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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	30/01/2019 11:13
Date Of Accident	29/01/2019 15:25
Exact Location Of Accident	BKE TWDS PIE AFTER MANDAI EXIT
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	XE3554M
Insured/Policyholder	
Name Of Registered Owner	KOK TONG TRANSPORT & ENGINEERING WORKS PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-96155910
Vehicle Particulars	
Manufacturer	ISUZU
Model	CYZ52K
Exact Purpose for which vehicle was being used at time of accident	WORKING
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
Insurance Company	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE

Fleet Policy NO

Policy Number DMCVSN1763211801

Cover Note Number -

Driver

Name of Driver TAN YEW LONG

NRIC No G8001917W

Date Of Birth 25/07/1988

Occupation OUTDOOR

Date Of Driving Pass 10/04/2015

Driving Experience 3 YEARS AND 9 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-82283380

Fax Number

Contact Number

EMail Address NOEMAIL

Address 14 JALAN PINANG 61 TAMAN DAYA 81100 JOHOR BAHRU

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 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?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO 1

Number of Passengers (Including Driver)

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

I WAS TRAVELLING ALONG BKE TWDS PIE AFTER MANDAI EXIT, SUDDENLY VEH B (BEARING NO XE4123S) WHICH WAS INFRONT OF ME JAMMED BRAKE, I MANAGE TO STOP BUT CANNOT STOP IN TIME. AS THE RESULT, MY LORRY HIT ONTO THE VEH B REAR PORTION.

Attachment(s)

Are accident photos available for attachment? YES

Was there any video captured by Car Camera? YES

Remarks/ Reasons: WITH DRIVER

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number XE4123S

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

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- 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.
- 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 ;
 - 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 crivelopes/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:
 - 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:

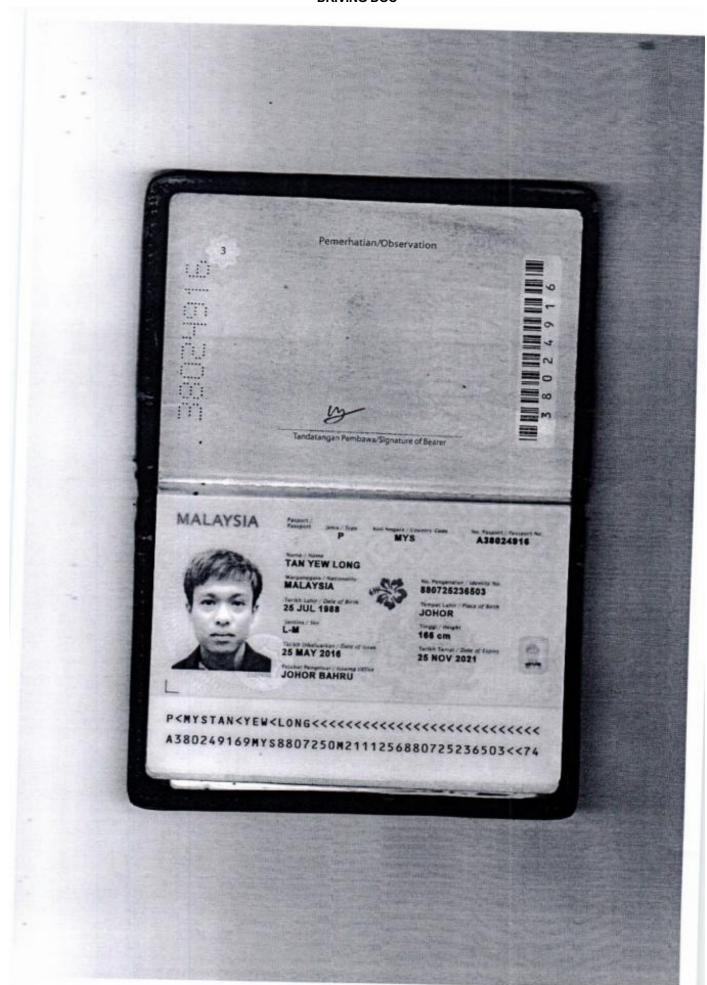
NRIC/FIN No.:

TCH SEAM	111	
1		A = XE 3559 M
20		B = XE 41235
LP.	7	
		BKE twees PIE After menda; Exit
CRIBE CIRCUMSTAN	ICES OF THE ACCIDENT	
Please	Refer	to Statement
RATION		
	rticulars are true in every re	Spect.
etare the foregoing pa	rticulars are true in every re	Spect.
ctare the foregoing pa	Driver's Signature (If driver is not the Date & Time;	Reporting Centra Responder Signature

DRIVING DOC







FWPOL546c - Notification Letter - Renew (Non-Reporting)



INISTRY OF MANPOWER

TAN YEW LONG KOK TONG CONSTRUCTION PTE LTD 27 PANDAN CRESCENT SINGAPORE 128476

XE3556015.



