

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	13/02/2019 10:31
Date Of Accident	12/02/2019 15:10
Exact Location Of Accident	ALONG CTE TOWARDS ANG MO KIO
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB5563A
Insured/Policyholder	
Name Of Registered Owner	SUNLED CO PTE LTD
Co Reg No	197903872C
Email Address	SALES@SPL-SG.COM
Mobile Phone No	(LOCAL) +65-82185523
Alternative Phone No	OFFICE-82185523

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE
Exact Purpose for which vehicle was being used at time of accident	DOING DELIVERY
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5050715177-07
Cover Note Number	

Driver

Name of Driver	WONG KOK MENG
NRIC No	S1433430J
Date Of Birth	22/08/1960
Occupation	OUTDOOR
Date Of Driving Pass	25/07/1983
Driving Experience	35 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82185523
Fax Number	
Contact Number	OTHERS-82185523
Email Address	SALES@SPL-SG.COM

Address	BLK 119B KIM TIAN ROAD #05-238
Postcode	162119
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: : COLLEAGUE 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

PLEASE REFER TO SKETCH PLAN

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	SKE5925S
Vehicle Make/Model/Colour	BMW
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

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.

X



Policyholder's Signature
Date & Time:

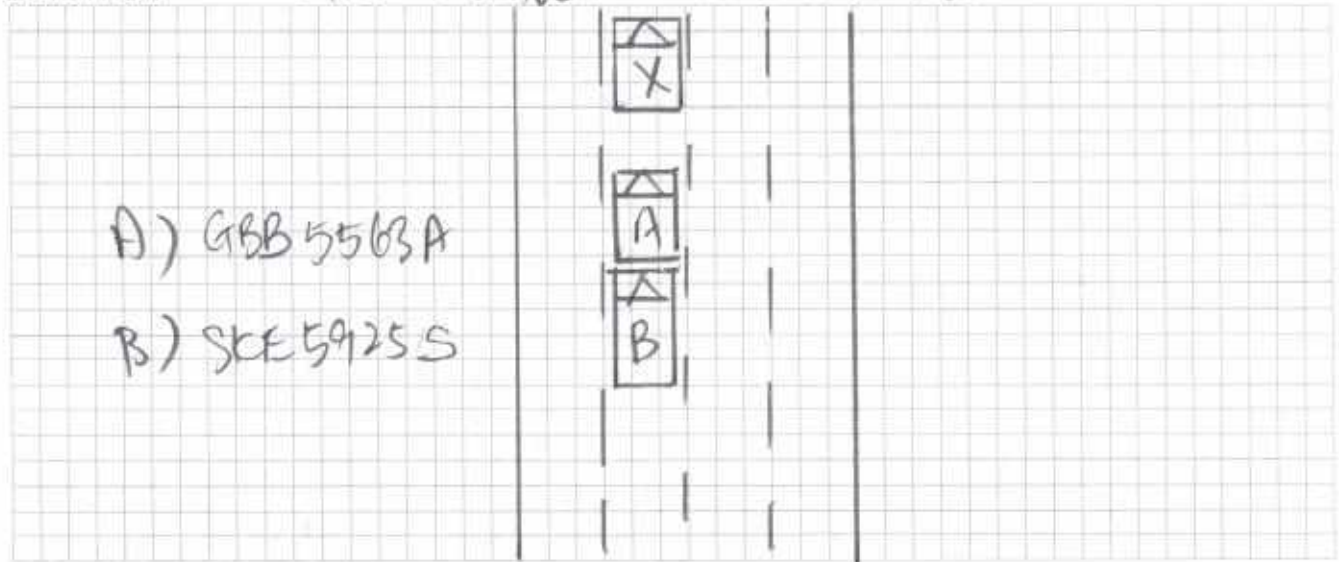
 12/2/19

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

 13/02/2019
Reporting Centre Personnel's Signature
Name: 
NRIC/FIN No.:

SKETCH PLAN

CTE TOWARDS ANG MO KIO.



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 12/07/2019 AT ABOUT 15:10HRS I WAS TRAVELLING
 TOWARDS CTE TOWARDS ANG MO KIO. SUDDENLY A TAXI IN FRONT
 OF ME JAM BRAKE SO I ALSO BRAKE LESS THAN 2
 SECONDS A.I FELT A BANG FROM BEHIND. A CAR SCE5925S
 BANG BEHIND OF MY VAN GBB 5563A. I TOOK
 SOME PHOTO & MOVE ON.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

X



Policyholder's Signature
 Date & Time:

[Signature] 12/2/19
 Driver's Signature
 (If driver is not the policyholder)
 Date & Time:

[Signature] 13/07/2019
 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:

