

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	12/04/2019 16:15
Date Of Accident	12/04/2019 10:00
Exact Location Of Accident	JUNCTION OF BT. TIMAH RD & FOURTH AVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP768M
Insured/Policyholder	
Name Of Registered Owner	MUA HIN POULTRY FARM PTE LTD
Co Reg No	197700851H
Email Address	MAY@HENGGUAN.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-67568070

Vehicle Particulars

Manufacturer	HINO
Model	XZU710R-HKFMS3-4.0 D (M)
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
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	ERGO INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCG19000118
Cover Note Number	06/01/19 - 05/01/20

Driver

Name of Driver	XU HUIQIANG
NRIC No	G8543215Q
Date Of Birth	17/04/1978
Occupation	OUTDOOR
Date Of Driving Pass	16/03/2018
Driving Experience	1 YEAR AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83354415
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	C/O MUA HIN POULTRY FARM PTE LTD
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?	YES
Was any injured conveyed to hospital by ambulance?	YES
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	YISHUN NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 31 YISHUN CENTRAL , POSTCODE: 768827 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8529999 - FAX NO: 68522299
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT ATTACHED.

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	SK8888U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN SOO KHOON
NRIC/Passport Number	S0157517A
Contact Number	96381298
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1	
Name	TAN SOO KHOON
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SK8888U
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

Sketch Plan

SKETCH PLAN

VEHICLE NO.: YP 768 M
INSURER : ERGO
DATE & TIME: 12/4/19 @ 10:00am

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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:

may

許金

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



Reporting Centre Personnel's Signature
Name: *(YS)*
NRIC/FIN No.:

12/4/19

SKETCH PLAN

Fourth Ave

A = YP768M
B = SK8888U
Tan Soo Kheon
S0157517A
HP-96381298

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Bt. Timah Rd

Refer to Police Report No: T/20190412/2150

Note : Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information.

DECLARATION

I declare the foregoing particulars are true in every respect.



Policyholder's Signature
Date & Time:

may

24/2/19

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



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

12/4/19
(45)

() Claim Own Policy () Claim Third Party () Reporting Only
() Claim OD/TP at other workshop ()



**SINGAPORE
POLICE FORCE**



T/20190412/2100

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

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Report No. T/20190412/2100

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/04/2019 15:29		Vide Report No.: E/20190412/0066		Station Diary No.: 115	
Informant's Particulars					
Name of Informant: XU HUIQIANG			Address: C/O 32 SENOKO CRESCENT SINGAPORE 758280		
ID Type / ID No.: FIN NO / G8543215Q			Contact No.: Home/Office: Mobile: 83354415		
Nationality: CHINESE			Email:		
Sex: Male	Age: 40	Date of Birth: 17/04/1978	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: DELIVERY DRIVER			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 12/04/2019 10:00	Type of Location: X-Junction
Location: Junction of Road 1 and Road 2 BUKIT TIMAH ROAD ENG NEO AVENUE Cross junction of Bukit Timah Road and Eng Neo Avenue Lamp Post Number: 195				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SK8888U	Car	AUDI		Blue		0
YP768M	Lorry	HINO		White	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
YP768M		DMCG19000118	06/01/2019	05/01/2020



**SINGAPORE
POLICE FORCE**



T/20190412/2100

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31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

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Report No. T/20190412/2100

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAN SOO KHOON	ID No.	S0157517A
Related Vehicle	SK8888U (Car)	Contact No.	96381298
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	XU HUIQIANG	ID No.	G8543215Q
Related Vehicle	YP768M (Lorry)	Contact No.	83354415
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 12/04/2019 at about 1000hrs, I was driving my company's vehicle YP768M (white Hino lorry) at the cross junction of Bukit Timah Road and Eng Neo Avenue. It was a 4 lanes road and there was another vehicle SK8888U travelling in front of me. While driving straight on second lane, I observed that the traffic light signal was turning from amber to red; thereafter the front vehicle SK8888U suddenly performed an emergency brake. I could not stop my vehicle in time and collided onto the rear portion of SK8888U.

After the incident, I managed to obtain the particulars of the driver of SK8888U. Ambulance and Traffic Police officers came to scene. The ambulance sent the driver of SK8888U to the hospital. I was given a case card reference E/20190412/0066 by the Traffic Police officer. I did not sustained any injuries for this incident. There is no vehicle camera installed on my vehicle. This is the first time such an incident happened.



