

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	19/10/2018 10:53
Date Of Accident	19/10/2018 07:20
Exact Location Of Accident	ALONG UPPER BUKIT TIMAH RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP7908E
Insured/Policyholder	
Name Of Registered Owner	MUA HIN POULTRY FARM PTE LTD
Co Reg No	197700851H
Email Address	MAY@HENGGUAN.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-67560043

Vehicle Particulars

Manufacturer	HINO
Model	HINO XZU710R-HKFMS3
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
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	ERGO INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCV17S023099
Cover Note Number	30/11/17 - 29/11/18

Driver

Name of Driver	CHANG YOONG KIM
NRIC No	S7380542B
Date Of Birth	18/01/1973
Occupation	OUTDOOR
Date Of Driving Pass	29/02/1996
Driving Experience	22 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93983950
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	C/O MUA HIN POULTRY FARM PTE LTD
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	COLLISION - HEAD TO REAR
Weather Conditions	DRIZZLING
Road Surface	WET

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?	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.	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

REFER TO ATTACH.

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	SLS3658R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHINESE FEMALE
NRIC/Passport Number	
Contact Number	98732340
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

VEHICLE NO.: YP 7908 E
INSURER : ERC
DATE & TIME: 19/10/18 @ 07:20 am

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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:
NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN

Sketch Plan

Upper Bt. Timah Road

A = YP7908E
B = SL53658R
Chinese Female
HP-98732340

The sketch plan shows a road layout on a grid. Two vertical lines represent the road boundaries. The left line has two upward-pointing arrows at the top. A small structure, possibly a gate or building, is drawn on the left line, consisting of a rectangle labeled 'B' above a trapezoid labeled 'A'. The right line also has two upward-pointing arrows at the top. To the right of the road, there is a list of information: 'A = YP7908E', 'B = SL53658R', 'Chinese Female', and 'HP-98732340'. To the left of the road, the text 'Upper Bt. Timah Road' is written.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

It was heavy traffic jam when I followed front vehicle move forward suddenly car B jammed brake causing my vehicle had slight touch onto its rear, no other damages, Only broken plate number on car B, my vehicle sustained no damages.

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: (YS)
NRIC/FIN No.:

() Claim Own Policy () Claim Third Party (✓) Reporting Only
() Claim OD/TP at other workshop ()

WP & DL

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

Employer: MUA HIN POULTRY FARM PTE. LTD.
Sector: MANUFACTURING
Name: CHANG YOONG KIM
Occupation: DRIVER

Work Permit No: 5 23731963
Date of Application: 27-09-2017
Date of Issue: 30-10-2017
Date of Expiry: 29-10-2019

18417069

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S7380542B
Name: CHANG YOONG KIM
Birth Date: 18 Jan 1973
Issue Date: 10 Jul 2007

001512187J

VISIT PASS
Immigration Regulations

Name: CHANG YOONG KIM

Date of Birth: 18-01-1973
Sex: M
Nationality: MALAYSIAN
FIC: F7194428W
Date of Issue: 30-10-2017
Date of Expiry: 29-10-2019

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)

Class	Description	PASS DATE
Class 2B	Motorcycles <= 200 cc	29 Feb 1996
Class 3	Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver, and other motor vehicles <= 2500kg	29 Feb 1996
Class 4A	Omnibuses	06 Jan 1997

