehicle (A).

Vehicle (A): YP 2249G

Vehicle (B): SG 5551G

Handwritten signature 

28/06/2018
Rafli w...

ID

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

Employer:
SUNWANG EXPRESS ENTERPRISE PTE. LTD.

 Name:
FENG FEI
S Pass No.:
D 7702443-
Sector:
SERVICE



 K0287851

YP2249 G

driver

VISIT PASS
Immigration Regulations

Name:
FENG FEI

ICN:
034573514

Date of Birth:
08-10-1990

Sex:
M

Nationality:
CHINESE





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.



Download SGWorkPass App to check status

16-04-2018

DRIVING LICENCE

Transmart Consultancy Pte Ltd

BUSINESS REG NO.: 201726727G

196 Pandan Loop #02-05

Paritech Business Hub

Singapore 128364

Tel: 65471088

Email: transmartconsultancy@gmail.com

TRANSLATION

THE PEOPLE'S REPUBLIC OF CHINA

DRIVING LICENCE

LICENCE NO. 320623199010061513

Name FENG FEI Gender Male Nationality Chinese National

Address No. 305, Group 22, Zhimawa Village, Daya Town, Rudong County, Jiangsu Province

TRAFFIC POLICE DETACHMENT,
PUBLIC SECURITY BUREAU OF
NANTONG CITY, JIANGSU PROVINCE

Date of Birth 06 October 1990

Date When Licence First Obtained 28 January 2013

Licensed to Drive Vehicles in Code (s) C1

[Photograph Affixed]

Valid from 28 January 2013 to 28 January 2019

This is a translation by

Interpreter & Translator
TENG JIAHUA

Date 04 APR 2018

DRIVING LICENCE


DRIVING LICENCE CLASS CODES

A1	Large Buses and A3, B1, B2	C4	Tri-wheel Vehicles
A2	Towing Vehicles and B1, B2	C5	Small Automatic Cars for Handicaps Only
A3	Urban Public Transport and C1	D	Ordinary 3-wheel motorcycles and E
B1	Medium Buses and C1, M	E	Ordinary 2-wheel motorcycles and F
B2	Large Trucks and C1, M	F	Light Motorcycles
C1	Small Cars and C2, C3	M	Self-propelled Wheeled Machinery
C2	Small Automatic Cars	N	Trolleybuses
C3	Low-speed Goods Vehicles and C4	P	Tramcars

[BARCODE]
3270020198844

No other unit or person except the public security traffic control authority shall retain this licence

This is a translation by


Interpreter & Translator
TENG JIAHUA

Date: 04 APR 2018

DRIVING LICENCE

SUPPLEMENTARY PAGE OF DRIVING LICENCE OF THE PEOPLE'S REPUBLIC OF CHINA

LICENCE NO. 320623199010061513

Name FENG FEI File Number 320602013861

Record Probation period until 27 January 2014

Record _____

This is a translation by



Interpreter & Translator
TENG JIAHUA

Date: 04 APR 2018

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

