

## 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	10/09/2018 15:14
Date Of Accident	10/09/2018 06:35
Exact Location Of Accident	ALONG JURONG PIER ROAD TOWARDS JURONG ISLAND
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	XE471M
<b>Insured/Policyholder</b>	
Name Of Registered Owner	IG AUTOMOTIVE LOGISTICS PTE. LTD.
Co Reg No	200822162H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81557119
Alternative Phone No	OFFICE-85237299

### Vehicle Particulars

Manufacturer	MITSUBISHI
Model	FP51SDR3VDEA-12.0 D (M)
Exact Purpose for which vehicle was being used at time of accident	WORK
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	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

### Driver

Name of Driver	XIA GUANGHUI
Passport No/FIN	G6941504R
Date Of Birth	13/03/1975
Occupation	OUTDOOR
Date Of Driving Pass	22/12/2011
Driving Experience	6 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81557119
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL

Address	26 BOON LAY WAY #01-85 TRADEHUB 21
Postcode	609970
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)	1

### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JURONG NPP
Police Station Address	<b>ROAD:</b> 158 YUNG LOH ROAD #01-58 , <b>POSTCODE:</b> 610158 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

### Circumstances of Accident

REFER TO ATTACHED POLICE REPORT

### 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	SGV7399E
Vehicle Make/Model/Colour	TOYOTA WISH
Details Of Properties	FRONT
Vehicle Category	PRIVATE CAR
Name of Driver	SAHRIN BIN HARON
NRIC/Passport Number	S7803778D
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name SAHRIN BIN HARON

Approximate Age

Injuries Sustain

Injured person in which vehicle? SGV7399E

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? YES

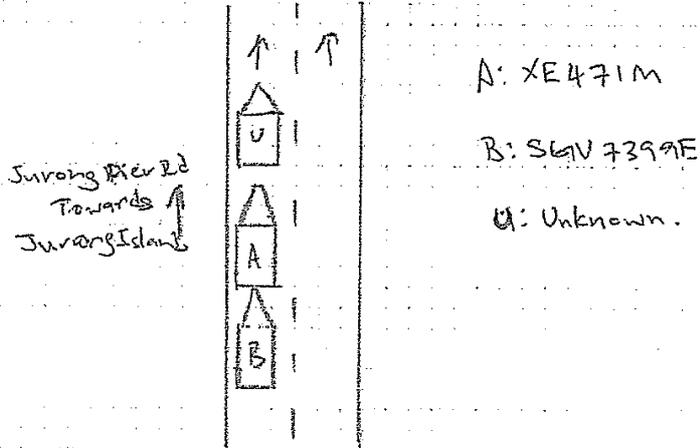
Address

Postcode



Sketch Plan Pg. 2

SKETCH PLAN

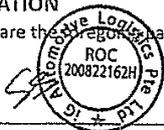


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to accident statement.

DECLARATION

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



Policyholder's Signature  
Date & Time: 10/9/18  
3:30pm

XIAHUI  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 10/9/18 3:30pm



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

Sketch Plan Pg. 3

**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Number: **G6941504R**

Name: **XIA GUANGHUI**

Birth Date: **13 Mar 1975**

Issue Date: **07 Nov 2016**

Valid Till: **21/12/2021**

002626591D




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

Employer: **IG LOGISTICS PTE. LTD.**

Sector: **SERVICE**

Name: **XIA GUANGHUI**

Occupation: **TRAILER-TRUCK DRIVER**

Work Permit No.: **0 74617165**

Date of Application: **23-06-2017**

Date of Issue: **11-07-2017**

Date of Expiry: **02-07-2019**

L8146875





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

		EFFECTIVE DATE
Class 3	Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg	22 Dec 2011
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 or passengers and the unladen weight =< 7250kg	07 Feb 2012

Licence No:G6941504R



NR-X28A

**VISIT PASS**  
Immigration Regulations

Name: **XIA GUANGHUI**



Date of Birth: **13-03-1975** Sex: **M** Nationality: **CHINESE**

FIN: **G6941504R** Date of Issue: **11-07-2017** Date of Expiry: **02-07-2019**

**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.**





**SINGAPORE  
POLICE FORCE**



T/20180910/2047

Police Station Of Origin:  
Jurong NPP  
158 Yung Loh Road #01-58 SINGAPORE  
610158  
Tel No: 1800-2659999

