

## 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	01/03/2019 12:33
Date Of Accident	28/02/2019 23:45
Exact Location Of Accident	FORT RD TWDS MARINA EAST DR
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	XD5779Z
<b>Insured/Policyholder</b>	
Name Of Registered Owner	KOK TONG TRANSPORT & ENGINEERING WORKS PTE LTD
Co Reg No	199904117E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-899999999

### Vehicle Particulars

Manufacturer	VOLVO
Model	FMX370 64R SLEEPER CAB
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	DMCVSN1804791800
Cover Note Number	

### Driver

Name of Driver	YANG HAIWEI
Passport No/FIN	G7757019K
Date Of Birth	29/10/1975
Occupation	OUTDOOR
Date Of Driving Pass	18/09/2017
Driving Experience	1 YEAR AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87121864
Fax Number	
Contact Number	OFFICE-87121864
Email Address	NOEMAIL

Address	BLK 510 OLD CHOA CHU KANG ROAD #09-104 SUNGEI TENGAH LODGE
Postcode	698904
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 - CHANGE/CROSS LANE
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	WYQ765 (PRIVATE CAR)
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
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	MARINA BAY N.P.C
Police Station Address	<b>ROAD:</b> 1 PRINCE EDWARD LINK , <b>POSTCODE:</b> 078872 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT - T/20190301/2035.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO FOOTAGE WITH TRAFFIC POLICE
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	WYQ765
Vehicle Make/Model/Colour	
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)

2

Passenger 1

NAME: :

GENDER: :

## Accident Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

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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:

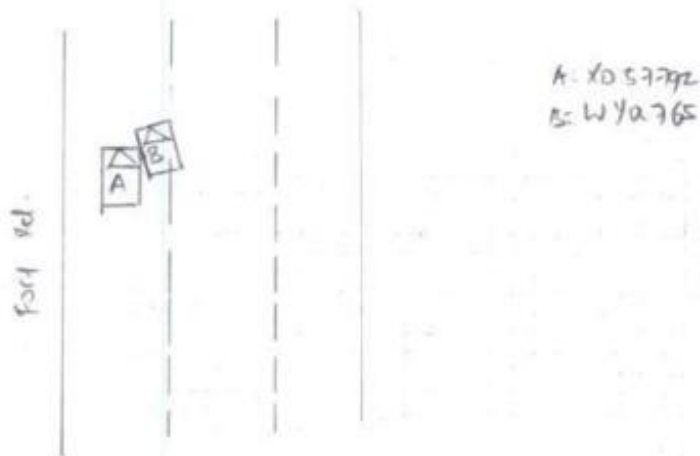
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

# Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

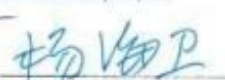
Refer to police report - 7/2019/0301/2015.

## 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:  
NRBC/FIN No.:

# Police Report



**SINGAPORE  
POLICE FORCE**



T/20190301/2035

Police Station Of Origin:  
Marina Bay N.P.C  
70 Marina View SINGAPORE 018962  
Tel No: 1800-2229999

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Report No: T/20190301/2035

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/03/2019 11:14		Vide Report No.: G/20190301/0002		Station Diary No.: 28	
<b>Informant's Particulars</b>					
Name of Informant: YANG HAI WEI			Address: APT BLK 510 OLD CHOA CHU KANG ROAD #09-104 SUNGEI TENGAH LODGE SINGAPORE 698904		
ID Type / ID No.: FIN NO / G7757019K			Contact No.: Home/Office: Mobile: 87121864		
Nationality: CHINESE			Email:		
Sex: Male	Age: 43	Date of Birth: 29/10/1975	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Lorry driver			Driving Licence Information: Class: 2B,3,4 Date of Expiry: 04/11/2021		

## General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 01/03/2019 00:40	Type of Location: Straight Road
Location: Along Road 1 FORT ROAD				
Travelling from Fort Rd to Marina East Drive in between exit of ECP and entrance of East Coast Park Service Road				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 50 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
WYQ765	Car				Slightly Damaged	1
XD5779Z	Lorry				Slightly Damaged	0

## Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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## Police Report



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T/20190301/2035

Police Station Of Origin:  
Marina Bay N.P.C  
70 Marina View SINGAPORE 018962  
Tel No: 1800-2229999

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Report No. T/20190301/2035

### CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
XD5779Z	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	dmcvs180479180 0	07/02/2018	08/04/2019

### Brief Details.

On 28/02/2019 at about 2345hrs, I was travelling about 50km/h along Marina East Drive and was making my way to Marina East Staging Ground to deliver some soil for work. While driving at the left most lane, I noticed that there was another car travelling beside the lorry, positioned slightly in front of the lorry. I then noticed that the car tried to overtake the lorry however was too close and I then applied the brakes however could not stop in time and the right front side of my lorry came in contact with the car's left front passenger door. There was damage to the car however there was no injury to the driver or the passenger. I then informed my supervisor of what happened and my supervisor called for police and traffic police attended to the scene. I asked the driver why he tried to overtake me in that manner and he mentioned that he was trying to turn left into the ECP service road. The driver of the other vehicle kept questioning me how I intend to settle the matter, by insurance claim or by settling privately. I then referred them to my supervisor. At this point I did not argue with them as I had an in car camera. The traffic police attended to the scene and took my Micro SD card from my in car camera and to advised me to make a traffic accident report. That is all.