For Immigration Use (To clear by FIN)

25 Jan 2019

Your card will be delivered to you after we have verified your documents

Dear TAN YEW LONG

We have received a request to renew your work permit on 25 Jan 2019 and will be checking the documents submitted to us. Once this is completed, we will SMS / email the delivery details to your authorised recipient(s) at least 1 working day before the delivery.

This Notification Letter allows you to work and stay in Singapore until you get your new card. It is valid from 25 Jan 2019 till 24 Feb 2019.

You must return your existing card to us by 01 Feb 2019. You may mail it to the Work Pass Division, Ministry of Manpower, 18 Havelock Road, Singapore 059764.

Yours sincerely

Mdm Chow Choon Yen for Controller of Work Passes

TAN YEW LONG

G8001917W

WORK PERMIT NO

4 02453842

DATE OF APPLICATION 14 Mar 2016

DATE OF DEADLE

25 Jan 2019

27 Feb 2021

DATE OF BIRTH 25 Jul 1988

MALE

NATIONALITY

MALAYSIAN

TRAVEL DOCUMENT NO.

A38024916

TRAVEL DOCUMENT EXPIRY DATE

25 Nov 2021

YOUR EMPLOYER'S NAM

KOK TONG CONSTRUCTION PTE

LTD

SECTOR

CONSTRUCTION

OCCUPATION

LORRY/ TRUCK DRIVER

SALARY

\$850

A IMPORTANT

- · If the documents submitted are incomplete / incorrect, we will SMS / email the contact person provided to re-submit the documents. The card will only be delivered to the authorised recipient(s) 4 working days after the successful verification of documents.
- · You must keep this Notification Letter with you until you get your card. If you need to leave / enter Singapore, you will have to show this letter at the Immigration Checkpoints.

Ministry of Manpower Work Pass Division

nom.pov.sg Consact Us http://ww

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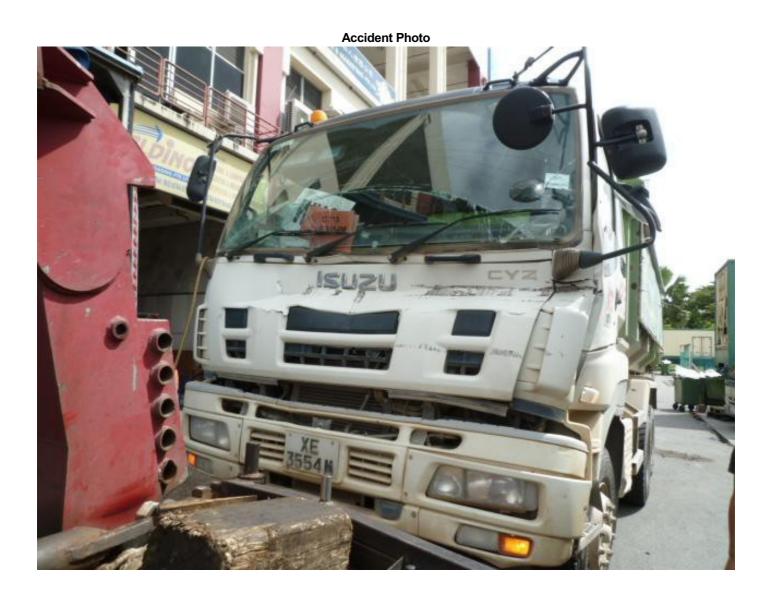
































CHASSIS NO : JALCYZ52KH7000065

U/W :12960 KG .

M/L/W: 28000 KG

PASS CAP : 02

TYRE SIZE : F 295-80R22-5(S)

: R 295-80R22-5(D)x2