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 <u>truthful and accurate</u> 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

By the lodgement of this report to the insurers, you hereby consaforesaid.	sent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	19/07/2018 11:33
Date Of Accident	28/05/2018 12:15
Exact Location Of Accident	BACK ALLEY OF 7 WOODLANDS SECTOR 1
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	YM9972X
Insured/Policyholder	
Name Of Registered Owner	SEE HO PTE LTD
Co Reg No	200311235E
Email Address	APRYL.SEEHO@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-62570633
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	FE83BEOSRDEA-3.0 D B31 (A)
Exact Purpose for which vehicle was being used at time of accident	PARKING
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	ALLIED WORLD ASSURANCE COMPANY, LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	AVCPSB0084961801
Cover Note Number	
Driver	
Name of Driver	ZHAO YANWEI

Name of DriverZHAO YANWEPassport No/FING8173624WDate Of Birth15/12/1968OccupationOUTDOORDate Of Driving Pass22/01/2009

Driving Experience 9 YEARS AND 4 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91556771

Fax Number

Contact Number

EMail Address NOEMAIL

Address 7 WOODLANDS SECTOR 1

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 HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

NO

Weather Conditions CLEAR
Road Surface WET

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?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 0

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

POLICE STATION NAME [OTHER] SEMBAWANG NPC

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER ATTACHED SKETCH PLAN & POLICE REPORT

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? YES
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number XB7886U

Vehicle Make/Model/Colour MITSUBISHI / UNKNOWN / WHITE

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver UNKNOWN

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 16

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts
 may allow insurance companies to <u>repudiate policy liability</u>.
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- 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.
- 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 detention, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insureres 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 requirments under any regulations, laws or court orders.

Policyholder's Signature

Driver's Signature (if driver is not the policyholder)

Date & Time 19/07/2018

Reporting Centre Personnel's Signature Name: Vo Yung Khay NRIC / Fin No.: G 2638977

DIMEDRIDELGRO ENGINEERING PTE L

EL 6338 8778 FAX: 6262 6950

45 PANDAN ROAD 19/7/18

Page 5

, SKETCH PLAN	
SEEHO	
A = /m9972x	
B=XB7886U	A
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	
我的来们当使待近在公司经卷,	被电码的多数的多数
倒,玻璃净路的粉层。但是事(引和战争等事务是精
50	
IMPORTANT NOTE	
Under General Condition – Conduct of Claim of the Motor Policy, you have to or discovery of damage whether or not to claim under the policy. Please check y	decide within 21 days of occurrence our policy for more information.
DECLARATION	WARRING AND THE STREET AND THE STREE

Policyholder's Signature
Date & Time

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

particulars are true in every respect.

MEDRIDELGRU ENGINEERING PTE, LI, 45 PANDAN ROAD 19/7/18. SINGAPORE 609286 19/7/18. FEL 6338 8778 FAX: 6262 6950

Reporting Centre Personnel's Signature
Name: Vo Ywy Khory
NRIC / Fin No.: G 26389777.

Page 6

COMMERCIAL VEHICLE (SCH 1)

CERTIFICATE OF INSURANCE

MZ300/C R SB M0E729S

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP 189) OF THE REPUBLIC OF SINGAPORE
THE ROAD TRANSPORT ACT 1987 OF MALAYSIA

THE AGREEMENT BETWEEN THE MINISTER FOR FINANCE (SINGAPORE) AND THE MOTOR INSURERS' BUREAU OF SINGAPORE DATED 22 FEBRUARY 1975
THE AGREEMENT BETWEEN THE MINISTER OF TRANSPORT (HALAYSIA) AND THE MOTOR INSURERS' BUREAU OF WEST MALAYSIA DATED 15 JANUARY 1968 Cov.Type: C KUKSBSB

ANY SUBSEQUENT REVISIONS TO THE ABOVE ACTS AND AGREEMENTS

CERTIFICATE No.

AVCPSB0084961801

ChaNo:FE83BEA11240

1. Index Mark and Registration

YM 9972 X

Number of Vehicle

SEE HO PTE LTD

2. Name of Policyholder

24 February 2018

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

23 February 2019

- 4. Date of Expiry of Insurance
- 5. Persons or Classes of Persons entitled to drive" (For certificate references MX1 and MX4, see overleaf) ANY PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH THEIR PERMISSION.

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

- 6. Limitations as to Use* (For certificate reference MX1, see overleaf)
- A. USE IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.
- B. USE FOR THE CARRIAGE OF PASSENGERS (OTHER THAN FOR HIRE OR REWARD) IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.
- C. 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.