# Police Report



SINGAPORE  
POLICE FORCE



T/20190301/2035

Police Station Of Origin:  
Marina Bay N.P.C  
70 Marina View SINGAPORE 018962  
Tel No: 1800-2229999

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Report No. T/20190301/2035

## 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:

A /

~~Sgt 2 NUR ANNISA BINTE MOHAMMAD~~

~~ZAINAL~~ *Sgt Bilal*

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Staff Sgt LEE GUANG HUI

Contact No.: 65476138

Signature Of Informant:

*杨海卫*

Date/Time:

01/03/2019 11:14

Classification Of Case:

Authentication Stamp

NP168



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



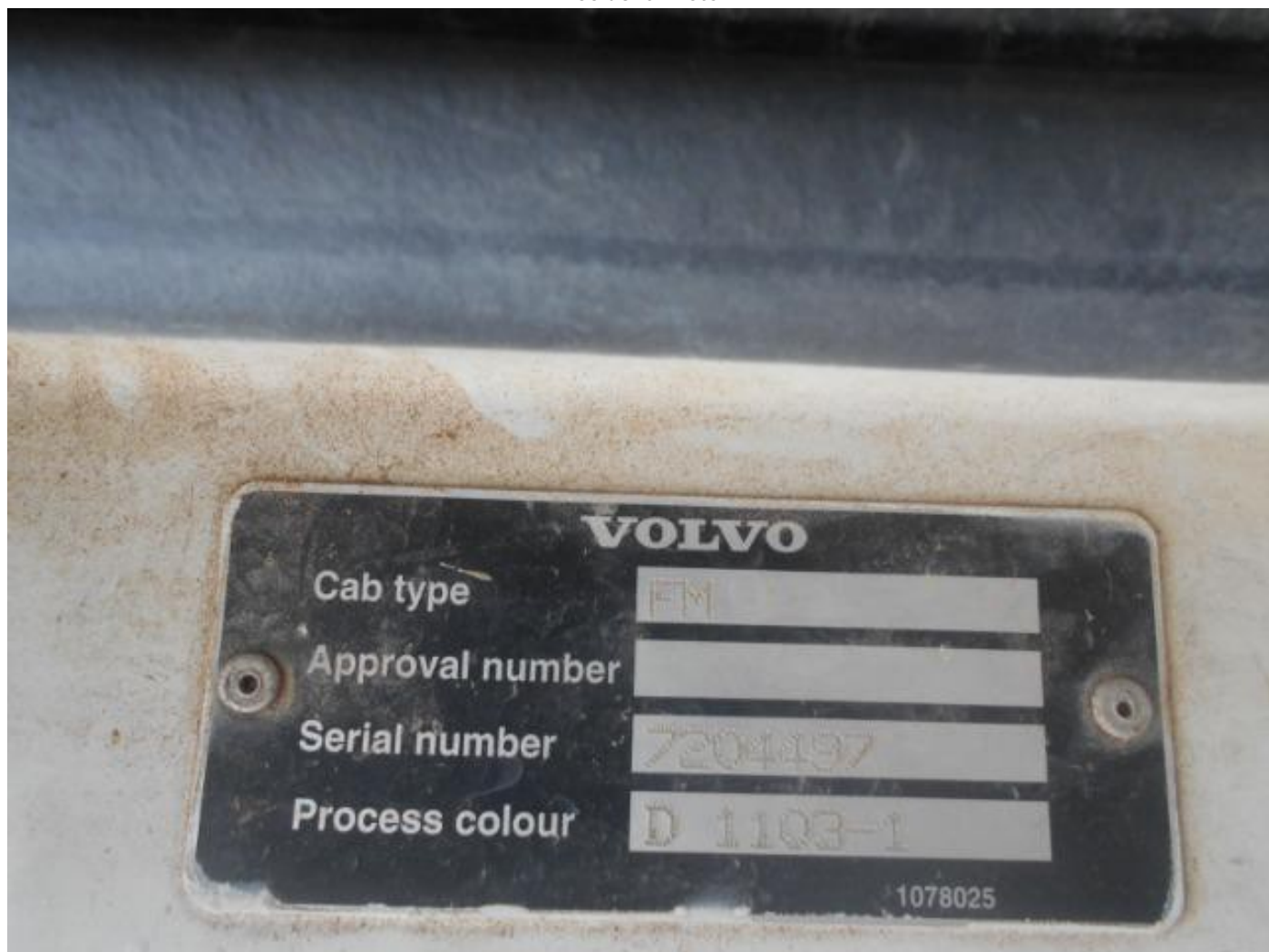


Accident Photo



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