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IP insurer:	Ass't Report by	Fax / Hand to	0 Owner/Wksp			
Preferred Wksp / INC Assign Wksp / QW: (		The second second	Tel:	Fax:	-	
TP Particulars: Veh No: Jk	2775GP	INC (	)/Non-INC(	).		
Owner / Driver: (			Tel:	-	)	- 527
Policy No: ( )	Period: (	)	Cover Type: (		)	
Confirmed by : (		Date:	Time:		)	
Insured/Driver Liability: ( %)	[Note-Est. Status (W	O): N: 0-20	%; P: 21-79%. P:	80-1009	%1	-
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#### 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.

**ACCIDENT STATEMENT** 

CANADA STREET, SALES OF	ACCIDENT STATEMENT
Date Of Report	12/04/2019 14:58
Date Of Accident	11/04/2019 13:25
Exact Location Of Accident	BUKIT MERAH LANE 3 OPEN SPACE CARPARK
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	YM1228P
Insured/Policyholder	
Name Of Registered Owner	M/S ISLAND RECOVERY SERVICES
Co Reg No	53120055L
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91828211
Alternative Phone No	OFFICE-91828211
Vehicle Particulars	
Manufacturer	ISUZU
Model	NHR69EU3ES
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 FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMCVSN1758871801
Cover Note Number	
Driver	
Name of Driver	TAN WEI YAN, DESMOND
NRIC No	S9043537Z
Date Of Birth	13/11/1990
Occupation	OUTDOOR
Date Of Driving Pass	09/07/2016
Driving Experience	2 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88096968
Fax Number	
Contact Number	OFFICE-88096968
EMail Address	NOEMAIL

Address BLK 133 BEDOK RESERVOIR ROAD

#08-1213

Postcode 470133

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

insurance Company of Driver's Own Venicle

General Information of the Accident

Type Of Accident COLLISION - MAJOR/MINOR RD

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

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.

Number of Passengers (Including Driver)

Passenger 1 NAME: :

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

ON STATED DATE AND TIME, I WAS TRAVELLING ALONG THE STATED VENUE. SUDDENLY VEHICLE B REVERSED FROM THE CARPARK LOT AND HIT ONTO MY VEHICLE RIGHT PORTION

NO

2

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 SKZ7759P

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver TAN KIM KEE
NRIC/Passport Number S2562408D

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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 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:
  - 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)

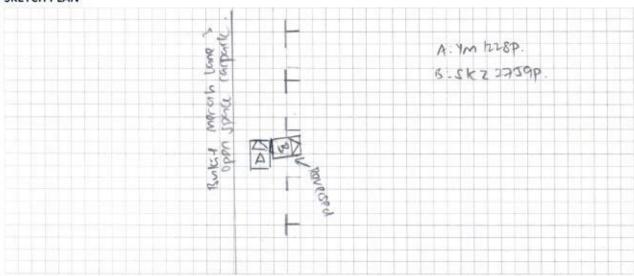
Date & Time:

Reporting Centre Pe

Name:

NRIC/FIN No.:

nnel's Signature



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to	Hatement.	

DECLARATION

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

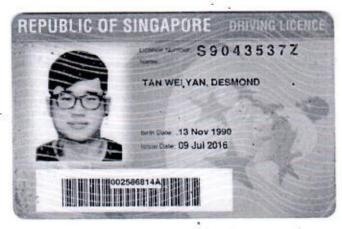
Policyholder's Signature Date & Time:

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

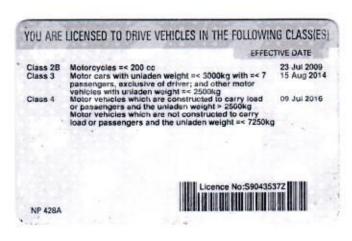
Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:











# 中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD.

Co. Reg. No. 200208384E

MZ300/C R SN AN0420A Cov.Type: F

MOTOR COMMERCIAL VEHICLE

## CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 1 Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

**ORIGINAL** 

CERTIFICATE No.

DMCVSN1758871801

Engine No :43G2261659 Chano: JAANHR69E57100242

1. Index Mark and Registration

Number of Vehicle

YM1228P

2. Name of Policy Holder

M/S ISLAND RECOVERY SERVICES

Effective date of the Commoncement of Insurance for the purposes of the Regulations, Ordinance or Enactment

15 September 2018 Excess Sect. II ................. 5\$1,000.00

4. Date of Expiry of Insurance

14 September 2019

5. Persons or Classes of Persons entitled to drive"

Any person who is driving on the Policyholder's order or with their 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:
  - (1) Use in connection with the Policyholder's business.
  - (2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
  - (3) Use for social, domestic or pleasure purposes.
  - The Policy does not cover.
  - (1) Use for hire or reward or racing, pace-making, reliability trial or speed testing.
  - (2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

HIRE PURCHASE CO.: SWEE SENG CREDIT PTE LTD AS HP OWNER

\*Limitations randered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Maleysia), are not to be included under these headings.

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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

ISSUED BY: \_\_\_\_\_INXPRESS INSURANCE AGENCY . PIE LTD Authorised Officer

Authorised Signatory