

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	12/12/2018 20:53
Date Of Accident	12/12/2018 16:50
Exact Location Of Accident	ALONG PIE TOWARDS BKE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD4470E
Insured/Policyholder	
Name Of Registered Owner	GOLDBELL LEASING PTE LTD
Co Reg No	199001196N
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-64942833

Vehicle Particulars

Manufacturer	FIAT
Model	DOBLO CARGO SX JTD 1.6
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	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	29090793
Cover Note Number	

Driver

Name of Driver	FILMORE JR AMPELOQUIO CORTES
Passport No/FIN	G5978789L
Date Of Birth	03/08/1984
Occupation	OUTDOOR
Date Of Driving Pass	17/10/2017
Driving Experience	1 YEAR AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-94233817
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	18 TUAS AVE 10 LEVEL 6
Postcode	639142
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - LESSEE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	AFP3262 (PRIVATE CAR)
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?	YES
If Yes, Please state which Police Station	
Police Station Name	CHOA CHU KANG NPC
Police Station Address	ROAD: 20 CHOA CHU KANG ST 52 #01-02 , POSTCODE: 689286 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT NO. T/20181212/2150 :- ON 12/12/2018 AT ABOUT 1650HRS, I WAS DRIVING GBD4470E, WHITE FIAT VAN, V1 ALONG PIE TURNING TOWARDS BKE (ON THE BEND) AT THE 2ND LANE. SUDDENLY ONE TOYOTA AVANZA, AFP3262, V2 MALAYSIAN CAR TRAVELLING ON THE 1ST LANE (MOST RIGHT LANE) LOST CONTROL OF HIS VEHICLE AND SPIN TOWARDS MY LANE. SUBSEQUENTLY, V2 CONTINUED TO SPIN TOWARDS THE 3RD LANE (MOST LEFT LANE) AND HIT ONTO A YELLOW VAN (GBE4165G), V3 AND V3 TRIED TO AVOID V2 AND TURNED HIS VEHICLE TOWARDS THE RIGHT AND BANGED ONTO THE SIDE OF MY VEHICLE, V1, ON MY LEFT FRONT WHEEL. SUBSEQUENTLY WE ALL CAME TO A STOP AFTER V2 CRASHED TO THE ROAD BARRIER. SHORTLY AFTER TP ARRIVED AT SCENE. I SUFFERED MINOR INJURIES AND OBTAIN 1 DAY MC. MY VEHICLE SUFFERED MAJOR DAMAGED TO IT AND I AM UNABLE TO DRIVE. I AM NOT SURE THE COST TO REPAIR MY VEHICLE.

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	AFP3262
Vehicle Make/Model/Colour	TOYOTA / AVANZA
Details Of Properties	VEH B
Vehicle Category	PRIVATE CAR
Name of Driver	TOON CHEE SENG

NRIC/Passport Number	730819-08-6143
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GBE4165G
Vehicle Make/Model/Colour	TOYOTA / HIACE / YELLOW
Details Of Properties	VEH C
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	TAN THIAM SIANG
NRIC/Passport Number	S7329573D
Contact Number	96453945
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

Sketch Plan

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:

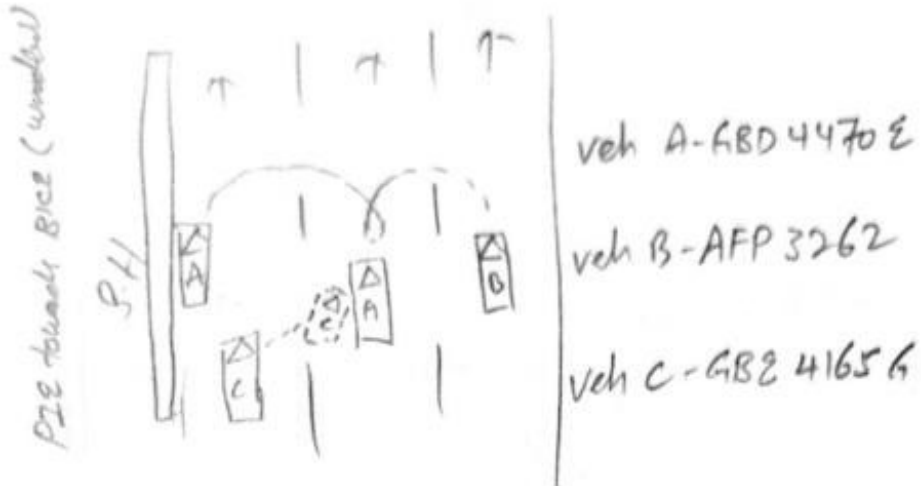
Driver's Signature
(If driver is not the policyholder)
Date & Time: 4/4/20



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

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- P12 refer to police report -