1 of 3

Report No. T/20180910/2047

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 10/09/2018 12:58		Vide Report No.: J/20180910/0077		Station Diary No.: 9	
<b>Informant's Particulars</b>					
Name of Informant: XIA GUANGHUI			Address:		
ID Type / ID No.: FIN NO / G6941504R			Contact No.: Home/Office:		Mobile: 81557116
Nationality: CHINESE			Email:		
Sex: Male	Age: 43	Date of Birth: 13/03/1975	Type of Informant: Driver		
Race: Chinese		Language:		Institution / School Name:	
Occupation: Trailer-truck driver		Driving Licence Information: Class: 3,4		Date of Expiry:	

<b>General Information of the Accident</b>				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 10/09/2018 06:55	Type of Location: Straight Road
Location: Along Road 1 JURONG PIER ROAD  Jurong Pier Road going towards Jurong Island				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGV7399E	Car				Seriously Damaged	0
XE471M	Prime mover				Slightly Damaged	0

<b>Details of Person Involved</b>	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20180910/2047

Police Station Of Origin:  
Jurong NPP  
158 Yung Loh Road #01-58 SINGAPORE  
610158  
Tel No: 1800-2659999

2 of 3

Report No. T/20180910/2047

## CONTINUATION OF REPORT

Driver			
Name	SAHRIN BIN HARON	ID No.	G7803778D
Related Vehicle	SGV7399E (Car)	Contact No.	NIL
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	XIA GUANGHUI	ID No.	G6941504R
Related Vehicle	XE471M (Prime mover)	Contact No.	81557116
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 10/09/2018 at about 0630hrs, I was driving my vehicle XE471M on Jurong Pier Rd going towards Jurong Island on the 2nd lane of the 2 lane road. The traffic light ahead turned red and all the vehicles in front and my vehicle was able to brake on time and I check my side mirror, there was no vehicle behind my vehicle. After 1-2 minutes later, I felt and heard an impact from the rear of my vehicle and my vehicle moved 30-40cm due to the impact while the brakes was still being depressed. I alighted and made a check on the other driver but we were unable to communicate well due to language barrier. He then moved to the left front passenger seat himself and rest there. Officer from Jurong Island came and took down our particulars and called for the police. I took photo of the other driver NRIC and both vehicles.

Ambulance and Traffic Police arrived at scene, Traffic Police went to interview the other driver and myself. After the interview, the other driver was being conveyed but I am not sure which hospital he was conveyed to. My vehicle sustained dents to the rear registration plate and damaged light bulb. His vehicle sustained major dents to the front portion of the vehicle. There were no in-car camera installed on my vehicle.

I was told by the traffic police that I can leave the scene and proceed to any police station to make a police report vide J/20180910/0077 under TP IO Maria Tel: 65476433.



SINGAPORE  
POLICE FORCE



T/20180910/2047

Police Station Of Origin:  
Jurong NPP  
158 Yung Loh Road #01-58 SINGAPORE  
610158  
Tel No: 1800-2659999

3 of 3

Report No. T/20180910/2047

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 LOW JIAN HAO	Signature Of Informant: <i>XIA HU</i>
Signature Of Interpreter: Not applicable	Date/Time: 10/09/2018 12:58
Officer In Charge Of Case: TP / GIT / Insp TAN CHIN YONG Contact No.: 65476178	Classification Of Case:  SN 124
Authentication Stamp NP168	 Signature: Singapore Police Force



MS First Capital Insurance Limited Co. Reg. No. 195000106C GST Reg. No. M2-0001676-9  
 6 Raffles Quay #21-00 Singapore 048580  
 Tel: (65) 6222 2311 Fax: (65) 6222 3547

Claims & Motor Underwriting Dept: 36 Robinson Road #16-01 City House Singapore 068877  
 Tel: (65) 6507 3848 Fax: (65) 6507 3849  
 www.msfirstcapital.com.sg

**CERTIFICATE OF INSURANCE**

ORIGINAL

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)  
 Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960  
 Road Transport Act, 1987 (Malaysia)  
 Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Type of Policy. : FLEET - HEAVY COMMERCIAL VEHICLE  
 Type of Cover. : Comprehensive  
 Certificate No. : D-17088925MFVS/6  
 Vehicle No / Chassis No : XE471M / FP51SDA10145  
 Name of Insured : IG AUTOMOTIVE LOGISTICS PTE. LTD.  
 Period Of Insurance : 01.04.2018 To 15.10.2018  
 Insured Estimated Value : Market Value At Time Of Loss  
 Financial Institution : MERCEDES-BENZ FINANCIAL SERVICES SINGAPORE LTD

