

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	24/07/2018 16:05
Date Of Accident	10/07/2018 16:45
Exact Location Of Accident	ALONG BT BATOK EAST AV3 SLIP RD INTO BT BATOK AV6
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YM8123L
Insured/Policyholder	
Name Of Registered Owner	REDINA TRADING PTE LTD
Co Reg No	198500662C
Email Address	CYNDDY.CHUA@REDINAGROUP.COM
Mobile Phone No	
Alternative Phone No	OFFICE-66653922

Vehicle Particulars

Manufacturer	ISUZU
Model	NPR85LU5Y-3.0 D (M)
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	
Cover Note Number	

Driver

Name of Driver	YU FEI FEI
NRIC No	G5067992L
Date Of Birth	17/12/1983
Occupation	OUTDOOR
Date Of Driving Pass	05/11/2012
Driving Experience	5 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88229177
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLOCK 15 WOODLANDS LOOP #03-12
Postcode	738322
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	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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: : ZHU ZU QIANG GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	BUKIT BATOK NPC - PLEASE REFER TO THE ATTACHED POLICE REPORT
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

Please refer to the attached Police Report and the accident details

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	SHB7513K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	CHAN LAY WENG
NRIC/Passport Number	S1423194C
Contact Number	90286286
Address	
Postcode	
Insurance Company Name	

Nature Of Damage
No. Of Passenger (Including Driver) 2
Passenger 1
NAME: :
GENDER: :

DETAILS OF INJURED PERSON 1

Name NOT AVAILABLE
Approximate Age
Injuries Sustain
Injured person in which vehicle? SHB7513K
Were seat belts worn?
Was this injured conveyed to hospital by ambulance? YES
Address
Postcode

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:

Y. J. J. 24/1/18

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

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

SKETCH PLAN

Refers Delta Report

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to the attached Delta Report T/20180710/2165 dtd. 10/01/2018

One passenger in my vehicle.

Zhu Zu Qiang (male)

DECLARATION

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

Policyholder's Signature
Date & Time:

Yu Fei Fei 24/7/18
Driver's Signature
(If driver is not the policyholder) 14:50 pm
Date & Time:

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



**SINGAPORE
POLICE FORCE**



T/20180710/2165

Police Station Of Origin:
Bukit Batok N.P.C
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999

1 of 3

Report No. T/20180710/2165

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/07/2018 18:29	Vide Report No.: J/20180710/0168	Station Diary No.: 146
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Informant's Particulars

Name of Informant: YU FEIFEI			Address: APT BLK 15 WOODLANDS LOOP #03-12 SINGAPORE 738322		
ID Type / ID No.: NRIC NO / G5067992L			Contact No.: Home/Office: Mobile: 88229177		
Nationality: CHINESE			Email:		
Sex: Male	Age: 34	Date of Birth: 17/12/1983	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation: DELIVERY AT REDINA TRADING PTE LTD			Driving Licence Information: Class: 3,4,5 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 10/07/2018 16:45	Type of Location: X-Junction
Location: Along Road 1 BUKIT BATOK EAST AVENUE 3 ALONG BT BATOK EAST AVE 3, SLIP ROAD INTO BUKIT BATOK EAST AVE 6				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHB7513K	Car				Slightly Damaged	1
YM8123L	Lorry				Slightly Damaged	1

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20180710/2165

2 of 3

Police Station Of Origin:
Bukit Batok N.P.C
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999

Report No. T/20180710/2165

CONTINUATION OF REPORT

Driver			
Name	CHAN LAY WENG		ID No. S1423194C
Related Vehicle	SHB7513K (Car)		Contact No. 90286286
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	YU FEIFEI		ID No. G5067992L
Related Vehicle	YM8123L (Lorry)		Contact No. 88229177
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3,4,5 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 10/07/2018 at about 1646hrs, I was driving my vehicle lorry V1) YM8123L along Bt Batok East Ave 3 and turning left to Bt Batok East Ave 6 at the junction slip road. I had a glanced on the right for the oncoming traffic and inched forward. However, I took a second glance on the right again to be sure of no traffic and proceeded to accelerate. While accelerating, I felt an impact on the rear of V1. I alighted from my vehicle and discovered that vehicle V2) SHB7513K which was behind V1, it's front bumper had collided to the rear of V1. There was a passenger in V2 and she had a visible bleeding on her nose. The driver of V2, the passenger of my vehicle V1 and I do not have any visible injury. Ambulance and Traffic Police were called in and the passenger of V2 was conveyed to hospital. There were dents on V2's front bumper and boot, and dents on V1's rear tail guard. I exchanged particulars with the driver of V2 and we took photos of the incident. I was told by the traffic police at scene to lodge a traffic accident report.



**SINGAPORE
POLICE FORCE**



T/20180710/2165

Police Station Of Origin:
Bukit Batok N.P.C
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999

3 of 3

Report No. T/20180710/2165

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.

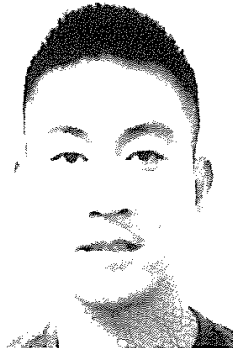
Signature Of Officer Recording The Report: J / Sgt 2 TAN WEI KANG	Signature Of Informant: Yu Feifei
Signature Of Interpreter: Not applicable	Date/Time: 10/07/2018 18:29
Officer In Charge Of Case: TP / GIT / Sr Staff Sgt RAZIZ BIN TAHAR Contact No.: 65476200	Classification Of Case:
Authentication Stamp NP168	

Identity Card Pg. 1



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

Employer
REDINA TRADING PTE LTD



Name
YU FEIFEI

Work Permit No.
0 74172091

Sector:
SERVICE



K0382485

VISIT PASS

15-05-2018

Immigration Regulations

Name
YU FEIFEI

FIN
G5067992L

Date of Birth Sex
17-12-1983 M

Nationality
CHINESE

MULTIPLE JOURNEY VISA ISSUED



Download SGWorkPass
App to check status




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




REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **G 5067992 L**
Name: **YU FEI FEI**

Birth Date: **17 Dec 1983**
Issue Date: **09 Oct 2017**
Valid Till **04/11/2022**





8822 9177

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

		EFFECTIVE DATE
Class 3	Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg	05 Nov 2012
Class 4	Motor vehicles which are constructed to carry load or passengers and the unladen weight $>$ 2500kg	14 Jun 2014
Class 5	Motor vehicles which are not constructed to carry load or passengers and the unladen weight \leq 7250kg	08 Sep 2014
	Motor vehicles not constructed to carry any load and the unladen weight $>$ 7250kg	

NP 428A



Certificate of Insurance Pg. 1

24/07 2018 TUE 14:41 FAX +65 65643751

0001/001

EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110
tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg
reg no. 1978-00490-N



CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1969 (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 RISKS AND COMPENSATION) RULES 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

COMMERCIAL VEHICLE PRIVATE (SCH I)

Third Party, Fire & Theft

Certificate No. : DMCPHQ18-000548

1. Index Mark and Registration Number of Vehicles

YM8123L

198500662C

2. Name of Policyholder

Redina Trading Pte Ltd

66653922

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

01/03/2018

4. Date of Expiry of Insurance

28/02/2019

Cynddy. Chua @ redinagroup.com

5. Person or Classes of persons entitled to drive*

Goods carrying - (MZ300) Authorised Driver.

Any of the following :-

1. The Policyholder
2. Any person on the order or with the permission of the Policyholder

* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of 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 has not been cancelled at the time of accident loss or damage.

6. Limitation as to use*

- 1) Use in connection with the Insured's business.
- 2) Use for the carriage of passengers (other than for hire or reward) in connection with the Insured's business.
- 3) 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 greater number of trailers in all than is permitted by Law.
- 3) Use for the carriage of passengers for hire or reward.
- 4) Liability arising from or in connection with the carriage of hazardous materials, high explosives, inflammable liquid or gases including LPG in cylinders.

*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.

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 and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase : Abwin Pte Ltd

ABWIN PTE LTD

8 KAKI BUKIT ROAD 2
RUBY WAREHOUSE COMPLEX
#01-33 SINGAPORE 417841

TEL : 6841 6688 FAX : 6841 2012 (SALES OFFICE)
TEL : 6847 3332 FAX : 6842 3301 (ADMIN OFFICE)

A000342/Abwin Pte Ltd

Date of Issue : 24/01/2018 14:16

Authorised Signatory
EQ Insurance Company Limited

Exp No. : DMCPHQ17-000824

A Member of Citystate

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