Estimated Value

: MARKET VALUE WITH COE/PARF

Hire Purchase Owner : Type of Cover

: Comprehensive

Limitations rendered inoperative by Section 79 of the Road Traffic Ordinance 1958 (Malaysia) or Section 7 of the Motor Vehicle (Third-Party Risks and Compensation) Ordinance 1960 (Republic of Singapore) are not to be included under the headings.

I/WE HEREBY CERTIFY that the policy to which this certificate relates is issued in accordance with the provisions of Part IV of the Road Transport Act 1987 (Malaysia) and The Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Republic of Singapore)



Evanimed By

Approved Insurers

Ţ

S PASS

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

Employer SEE HO PTE, LTD.

Sector: CONSTRUCTION Name

ZHAO YANWEI

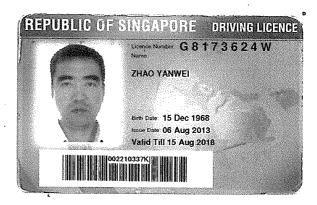
Occupation
QUALITY ASSURANCE & QUALITY CONTROL MANAGER

S Pass No. O 72065654 (-)

Date of Application 24-03-2016 Date of Issue

Date of Issue 16-04-2016 Date of Expry 15-04-2019

L6716479



VISIT PASS Immigration Regulations

ZHAO YANWEI

ď,

15-12-1968 M FIN Date of Issue

CHINESE

G8173624W 20-04-2016

Date of Expiry

MULTIPLE JOURNEY VISA ISSUED

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSI.

EFFECTIVE DATE

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

Class 4 Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg

'Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg

NP 428A





Police Station Of Origin: Sembawang N.P.C 4 Sembawang Crescent SINGAPORE

1 of 3 Report No. T/20180528/2128

757633 Tel No: 1800-5549999

REPORT OF A TRAFFIC ACCIDENT

Date/Time 28/05/2018		/lade:	Vide Report No.:	Station Diary No.: 54	
Informant	's Partic	ulars			
Name of Ir OOI CHUN			Address: 23 JALAN SENDUDOK SINGAPORE 769457		
ID Type / I NRIC NO		58F	Contact No.: Home/Office:	Mobile: 96864791	
Nationality: SINGAPORE CITIZEN		EN	Email:		
Sex: Male	Age: 41	Date of Birth: 02/02/1977	Type of Informant: Manager of company		
Race: Chinese			Language:	Institution / School Name:	
Occupation: Building and construction project manager		uction project	Driving Licence Information: Class:	Date of Expiry:	

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 28/05/2018 12:15	Type of Location: Bend
Location: Along Road 1 WOODLAND:				·
Weather: Clear	r woodiands Sector 1	Road Surface: Dry	F	Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled	1.3	Traffic Volume: Moderate
Type of Collis Moving Vehic	ion: le Against - Parked Ve	hicle	a	Anyone conveyed by ambulance:

Details of V	ehicle Involved					
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
XB7886U	Lorry			White		0
YM9972X	Lorry			White	Slightly	0
					Damaged	

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

Sketch Plan Pg. 6



T/20180528/2128

Police Station Of Origin: Sembawang N.P.C 4 Sembawang Crescent SINGAPORE 757633

Report No. T/20180528/2128

Tel No: 1800-5549999

CONTINUATION OF REPORT

Company manag	er					
Name	OOI CHUN HOE			ID No		S7770358F
Related Vehicle	NIL			Conta	ct No.	96864791
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g ce &	Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL		Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	

Brief Details.

I am the project manager for See Ho Private Limited.

On 28/05/18 at about 1600hrs, one of my worker approached me and informed me that the company's lorry YM9972X was hit and requested me to review the CCTV. As such, I retrieved the CCTV footage and discovered that on 28/05/18 at about 1214hrs, a lorry XB7886U tried to reverse and leave the back aliey along woodlands walk and the lorry hit onto the front right side of my company's lorry parked at the side of woodlands walk. The windscreen of my lorry cracked, and there are dents and scratches.

I was told by my company to lodge a report for insurance claim.

Sketch Plan Pg. 7





Police Station Of Origin: Sembawang N.P.C 4 Sembawang Crescent SINGAPORE 757633 Tel No: 1800-5549999

3 of 3 Report No T/20180528/2128

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 Recordii F / Sgt 2 GOH GEK LING	ng The Report:	Signature Of Informant:	
Signature Of Interpreter: Not applicable		Date/Time: 28/05/2018 19:58	***************************************
Officer In Charge Of Case:		Classification Of Case:	***************************************
Sr Staff Sgt TAN JEOK LENG Contact No.: 65476144	h (Sh 085	
Authentication Stamp NP168	Nijelje Signature	3:	
	Singapore Police	Force	