Claim Handling

Accident MT/1031781

Policy No.	000713177-07	Vehicle No.	GBB5563A	GST Registration No.	
Certificate No.					
Policyholder Name	SUNLED CO PTE LTD	Policyholder NRIC	197903872C		
Product Code	COMMERCIAL VEHICLE INSURAN	Cover Type	Third Party	Loading	0
Contact No.(Mobile)	83185523	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remarks		eCode	No
KPI	<input type="radio"/> No <input type="radio"/> Yes	TCA	<input type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	50	Private Hire	No

Accident Details

Report Date	13/02/2019 10:40	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	13/02/2019	Time of Accident Incident	15:10	Country of Accident	Singapore
Reporting Centre		Orange Force		IDM No.	
Accident Location	ALONG CTE TOWARDS ANG MO KIO				

Excess

Own damage Excess	0.00	Additional Excess		Windscreen Excess	0.00
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			

Benefits

GST Registered Information

GST Registered	No	GST Registration Date		GST Status Verified	No
GST Registration No.					
Modification History					

Policyholder Mailing Address

Address 1	203B HENDERSON ROAD	Address 2	#11-13 HENDERSON INDUSTRI	Address 3	SINGAPORE 138546
Address 4		Address Type	Singapore address	Post Code	159548
Unit No.		Related Policy Number	0006324205-06		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	WONG KOK HENG	Driver NRIC	S14334301	Driver DOR	72/08/1960
Register Date of Driver License	25/07/1983	Driver Age	36	Driving Experience	35
Contact No.(Mobile)	82185523	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 1190 #05-238	Address 2	KIM TIAN ROAD	Address 3	KIM TIAN L18
Address 4	SINGAPORE 162119	Address Type	Foreign address	Post Code	162119
Unit No.	05-238				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.	GBB5563A	Driver Insurer Company	ICUC

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any Injury?	<input type="radio"/> Yes <input type="radio"/> No
-------------------------------------	------	-------------	--

Modification History

Claim 001 **NEW**

Claim Type *	OD-MX	Insured Name	SUNLED CO PTE LTD	Insured NRIC	197903872C
Contact No.(Mobile)		Contact No. (Home)		Contact No. (Office)	87777777
Email Address		OL Vehicle Number	GBB5563A	TP Vehicle Number	84E10155
Claim Description	GBB5563A / SKET9255 ON 12 Feb 2019			Name of Preferred Workshop	
Preferred Workshop		Insured Liability	Not at Fault	GSA report	Received
Reclaim No. Finalisation	Yes	Repair Option	Preferred Workshop, Name unknown		
Date Registered	13/02/2019 10:51	Claim Close Date		Date Received	13/02/2019 00:00
Report Taken By	BOSLI WAHAB				

Print AK letter

Save Submit

Attachment

Accident No.	MT/1031781	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	13/02/2019 10:52

Path *

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen









Message Read

Category *	Confidential	Urgency *	Description *
Please Select	NO	Normal	
Please Select	NO	Normal	
Please Select	NO	Normal	
Please Select	NO	Normal	
Please Select	NO	Normal	
Please Select	NO	Normal	

Send Message

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent (CO)
	NAC_BUKIT_MERAH_8006761 NATIONAL ASSESSMENT CENTRE SERVICE 5 (BUKIT MERAH) on 13 Feb 2019 10:52	Photos	Normal	Photos 2019-2-13	
	NAC_BUKIT_MERAH_8006761 NATIONAL ASSESSMENT CENTRE SERVICE 5 (BUKIT MERAH) on 13 Feb 2019 10:52	Photos	Normal	Photos 2019-2-13	
	NAC_BUKIT_MERAH_8006761 NATIONAL ASSESSMENT CENTRE SERVICE 5 (BUKIT MERAH) on 13 Feb 2019 10:52	Photos	Normal	Photos 2019-2-13	

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Feb 2019 10:52	Photos	Normal	Photos 2019-2-13	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Feb 2019 10:52	Photos	Normal	Photos 2019-2-13	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Feb 2019 10:52	Photos	Normal	Photos 2019-2-13	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Feb 2019 10:52	Photos	Normal	Photos 2019-2-13	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Feb 2019 10:52	Photos	Normal	Photos 2019-2-13	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Feb 2019 10:52	Photos	Normal	Photos 2019-2-13	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Feb 2019 10:51	Photos	Normal	Photos 2019-2-13	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Feb 2019 10:51	Photos	Normal	Photos 2019-2-13	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Feb 2019 10:51	Photos	Normal	Photos 2019-2-13	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Feb 2019 10:51	SAS	Normal	SAS 2019-2-13	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 13 Feb 2019 10:51	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-2-13	
Video List					
Uploaded By/Date	Folder Date	File Name		Source	Action
		Display in new Window Scan and uploading			

ACCIDENT STATEMENT

ACCIDENT DATE: (12/2/19) (DD/MM/YYYY), TIME: (1510) (HH:MM)