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.:

Police Report



**SINGAPORE
POLICE FORCE**



T/20181212/2150

1 of 3

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

Report No. T/20181212/2150

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/12/2018 21:59	Vide Report No.: F/20181212/0109	Station Diary No.: 156
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Informant's Particulars

Name of Informant: FILMORE JR AMPELOQUIO CORTES			Address: APT BLK 560 CHOA CHU KANG NORTH 6 #05-78 SINGAPORE 680560		
ID Type / ID No.: FIN NO / G5978789L			Contact No.: Home/Office:		Mobile: 94233817
Nationality: FILIPINO			Email:		
Sex: Male	Age: 34	Date of Birth: 03/08/1984	Type of Informant: Driver		
Race: Filipino			Language:		Institution / School Name:
Occupation: TECHNICAL SUPPORT ENGINEER			Driving Licence Information: Class: 2B,3 Date of Expiry:		

General Information of the Accident

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 12/12/2018 16:50	Type of Location: Bend
Location: Along Road 1 PAN ISLAND EXPRESSWAY				
Along PIE towards BKE				
Weather: Raining		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
AFP3262	Car				Seriously Damaged	0
GBD4470E	Van				Seriously Damaged	0
GBE4165G	Van				Seriously Damaged	0

Police Report



**SINGAPORE
POLICE FORCE**



T/20181212/2150

2 of 3

Report No. T/20181212/2150

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

CONTINUATION OF REPORT

Brief Details.

On 12/12/2018 at about 1650hrs I was driving GBD4470E, White Fiat Van, V1, traveling along PIE turning towards BKE(on the bend) at the 2nd lane, suddenly One Toyota Avanza , AFP3262, V2 Malaysian car travelling on the 1st lane(most right lane) loose control of his vehicle and spin towards my lane, subsequently I couldn't stop in time and my vehicle knock onto the side of V2 and I tried to stop immediately, V2 continued to spin towards the 3rd lane(Most left lane) and hit onto a yellow van,(GBE4165G), V3 and V3 tried to avoid V2 and turned his vehicle towards the right and banged onto the side of my vehicle, V1, on my left front wheel. Subsequently we all came to a stop after V2 crashed to the road barrier. Shortly after TP arrived at scene. I suffered minor injuries and obtain 1 day MC, Healthway Medical Clinic, Ref no:012913788, and my vehicle suffered major damaged to it and I am unable to drive, I am not sure the cost to repair my vehicle.

Police Report



SINGAPORE
POLICE FORCE

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999



T/20181212/2150

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Report No. T/20181212/2150

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 OH DING FENG

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

12/12/2018 21:59

Officer In Charge Of Case:

TP / GIT /

Staff Sgt YAN MINGSHENG DANIEL

Contact No.: 65476252

Signature

Classification Of Case:

Authentication Stamp

NP168

Singapore Police Force

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo



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Accident Photo



Accident Photo



Accident Photo



Driving License

S PASS		VISIT PASS										
Employment of Foreign Manpower Act (Chapter 91A) Republic of Singapore		Immigration Regulations										
Employee: KONICA MINOLTA BUSINESS SOLUTIONS ASIA PTE. LTD. Sector: SERVICE Name: FILMORE JR AMPELOQUIO CORTES Occupation: TECHNICAL SUPPORT SPECIALIST S Pass No.: D 24338177 Date of Application: 06-11-2017 Date of Issue: 06-12-2017 Date of Expiry: 16-06-2019 L8500736		Name: FILMORE JR AMPELOQUIO CORTES Date of Birth: 03-08-1984 Sex: M Nationality: FILIPINO FIN: G5978789L Date of Issue: 06-12-2017 Date of Expiry: 16-06-2019 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.										
REPUBLIC OF SINGAPORE DRIVING LICENCE Licence Number: G5978789L Name: FILMORE JR AMPELOQUIO CORTES Birth Date: 03 Aug 1984 Issue Date: 10 Sep 2015 Valid Till: 18/10/2020 002471633K		YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES) <table border="1"> <thead> <tr> <th>Class</th> <th>Vehicle</th> <th>EFFECTIVE DATE</th> </tr> </thead> <tbody> <tr> <td>Class 2B</td> <td>Motorcycles <= 200 CC</td> <td>17 Oct 2015</td> </tr> <tr> <td>Class 3</td> <td>Motor cars <= 3000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg</td> <td>17 Oct 2017</td> </tr> </tbody> </table> G5978789L S / No. 9000310694 Licence No. G5978789L NP 428A		Class	Vehicle	EFFECTIVE DATE	Class 2B	Motorcycles <= 200 CC	17 Oct 2015	Class 3	Motor cars <= 3000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg	17 Oct 2017
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CLASS 3 ~ 17 OCT 2017