

## 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 liability.
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	10/10/2018 16:12
Date Of Accident	08/11/2017 12:45
Exact Location Of Accident	ALONG PENJURU ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP4501P
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#### Insured/Policyholder

Name Of Registered Owner	NAM SENG CARGO GEAR SUPPLIERS PTE LTD
Co Reg No	198801089D
Email Address	ACCOUNTS@NAMSENGCARGO.COM.SG
Mobile Phone No	(LOCAL) +65-97166356
Alternative Phone No	OFFICE-67766918

#### Vehicle Particulars

Manufacturer	ISUZU
Model	FVR34SUQDC-7.8 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	GREAT AMERICAN INSURANCE COMPANY
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MOMVC000005032-00-000
Cover Note Number	

#### Driver

Name of Driver	CHUAH KIEN HUAT
Passport No/FIN	G7464897K
Date Of Birth	12/01/1979
Occupation	OUTDOOR
Date Of Driving Pass	29/05/2009
Driving Experience	8 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97166356
Fax Number	
Contact Number	OFFICE-67766918
Email Address	ACCOUNTS@NAMSENGCARGO.COM.SG

Address	8 JALAN NJM 3/3 TAMAN NUSA JAYA MAS SKUDAI
Postcode	81300
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	NO COLLISION
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)	1

#### 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	SBS3377U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	BUS
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Sketch Plan

10 Oct 2018 15:00 HP H&K

page 1

### 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:



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

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

# Sketch Plan #2

10 Oct 2018 15:05 HP Fax

page 2

## SKETCH PLAN

UNKNOWN NW COLLISION

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Mr. Chuah Kien Huat had no re-collection of the accident reported involving SBS 3377 U.

We only know of this accident when we received a letter from Great American Insurance Company.

## 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:

Reporting Centre Personnel's Signature

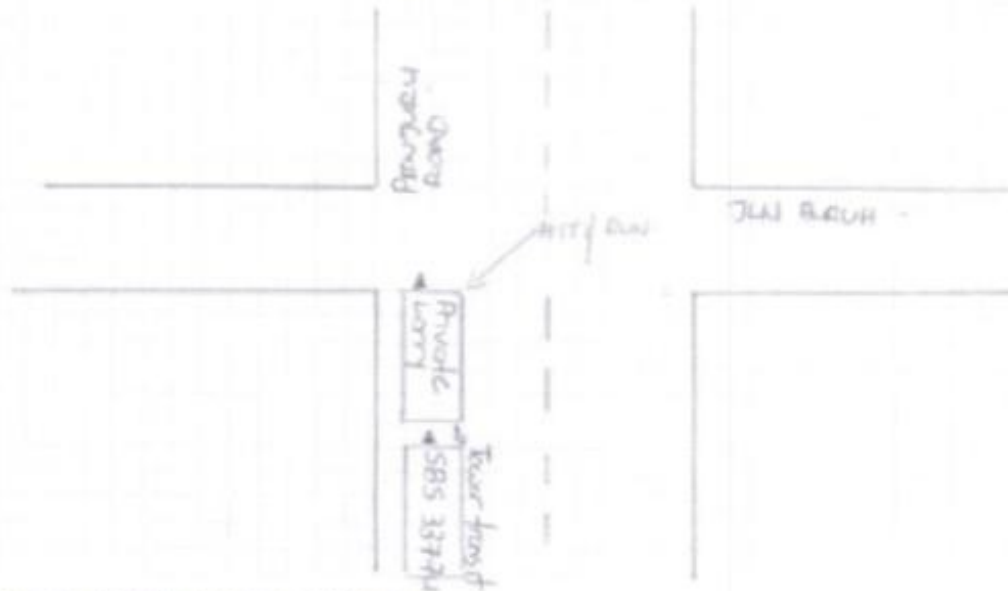
Name:

NRIC/FIN No.:

10/10/2018

# TP Report

### SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 8th november 2017 at 1243hrs, I was driving tower transit bus I was driving along Perguru Road at the traffic light junction Perguru Road and Jalan Buruh my bus was stationary behind traffic light junction. Suddenly in front lorry at the traffic fail to applied brake instead the lorry moving backward. I many time, but the lorry fail to stopped and knock into m causing left hand side blind spot mirror dislodged and fell from the arm bar and cracked left hand side mirror. After I going down from my bus and check the bus damages : my bus side mirror. Lorry driver fail to exchange particular

Rachel Tan, Executive | P. +65 6804 7846 | F. +65 6235 3354 | [rachel.tan@sg.gaiq.com](mailto:rachel.tan@sg.gaiq.com)



