

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	29/10/2018 17:03
Date Of Accident	27/10/2018 13:10
Exact Location Of Accident	SUNGEI KADUT ST 5
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YN3312K
Insured/Policyholder	
Name Of Registered Owner	LIAN LEE HENG TRADING CO
Co Reg No	30924100J
Email Address	LIANLEEHENGCO@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-98626373
Alternative Phone No	OFFICE-NOPHONE

Vehicle Particulars

Manufacturer	ISUZU
Model	NQR75UL5A-5.2 D (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? YES

If No, Please state action to be taken

Vehicle Category	COMMERCIAL VEHICLE
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Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN3033931803
Cover Note Number	

Driver

Name of Driver	CHIA POEY NGOH
NRIC No	S1414996A
Date Of Birth	27/12/1960
Occupation	OUTDOOR
Date Of Driving Pass	07/02/1996
Driving Experience	22 YEARS AND 8 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-88888888
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL

Address	111 PAVILION CIRCLE
Postcode	658543
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	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?	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 27/10/2018 @ ABT 1310HRS. WHEN I CHANGE MY LANE TO THE RIGHT LANE VEHICLE B HIT ONTO MY VEHICLE AT FRONT RIGHT PORTION. AFTER THE ACCIDENT HAPPENED, I THEN TO REVERSE MY VEHICLE & PARK AT THE SIDE ROAD. HOWEVER, MY VEHICLE LOST CONTROL WHILE REVERSE & KNOCK ONTO VEHICLE C AT RIGHT SIDE. MY VEHICLE ONLY STOP AFTER I HIT ONTO VEHICLE C. THE IMPACT CAUSING MY VEHICLE DAMAGE AT FRT BUMPER, FRT RIGHT DOOR, FRT RIGHT DOOR GLASS, FRT WINDSCREEN CRACKED, FRT RIGHT HEADLAMP, FRT RIGHT TYRE, AND OTHERS UNSURE PARTS. THAT'S ALL.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO IS TOO BIG
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YP3723Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	LARENSE RABERTSUNDAR
NRIC/Passport Number	G8042600W
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

GBH7120A

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

MAMUN MD MUZTABAN HOSSEN

NRIC/Passport Number

G2420365X

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

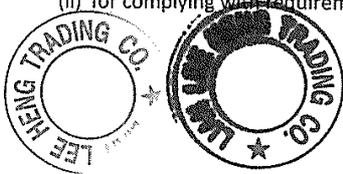
SKETCH PLAN

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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:

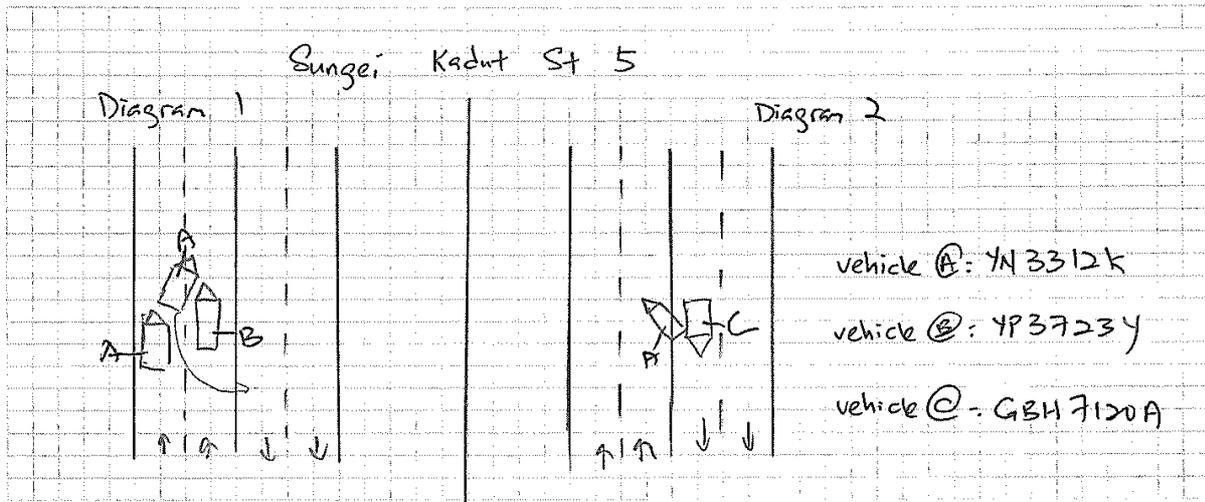


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

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



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

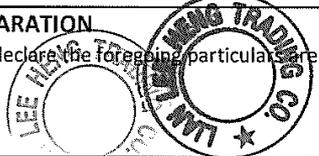
On 27/10/2018 @ at 1310hrs. When I change my lane to the right lane vehicle B hit onto my vehicle at front right portion. After the accident happened, I then intend to reverse my vehicle & park at the side road. However, my vehicle lost control while reverse & knock onto vehicle C at right side. My vehicle only stop after I hit onto vehicle C. The impact causing my vehicle damage at front bumper, front right door, front right door glass, front windscreen cracked, front right headlamp, front right door lamp, front right tyre, and others unsure parts. That's all.

Claim own policy
 Claim third party
 Claim OD / TP at other work
 For record purpose

Policy No. DMCVSN 3037831803
 Insurer China (C) Veh.No. 4N3312K
6/6/18 ~ 5/6/19

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.

MZ300/ CR SN
AN0450A
Cov. Type: C
AUTOSAFE

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)

CERTIFICATE No.	DMCVSN3033931803	Engine No : 4HK1996566 Chassis No: JAAN1R75LC7101955
1. Index Mark and Registration Number of Vehicle	YN3312K	
2. Name of Policy Holder	M S LI AN LEE HENG TRADING CO	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	6 JUNE 2018	EXCESS SECT I S\$800.00 EX ON WINDSCREEN S\$100.00
4. Date of Expiry of Insurance	5 JUNE 2019	
5. Persons or Classes of Persons entitled to drive *	<p>ANY PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH THEIR PERMISSION</p> <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.</p> <p>(2) USE FOR THE CARRIAGE OF PASSENGERS (OTHER THAN FOR HIRE OR REWARD) IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS.</p> <p>(3) USE FOR SOCIAL, DOMESTIC OR PLEASURE PURPOSES. THE POLICY DOES NOT COVER</p> <p>(1) USE FOR HIRE OR REWARD OR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED TESTING</p> <p>(2) USE WHILE DRAWING A TRAILER EXCEPT THE TOWING OF ANY ONE DISABLED MECHANICALLY PROPELLED VEHICLE.</p>	
<p>HIRE PURCHASE CO. : UNITED OVERSEAS BANK LIMITED AS HP OWNER</p> <p>* 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.</p>		

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.

Countersigned By: _____
Authorised Officer

Authorised Signatory

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1414996A



Name
CHIA POEY NGOH



Race
CHINESE

Date of Birth 27-12-1960 Sex F

Country of Birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S1414996A
Name:
CHIA POEY NGOH

Birth Date: 27 Dec 1960
Issue Date: 07 Jul 2003



1906908

NRIC No. S1414996A



Blood Group O+ Date of issue 16-04-1994

111 PAVILION CIRCLE
SINGAPORE 658543

NRIC No: S1414996A Date: 08/08/2014

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

Class	Description	PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	01 Sep 1982
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	07 Feb 1996

NP 428A



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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