SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 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.

| aloresalu. | | | | | |
|--|---|--|--|--|--|
| | ACCIDENT STATEMENT | | | | |
| Date Of Report | 06/08/2018 19:44 | | | | |
| Date Of Accident | 04/08/2018 04:20 | | | | |
| Exact Location Of Accident | WARINGAN PARK | | | | |
| Country/State of Loss | SINGAPORE | | | | |
| | DETAILS OF OWN VEHICLE | | | | |
| Vehicle Registration Number | SJN4532M | | | | |
| Insured/Policyholder | | | | | |
| Name Of Registered Owner | M/S THE WHEELERS FLEET PTE LTD | | | | |
| Co Reg No | - | | | | |
| Email Address | NOEMAIL | | | | |
| Mobile Phone No | | | | | |
| Alternative Phone No | OFFICE-96164945 | | | | |
| Vehicle Particulars | | | | | |
| Manufacturer | TOYOTA | | | | |
| Model | VIOS | | | | |
| Exact Purpose for which vehicle was being used at time of accident | PARKED | | | | |
| 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 | PRIVATE HIRE | | | | |
| Insurance Company | | | | | |
| Name of Insurance Company | CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. | | | | |
| Type Of Coverage | COMPREHENSIVE | | | | |
| Fleet Policy | NO | | | | |
| Policy Number | DMHCSN1757181700 | | | | |
| Cover Note Number | - | | | | |
| Driver | | | | | |
| Name of Driver | NG KOK JIN | | | | |
| NRIC No | S9445985J | | | | |
| Date Of Birth | 26/11/1994 | | | | |
| Occupation | OUTDOOR | | | | |
| Date Of Driving Pass | 30/01/2014 | | | | |
| Driving Experience | 4 YEARS AND 6 MONTHS | | | | |
| Gender | MALE | | | | |
| Mobile Number | (LOCAL) +65-96164945 | | | | |
| | | | | | |
| Fax Number | | | | | |

NOEMAIL

Address 780 BEDOK RESERVOIR RD #03-29

Postcode 479255

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

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

NO

NO

Weather Conditions CLEAR
Road Surface DRY

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?

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?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO ATTACHED STATEMENT.

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 SGZ9662K

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)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

E4756A

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

enicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

PRIVATE CAR

SKETCH PLAN

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 Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by
 interested parties.
- 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:
 - 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.

THE
WHEELERS
FLEET
Policyholders signature

Date & Time:

Zih

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

Name: NRIC/EIN

NRIC/FIN No.:

| KETCH PLAN | | | | |
|--|--------------------------------|------------|------------------------------|--------|
| | N ALL DELTER | marrish | Park | |
| | DY-CONED | 7 | | |
| | | _ < | | |
| Veh A -85 | N 4532M | | | |
| VehB-SG | 29662K | | | |
| Venc-E | 4756A | | | |
| ESCRIBE CIRCUMSTANCES O | F THE ACCIDENT | | | |
| My car w Waringin Pa | as parked o | along the | roodside | 20 |
| Veh (B) h | ad reverse | billes a b | ed onto V | eh le |
| + in distan | urn kit o | ento my | Car | -17 (4 |
| | | 7 | | |
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| ECLARATION We declare the foregoing particul | ars are true in every respect. | | // | |
| WHEELERS | ah | | two | |
| olicyholder Signature | Driver's Signature | | ting Centre Personnel's Sign | ature |

NRIC/FIN No.:

Date & Time:

DRIVING DOC



LOSTIN HUMBER S 9 4 4 5 9 8 5 J

NG KOK JIN

Bett Daw 26 Nov 1994



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIE

EFFECTIVE DATE

Class 3 Motor Cars =< 3000 kg with =<7 passengers, exclusive 30 Jan 2014 of the driver; and other motor vehicles =< 2500 kg

NP 428A



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9445985J

NG KOK JIN

K 国 坡
Race
CHINESE
Date of Jorda
26-11-1994 M
Daugety of Jorda
SINGAPORE



