Licence No: S7380542B

NP 428A

Accident Photo



Accident Photo



Accident Photo



Accident Photo



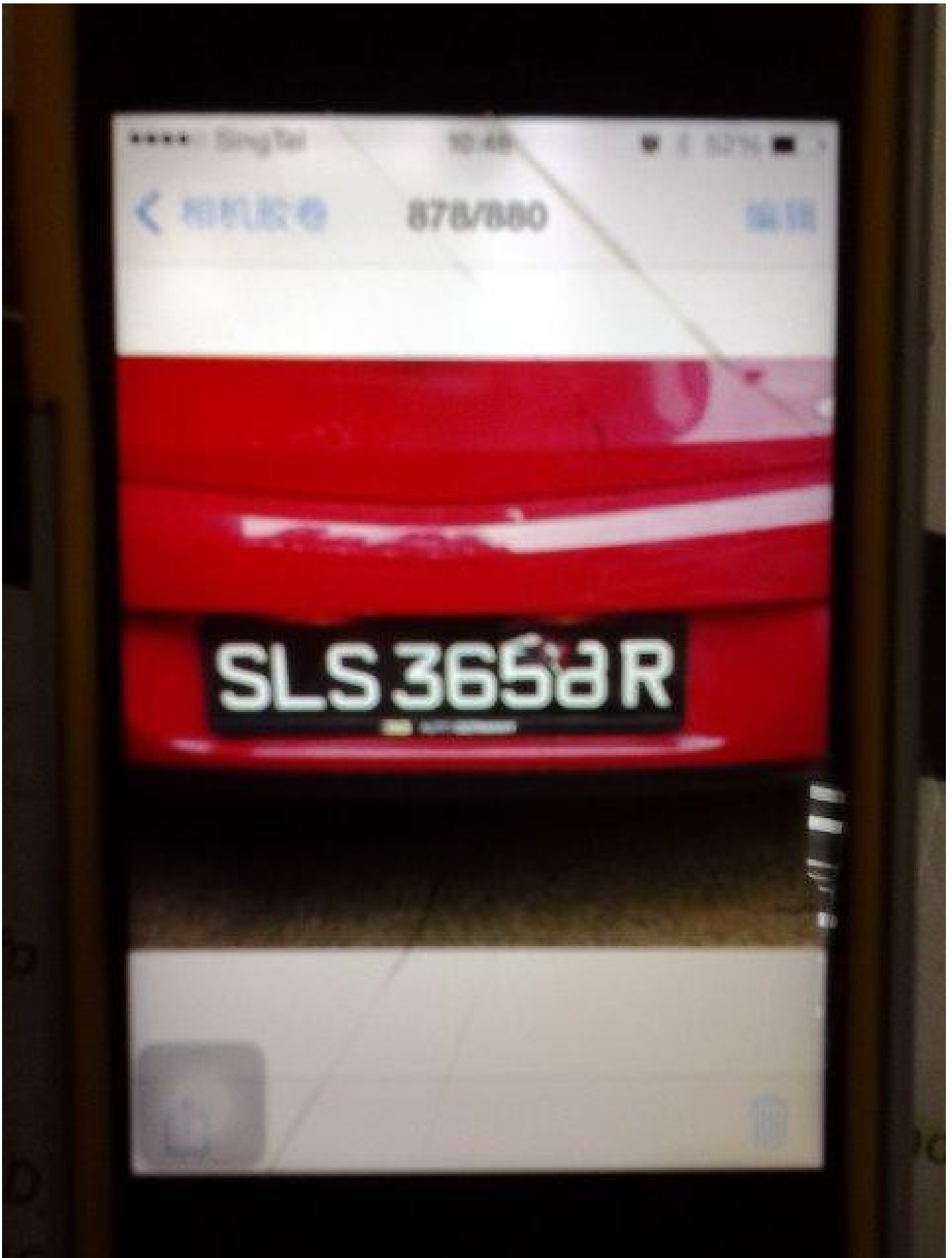
Accident Photo



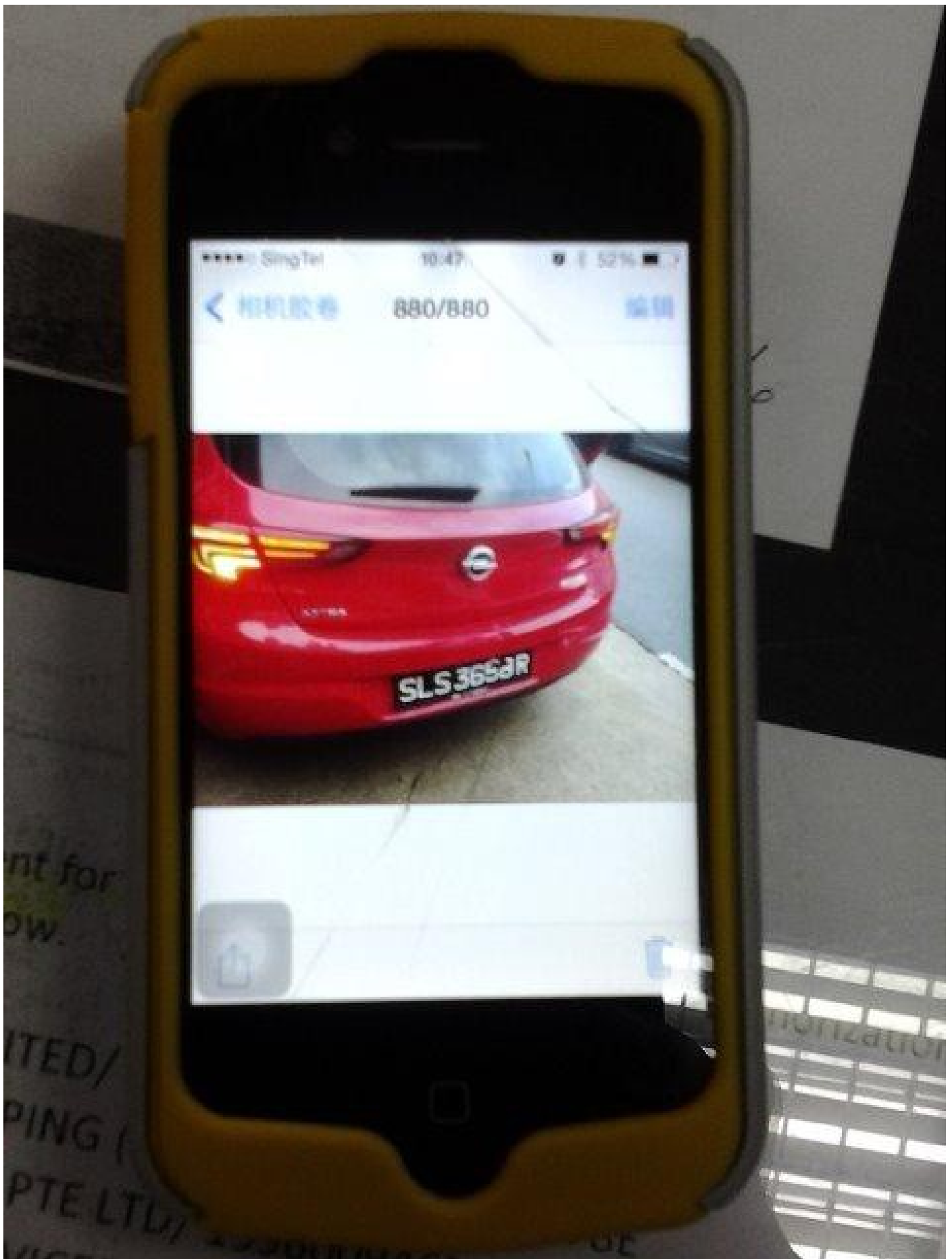
Accident Photo



SCENE



SCENE



SCENE