LOCATION: CTE TO AMK

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: 688 5563A
 b) INSURANCE COMPANY: NTUC
 c) POLICY NUMBER: 5050715177-07
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: Toyota Hiace
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: Delivery
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: S Loh PTE LTD (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 197403872C CONTACT: _____
 c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Wong Kok Meng (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S14324301J CONTACT: 82485523
 c) ADDRESS: Blk 114B 10m 71cm RD # 05-238
S'pore 162119

* d) DATE OF BIRTH: (22/8/1960) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 26/7/1983

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)
 b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SKE 5925S MODEL: BMW
 b) DRIVER'S NAME: _____
 c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
 e) DRIVER'S NAME: _____
 f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

Email = Sales@SPL-SG.com

VIDEO

PUBLIC OF SINGAPORE
IDENTITY CARD NO. S1433430J



Name
WONG KOK MENG

黄国明

Race
CHINESE

Date of birth
22-08-1960

Sex
M

Country of birth
SINGAPORE

REPUBLIC OF SINGAPORE **DRIVING LICENCE**



Licence Number **S1433430J**

Name
WONG KOK MENG

Birth Date **22 Aug 1960**

Issue Date **14 May 2003**

10004849278

43



NRIC No. **S1433430J**



Date of issue
29-01-2009

Address
**APT BLK 119B KIM TIAN ROAD
#05-238
SINGAPORE 162119**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

Class 3 Motor Cars and Motor Tractors the weight of which when laden does not exceed 2,000 kilograms

PASS DATE
25 Jul 1963

Licence No: S1433430J

NP 428A

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 Number : 5050715177-07

Cover : Third Party

- | | |
|---|---------------------|
| 1. Index mark and Registration Number of Vehicle | : GB85563A |
| Chassis Number | : JTFHT02P000045189 |
| 2. Name of Policyholder | : SUNLED CO PTE LTD |
| 3. Effective Date of Insurance | : 15 Jul 2018 |
| 4. Expiry Date of Insurance | : 14 Jul 2019 |
| 5. Persons or Classes of Persons entitled to drive# | |
| (a) The Policyholder. | |
| (b) Any other person who is driving on the Policyholder's order or with his/her permission. | |
| 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. | |
| 6. Limitations as to Use# | |
| (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession. | |
| (b) Use for the carriage of passengers or goods in connection with the Policyholder's business. | |

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: N/A
INSURE WITH COE	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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)

Agency : LOO KENG HONG INSURANCE AGENCY (00000591250)
 Date of Issue : 21 Jun 2018 15:13 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

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

15 Jul 2009

Our ref 1507090101N004368961

SUNLED CO. PTE. LTD.
BLK 35 KALLANG PUDDING ROAD
#06-13
TONG LEE BUILDING BLOCK A
SINGAPORE 349314

001517/1



Dear Sir/Madam

NOTIFICATION ON REGISTRATION OF VEHICLE AND ROAD TAX

We wish to inform you that you have successfully registered vehicle GBB5563A on 15 Jul 2009. The details of the registration are as follows:

A) Owner Particulars

- | | | |
|----|-------------------------|---|
| 1. | Name | : SUNLED CO. PTE. LTD. |
| 2. | Identification No. Type | : Company |
| 3. | Identification No. | : 197903872C |
| 4. | Place Of Passport Issue | : - |
| 5. | Registered Address | : BLK 35 KALLANG PUDDING
ROAD
#06-13
TONG LEE BUILDING BLOCK A
SINGAPORE 349314 |
| 6. | Mailing Address | : - |

B) Vehicle Particulars

- | | | |
|-----|-----------------------------|--|
| 1. | Vehicle No. | : GBB5563A |
| 2. | Previous Vehicle No. | : - |
| 3. | Effective Date of Ownership | : 15 Jul 2009 |
| 4. | Original Registration Date | : 15 Jul 2009 |
| 5. | First Registration Date | : 15 Jul 2009 |
| 6. | Vehicle Type | : A50 - Goods (Closed) Van/Van Panel
(Delivery) |
| 7. | Vehicle Scheme | : Normal |
| 8. | Attachment 1 | : No Attachment |
| 9. | Attachment 2 | : - |
| 10. | Attachment 3 | : - |
| 11. | Vehicle Make | : TOYOTA |
| 12. | Vehicle Model | : HIACE MANUAL |
| 13. | Year of Manufacture | : 2009 |
| 14. | Primary Colour | : Silver |
| 15. | Secondary Colour | : - |
| 16. | Passenger Capacity | : 2 |
| 17. | Chassis/Trailer Chassis No. | : JTFHT02P000045189 / - |
| 18. | Propellant | : Diesel |
| 19. | Engine No./Motor No. | : 1KD1938781 / - |