### Motor Claims



16-Avenue #16-01 Centennial Tower Singapore 039190

10/10/2018 -  
Pelli, Watson,



Sketch Plan #4



GREAT AMERICAN INSURANCE COMPANY  
UEN: T15FC0029B GST REG NO: M90370081T  
3 TEMASEK AVENUE, #16-01 CENTENNIAL TOWER  
SINGAPORE 039190  
TEL: +65 6804 6000  
FAX: +65 6235 2616

Our Reference : CLMOMVC000003502  
Your Reference : YP4501P

10 October 2018

Nam Seng Cargo Gear Suppliers Pte Ltd  
1 Bukit Batok Crescent  
#08-58 WCEGA Plaza  
Singapore 658064

**ACCIDENT INVOLVING YP4501P (OI) & SBS3377U (FCI) ON 08/11/2017 AT PENJURU ROAD**

Dear Sir/Mdm,

We have been informed that the above-mentioned accident (the "**Accident**") has occurred, and we have received a claim (the "**Claim**") for property damage against you, the driver and/or the hirer of Vehicle No. **YP4501P** which is insured with us (the "**Insured Vehicle**").

Our records show that you, the driver and/or the hirer of the Insured Vehicle have yet to report the Accident. Failure to report the Accident would be a breach of General Condition 3 of the Motor Policy which requires the Insured to report an accident within 24 hours or by the next working day. You may have good reasons for failing to report the Accident for which you may wish to provide an explanation for our review.

In order for us to handle the Claim on your behalf, please proceed to any of our authorized Accident Reporting Centres, a list of which can be found in your Certificate of Insurance, to complete the Singapore Accident Statement form and extend a copy to our office. If applicable, please also provide us with a copy of any police report that may have been made in connection with the Accident.

Unless you provide the Singapore Accident Statement form (and any police report) within 5 business days from the date of this letter, and render all necessary co-operation to our office in dealing with the Claim, we shall take it that you do not wish to be assisted by us, in which event the Claim and all other third party claims whatsoever arising from the Accident will be directed to you to handle. Further, if we are required by the relevant legislation to satisfy any judgment, we reserve the right to recover against you.

Pending receipt of the above-mentioned documents, we reserve all our rights under the policy and at common law. Please contact our office should you require any clarification.

Please note that a police report is required by law if the Accident resulted in personal injury, damage to government property or foreign vehicle(s) or if it was a 'Hit and Run' case.

Yours sincerely,  
**Claims Department**  
**Great American Insurance Company**

A handwritten signature in blue ink, appearing to read 'Tan Insurance Brokers Pte Ltd', is written over the typed name of the Claims Department.

CC Tan Insurance Brokers Pte Ltd

*This is a computer generated letter, no signature is required.*

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

Employer:  
**NAM SENG CARGO GEAR SUPPLIERS PTE LTD**

Sector: **SERVICE**

Name:  
**CHUAH KIEN HUAT**


Occupation:  
**LORRY/ TRUCK DRIVER**

Work Permit No.  
**4 01455256**

Date of Application  
**15-08-2017**

Date of Issue  
**22-08-2017**

Date of Expiry  
**21-08-2019**



**L8245080**

**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Number: **G7464897K**

Name:  
**CHUAH KIEN HUAT**

Birth Date: **12 Jan 1979**

Issue Date: **19 Apr 2014**

Valid Till **28 May 2019**



**002296647F**



# **VISIT PASS** Immigration Regulations

Name  
**CHUAH KIEN HUAT**



Date of Birth	Sex	Nationality
12-01-1979	M	MALAYSIAN
FIN	Date of Issue	Date of Expiry
G7464897K	22-08-2017	21-08-2019

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



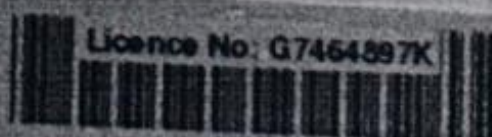
## **YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)**

		EFFECTIVE DATE
Class 2B	Motorcycles $\leq$ 200 CC	29 May 2009
Class 3	Motor cars $\leq$ 3600 kg with $\leq$ 7 passengers, exclusive of the driver, and motor tractor/vehicles $\leq$ 2500 kg	29 May 2009
Class 4	Heavy motor cars and motor tractor $>$ 2500 kg	23 May 2017

G7464897K

S / No. 9000259815

NP 428A





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



**Accident Photo**





Accident Photo



Accident Photo



Accident Photo