**Excess :**

SGD5,000.00 ALL CLAIMS (APPLICABLE TO ITEM 1 TO ITEM 5)  
 SGD7,500.00 ALL CLAIMS (APPLICABLE TO VEHICLE NO. XE471M)  
 AN ADDITIONAL EXCESS OF SGD3,500.00 ON SECTION I & II SEPARATELY IS IMPOSED  
 ON THOSE DRIVERS WHO ARE BELOW 23 YEARS OLD AND/OR WHO HAVE LESS THAN 3 YEARS  
 OF DRIVING EXPERIENCE

**Authorised Driver\***

ANY AUTHORISED DRIVER

**Persons or classes of persons entitled to drive\***

Any person who is driving on the Insured'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.

**Limitations as to use\***

- (1) Use in connection with the Insured's business.
- (2) Whilst the Motor Vehicle is being so used the carriage of passengers is permitted.

**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 no. of trailers in all that is permitted by law.

\* 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)

MS First Capital Insurance Limited  
 (Approved Insurers)

SUSAN/B0188/MZ801A1

Issued at Singapore On 22.03.2018

  
 \_\_\_\_\_  
 Authorised Signature

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



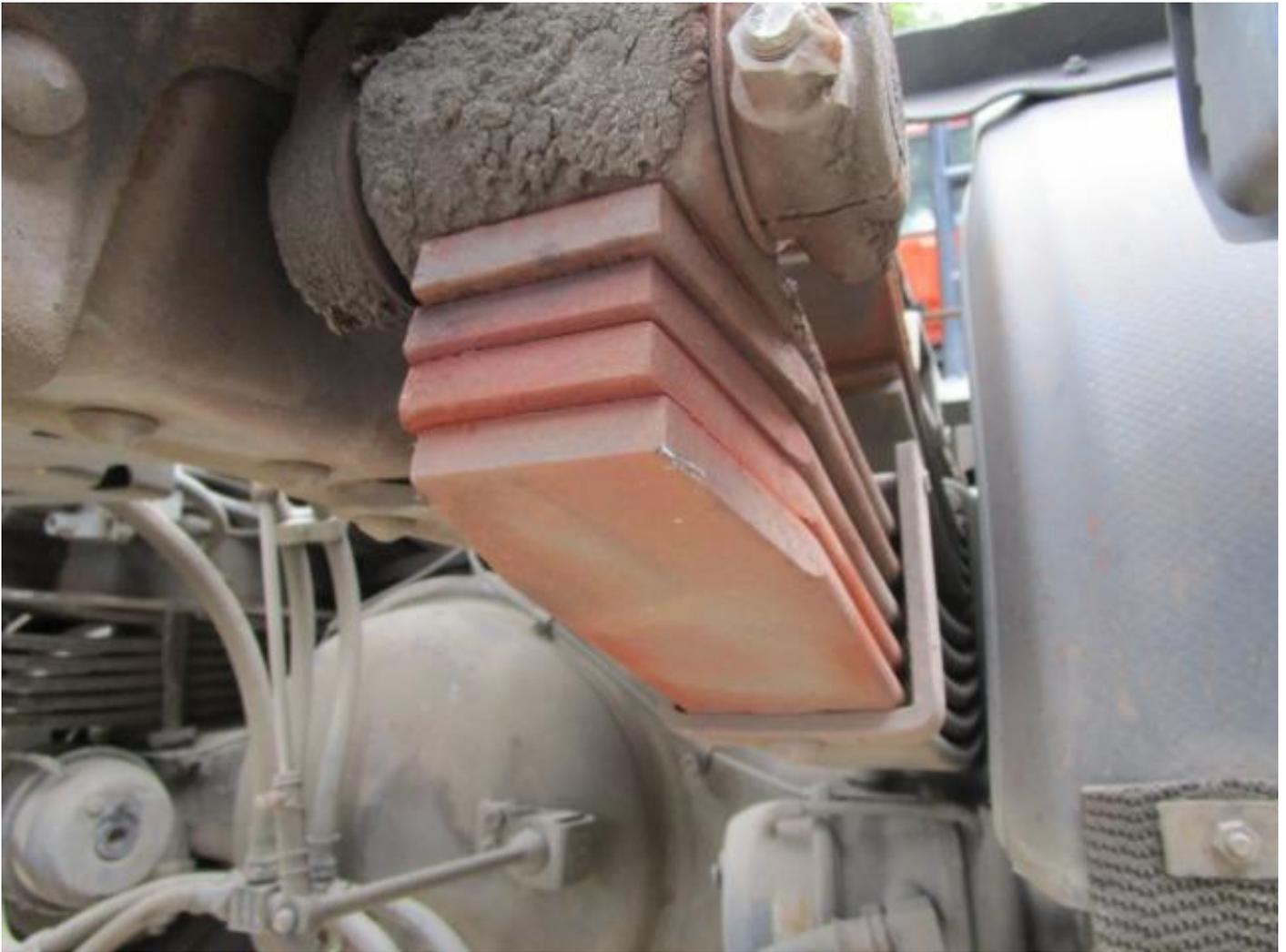
Accident Photo



Accident Photo



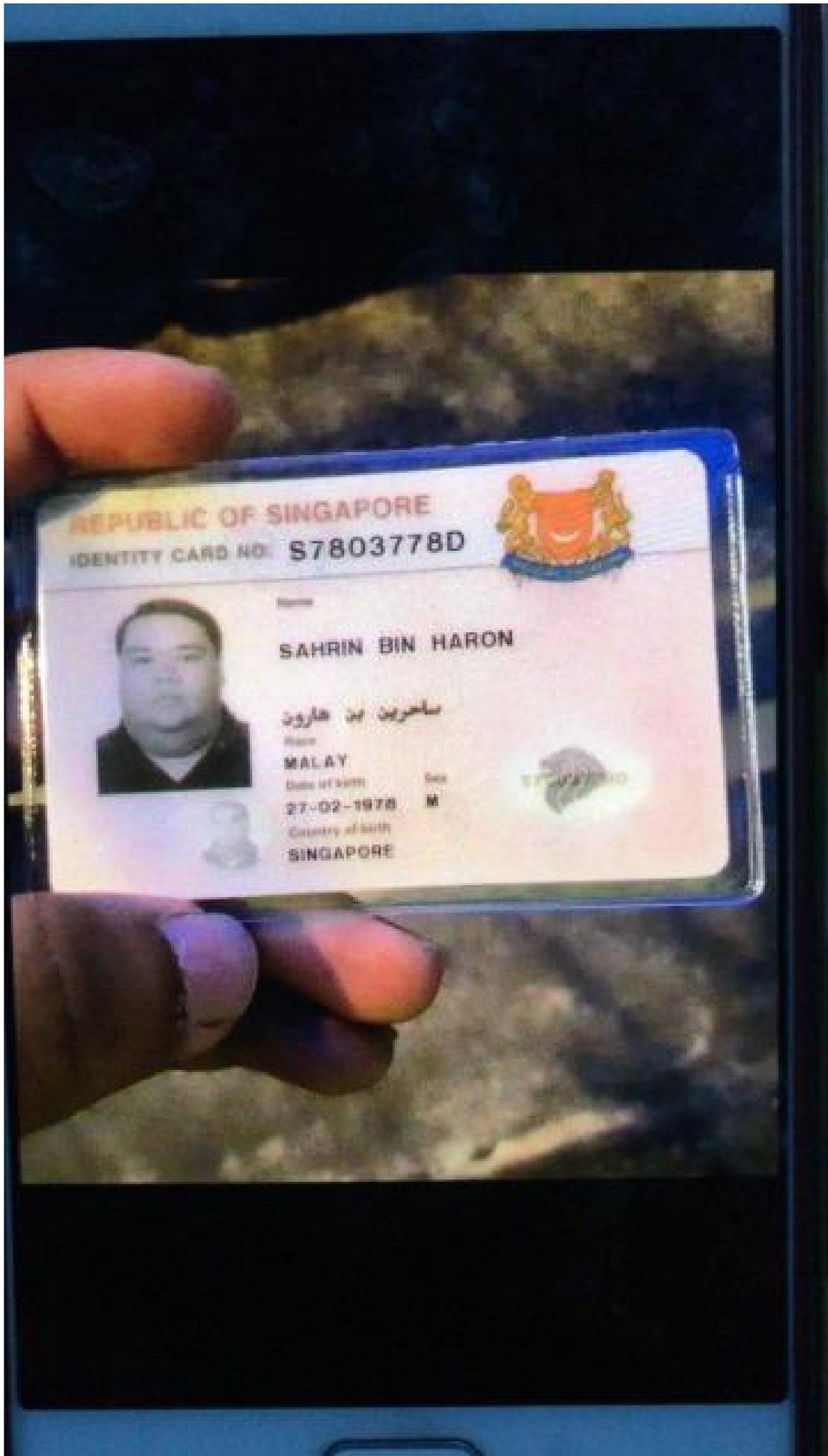
Accident Photo



Accident Photo



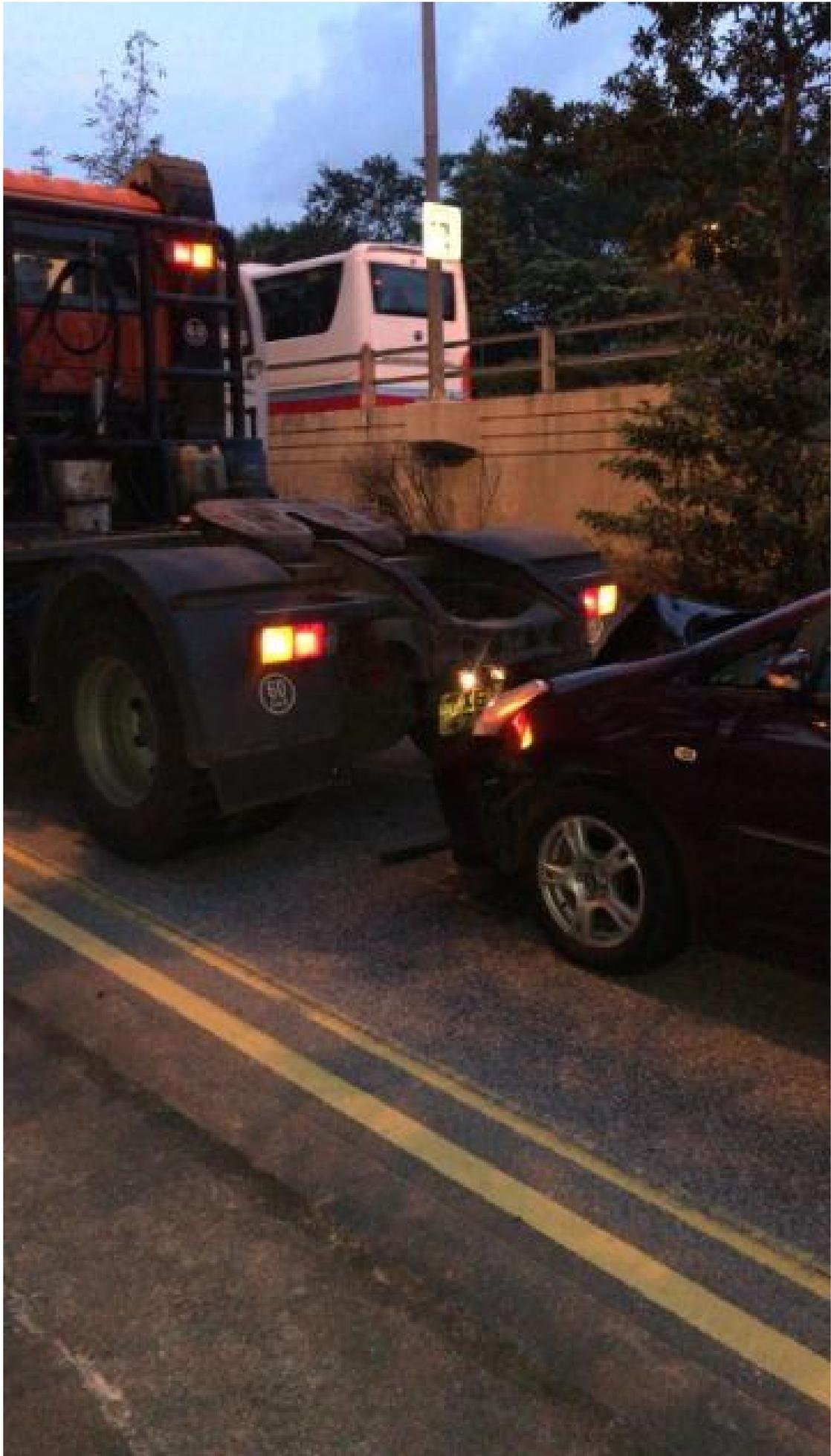
Identification Card



Accident Photo



Accident Photo



Accident Photo

