

## 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	22/10/2018 16:25
Date Of Accident	22/10/2018 11:00
Exact Location Of Accident	ADAM ROAD TWDS LORNIE ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	XD8499L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ALY ENERGY SINGAPORE PTE LTD
Co Reg No	200810919G
Email Address	KELLY.CHUA@ALY.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62668558

### Vehicle Particulars

Manufacturer	SCANIA
Model	P400LA-12.7 D 4X2 MSZ (M)
Exact Purpose for which vehicle was being used at time of accident	
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN1510291803
Cover Note Number	

### Driver

Name of Driver	CHEONG BAN LAK
NRIC No	S2590221A
Date Of Birth	05/10/1956
Occupation	OUTDOOR
Date Of Driving Pass	01/09/2015
Driving Experience	3 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-98429963
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	421 FAJAR RD #05-481
Postcode	670421
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	SIDE SWIPE
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?	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

ON 22/10/2018 @ 1100HRS. I WAS DRIVING ALONG ADAM ROAD TWDS LORNIE RD ON THE 3RD LANE. WHEN I SUDDENLY SAW A MOTORBIKE WAS IN FRONT OF ME I THEN SWERVE MY VEHICLE TO LEFT. AFTER I SWERVE MY VEHICLE TO LEFT & I SAW FROM MY SIDE MIRROR THERE IS A TAXI (SHA1258S) WAS AT REAR OF LEFT MOST LANE. TO AVOID THE COLLISION, I THEN SWERVE MY VEHICLE BACK TO MY LANE. AFTER I SWERVE MY VEHICLE BACK TO MY LANE, THE TAXI DRIVER THEN HONK TO ME, SO I STOP MY VEHICLE & WENT DOWN TO FIND THE TAXI'S DRIVER TO ASK WHAT'S GOING ON. THE TAXI DRIVER TOLD ME THAT I HAD GRAZED ONTO HIS VEHICLE AT REAR RIGHT PORTION. I AM NOT SURE IF I HAD COLLIDED INTO THE SAID TAXI AS I DID NOT FEEL ANY IMPACT. NO ONE WAS INJURED. THAT'S ALL.

#### 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	SHA1258S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	YEO ENG HENG
NRIC/Passport Number	S7703809D
Contact Number	97826114
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

2

Passenger 1

NAME: :

GENDER: : FEMALE

**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.



*[Handwritten signature]*

*[Handwritten signature]*

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.:

I AM AWARED THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.

# Sketch Plan Pg. 2

## SKETCH PLAN

Adam Rd Tuds Lunie Rd

vehicle A: XD 84 99L

vehicle B: SHA 12585

vehicle C: unknown motorbike

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 22/10/2018 @ abt 1100hrs

Refer to circumstances of accident.

☐ Claim own policy

☐ Claim third party

☐ Claim OD / TP at other works hop

☐ For record purpose

Policy No. DMCVSN 1510 291803

Insurer Chms (C) Veh.No. XD 84 99L

## 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.:



**中国太平保险(新加坡)有限公司**  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.  
Co. Reg. No. 200208384E

MZ300/C  
R SN  
AN0421A  
Cov.Type: C

MOTOR COMMERCIAL VEHICLE

**CERTIFICATE OF INSURANCE**  
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)

ORIGINAL

CERTIFICATE No.	DMCVSN1510291803	Engine No :6793390 ChaNo:YS2P8X40005338353
1. Index Mark and Registration Number of Vehicle	XD8499L	AUTOSAFE =====
2. Name of Policy Holder	M/S ALY ENERGY SINGAPORE PTE LTD	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	26 March 2018	Excess Sect I ..... S\$3,000.00 EX ON WINDSCREEN ..... S\$100.00
4. Date of Expiry of Insurance	25 March 2019	
5. Persons or Classes of Persons entitled to drive*	Any person who is driving on the Policyholder's order or with their permission.	
<p>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.</p>		
6. Limitations as to use:	<p>(1) Use in connection with the Policyholder's business. (2) Use for the carriage of passengers (other than for hire or reward) in connection with the policyholder's business. (3) Use for social, domestic or pleasure purposes. The policy does not cover. (1) Use for hire or reward or racing, pace-making, reliability trial or speed testing. (2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.</p>	

HIRE PURCHASE CO. : SING INVESTMENTS &amp; FINANCE LTD AS HP OWNER

\* 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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: VITESSE SOLUTIONS  
Authorised Officer

Authorised Signatory

**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Number: **S2590221A**

Name: **CHEONG BAN LAK**

Birth Date: **05 Oct 1956**

Issue Date: **08 Jan 2015**

**002384153F**

**SG**  
**NO**

**REPUBLIC OF SINGAPORE**

IDENTITY CARD NO. **S2590221A**

Name: **CHEONG BAN LAK**

钟 万 力

Race: **CHINESE**

Date of birth: **05-10-1956**

Sex: **M**

Country/Place of birth: **MALAYSIA**

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

Class	Description	Effective Date
Class 2B	MOTORCYCLES NOT EXCEEDING 200 CC	23 Feb 1983
Class 2A	MOTORCYCLES BETWEEN 201 CC AND 400 CC	23 Feb 1983
Class 3	MOTOR CARS AND MOTOR TRACTORS THE WEIGHT OF WHICH UNLADEN DOES NOT EXCEED 2500 KILOGRAMS	23 Feb 1983
Class 4	HEAVY MOTOR CARS AND MOTOR TRACTORS THE WEIGHT OF WHICH UNLADEN EXCEED 2500 KILOGRAMS	05 Sep 1997
Class 5	MOTOR VEHICLES WHICH ARE NOT CONSTRUCTED THEMSELVES TO CARRY ANY LOAD AND THE WEIGHT OF WHICH UNLADEN EXCEEDS 7250 KILOGRAMS	01 Sep 2015

S2590221A

S / No. 9000223439

Licence No: S2590221A

NP 428A

5689267

**NRIC No. S2590221A**

Date of issue: **13-01-2017**

Address: **APT BLK 421 FAJAR ROAD  
#05-481  
SINGAPORE 670421**

Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo

