

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	24/12/2018 15:45
Date Of Accident	22/12/2018 08:30
Exact Location Of Accident	WOODLANDS STREET 81 TO 82
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YN9276S
Insured/Policyholder	
Name Of Registered Owner	POI HONG TRADING PTE LTD
Co Reg No	201012058E
Email Address	ZBAOFENG2001@GMAIL.COM
Mobile Phone No	(LOCAL) +65-94874108
Alternative Phone No	OFFICE-94874108

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	-
Exact Purpose for which vehicle was being used at time of accident	WORK
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5073521119-03
Cover Note Number	

Driver

Name of Driver	TOK KOK GUAN (ZHUO GUOYUAN)
NRIC No	S7111855Z
Date Of Birth	13/04/1971
Occupation	OUTDOOR
Date Of Driving Pass	06/08/1991
Driving Experience	27 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94874108
Fax Number	
Contact Number	OTHERS-94874108
E Mail Address	ZBAOFENG2001@GMAIL.COM

Address	BLK 129A CANBERRA STREET #06-638
Postcode	751129
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	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) 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)	2
Passenger 1	NAME: : NIL GENDER: : MALE

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

PLS REFER TO THE ATTACHED STATEMENT.

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	SJJ3606L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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. The 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 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:
24/12/2018

Guo

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

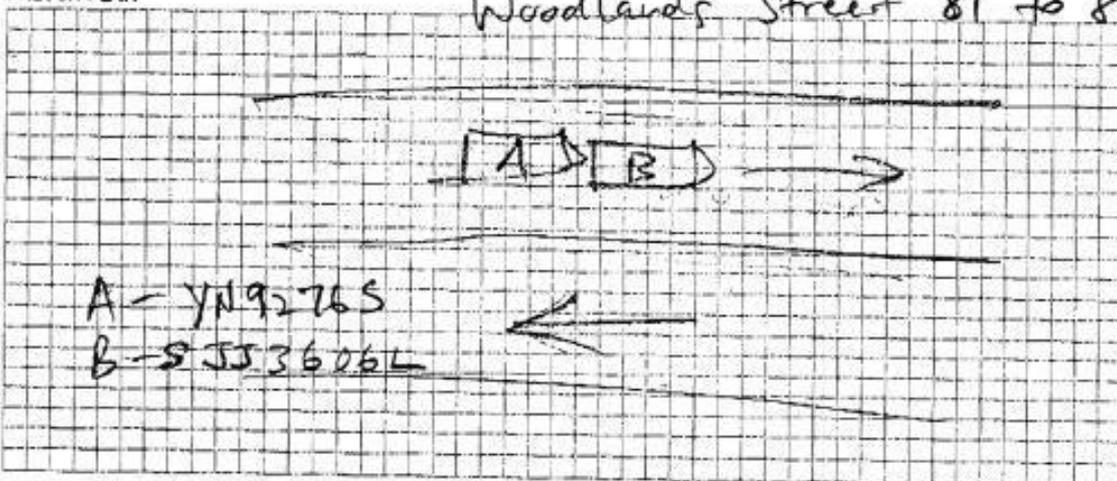
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

24/12/2018

Sketch Plan #2

SKETCH PLAN

Woodlands Street 81 to 82



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Vehicle A was driving along Woodlands Street 81 to 82. When while driving vehicle B in front of me suddenly stop and Vehicle A would not have time to stop and ~~hit~~ slightly hit on Vehicle B near porticus. Vehicle A damage was slight.

DECLARATION

I declare the foregoing particulars are true in every respect



Policyholder's Signature

Date & Time:

24/12/2018

GIARMC Sketch Plan Form, V3

Guan

Driver's Signature

(If driver is not the policyholder)

Date & Time:

24/12/2018

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



MT/NB/WELCOM/001

21 Aug 2018

POI HONG TRADING PTE LTD
BLK 14 #01-34
WHOLESALE CENTRE
SINGAPORE 110014

Dear Policyholder

YN 92343

**COMMERCIAL VEHICLE INSURANCE
POLICY NUMBER: 5073521119-03**

Thank you for insuring with Income. We are pleased to be able to help you with your protection and financial planning needs.

Please read the enclosed policy documents to make sure that the benefits meet your needs.

The main documents in this pack carry the Crystal Mark, an international seal of approval for the clarity of a document. It guarantees that a document is written in plain English and offers simple, clear and concise information. We are the first insurance company in Asia to carry out a major Crystal Mark initiative. We know that our customers want information that is easy to understand. By being as clear as possible, we help our customers make informed decisions.

For any correspondence on your Commercial Vehicle Insurance policy, please quote your policy number. This will allow us to help you quickly. Please also let us know if there are any changes to your home address and contact numbers.

If you have any queries, please contact our customer service officers on **6788 6616** or email us at **csquery@income.com.sg**. Alternatively, you may contact your agent WAN KWAI FAH CYNTHIA at **98779293** or email **cynthia.wan@income.com.sg**. Thank you.

Yours sincerely

Ken Ng
Chief Executive

10 Sin Ming Drive Singapore 575701
 Tel: 1800-CALL LTA (1800-2255 582) Fax: (65) 6553 5329

Our ref 0709150101N020140508

07 Sep 2015

POI HONG TRADING PTE LTD
 APT BLK 14 WHOLESALE CENTRE
 #01-34
 SINGAPORE 110014

90022771



Dear Sir/Madam

**NOTIFICATION ON REGISTRATION OF VEHICLE AND ROAD TAX
 (PLEASE DISPLAY THE ENCLOSED ROAD TAX DISC ON YOUR VEHICLE
 WINDSCREEN)**

We wish to inform you that you have successfully registered vehicle YN9276S on 07 Sep 2015. The Business Transaction Reference No. is 20150907152312510808. **Enclosed is a validated road tax disc for the vehicle. Please display the said disc on your vehicle windscreen.**

2. The following are the key owner and vehicle particulars for the vehicle. The full particulars are given at Annex A. Please check and ensure that the details are correct.

- | | | |
|-----|-------------------------|---|
| 1. | Name | : POI HONG TRADING PTE LTD |
| 2. | Identification No. Type | : Company |
| 3. | Identification No. | : 201012058E |
| 4. | Place Of Passport Issue | : - |
| 5. | Registered Address | : APT BLK 14 WHOLESALE CENTRE
#01-34
SINGAPORE 110014 |
| 6. | Mailing Address | : - |
| 7. | Vehicle No. | : YN9276S |
| 8. | Vehicle Type | : A50 - Goods (Closed) Van/Van Panel (Delivery) |
| 9. | Vehicle Scheme | : Normal |
| 10. | Vehicle Make | : MITSUBISHI |
| 11. | Vehicle Model | : CANTER FEB71ER4SDEC |
| 12. | Remarks | : - |

3. You may use your NRIC number and SingPass or User ID and Password (for non-Singaporeans/PRs) to login to <http://www.onemotoring.com.sg> and see the details of the above transaction. For ACRA-registered businesses and companies with EASY accounts, your authorised staff may also access the wide range of vehicle-related services via <http://www.onemotoring.com.sg> using EASY. If you do not have an EASY account, you can apply for it at <http://www.lras.gov.sg>. For non-Singaporeans/PRs who do not have a User Password, please contact us at 1800-CALL LTA (1800-2255 582) to request for a new password. Please note that a separate Transaction PIN is required for the following transactions via the Internet or at our Electronic Service Agents. Before you perform these transactions, please request for your Transaction PIN. You may find out more information on how to obtain your Transaction PIN and the documents needed (such as Board Resolution for companies and businesses, etc) via <http://www.onemotoring.com.sg> > **LTA Information & Guidelines > Transaction PIN & User Account.**

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





Driving License



Accident Photo



Accident Photo



Accident Photo