**SINGAPORE
POLICE FORCE**



T/20190412/2100

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Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

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Report No. T/20190412/2100

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:

L /

Staff Sgt LAU JIXIANG

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Insp TAN CHIN YONG

Contact No.: 65476178

Signature Of Informant:

Date/Time:

12/04/2019 15:29

Classification Of Case:

Authentication Stamp
NP168



Signature:

Singapore Police Force

SN 085

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



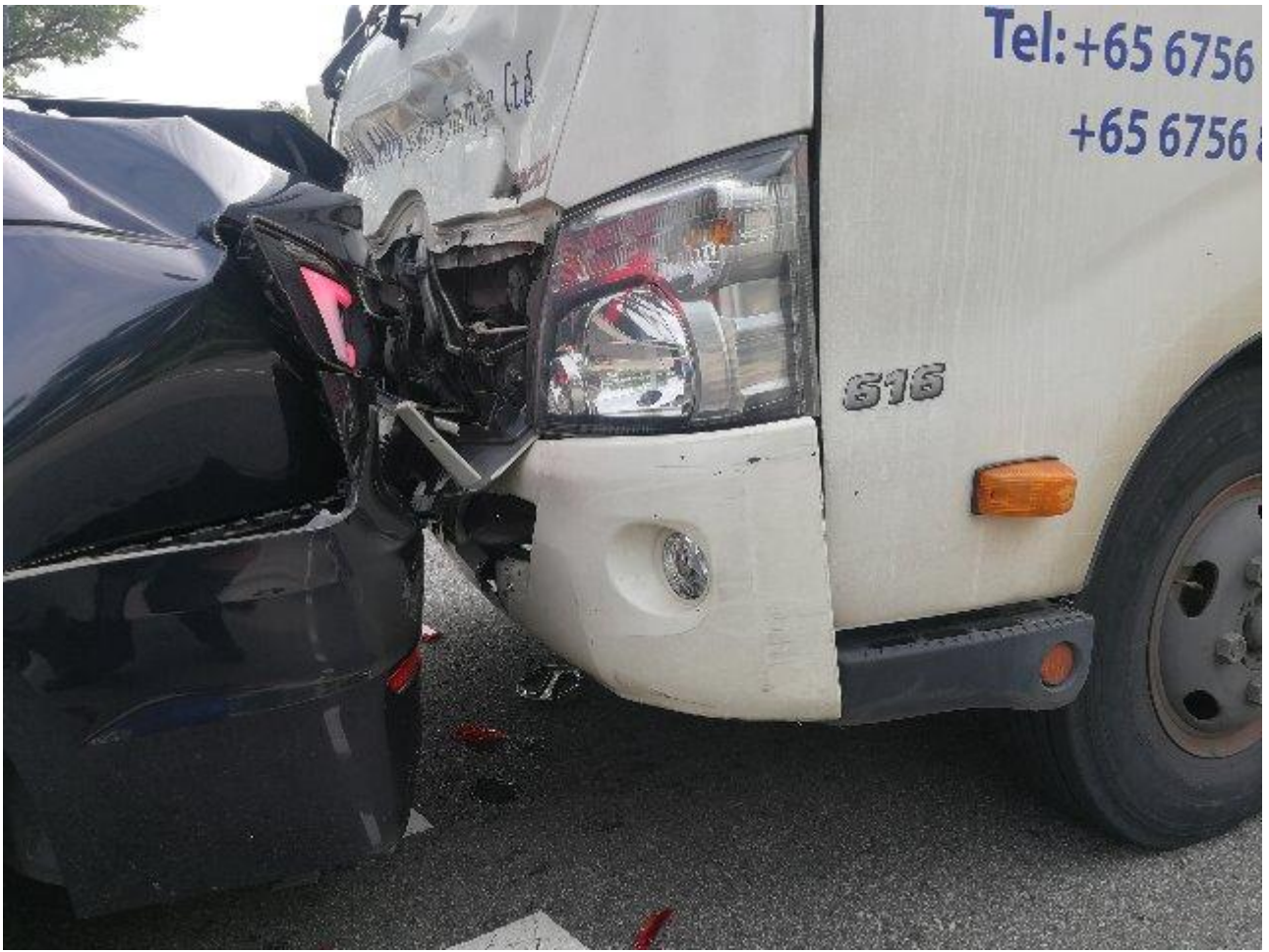
SCENE



SCENE



SCENE



SCENE

