

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 ability.
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	08/08/2018 10:47
Date Of Accident	07/08/2018 18:35
Exact Location Of Accident	BKE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	XD5423A
Insured/Policyholder	
Name Of Registered Owner	CHUAN LIM CONSTRUCTION PTE LTD
Co Reg No	199600684W
Email Address	DANNING.DING@CHUANLIM.COM
Mobile Phone No	
Alternative Phone No	OFFICE-65714412

Vehicle Particulars

Manufacturer	SCANIA
Model	P380CB6X4MHZ
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?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	ERGO INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCV17S016409
Cover Note Number	29/11/17 - 28/11/18

Driver

Name of Driver	LI YANMING
Passport No/FIN	G2155980L
Date Of Birth	22/08/1979
Occupation	OUTDOOR
Date Of Driving Pass	20/02/2017
Driving Experience	1 YEAR AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91696602
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	-
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
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)	1

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

REFER 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	SKT4270A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	HAMBALI SIDDEQ BIN ABDUL RAHMAN
NRIC/Passport Number	S8339924D
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GBF4766J
Vehicle Make/Model/Colour	

Details Of Properties

Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	TIN MAUNG SWE
NRIC/Passport Number	S2727493E
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

VEHICLE NO.: XD 5423A
INSURER : Ergo
DATE & TIME: 15/18/25

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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:



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

(15) 09/18/25
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

A: XDS423A
B: SKT4270A
Humboldt Sidedig Bin Abdr.
Ruhman
S83399242
Hp:-
C: GDF4766S
Tin Mining Swe.
SP227493E

Hp - -

Insurer: Ergo Veh No: X05423A DOR: 7/8/18 15:35

It was heavy traffic at my lane thus I decide to go by SLF while filtering lane my vehicle collided onto the rear of SKT4270B. Upon slight, I realised was involved in chain collision of 3 vehicles.

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.

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

NRIC/FIN No.:

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



S PASS
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employed by
CHUAN LIM CONSTRUCTION PTE LTD

Industry: **CONSTRUCTION**



LI YANMING
Occupation
LORRY DRIVER

S Pass No.
0-75283717

Date of Application

27-07-2017

Date of Issue

17-08-2017

Date of Expiry

17-08-2019



L8241032

REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number **G2155980L**

Name
LI YANMING

Birth Date **22 Aug 1979**

Issue Date **07 Aug 2013**

Valid Till **06 Aug 2018**



002211006J

VISIT PASS
Immigration Regulations

Name
LI YANMING



Date of Birth	Sex	Nationality
22-08-1979	M	CHINESE
FIN	Date of Issue	Date of Expiry
G2155980L	17-08-2017	17-08-2019

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

EFFECTIVE DATE

Class	Description	Effective Date
Class 1B	Motorcycles up to 250 CC	07 Aug 2013
Class 1	Motor cars up to 3500 kg, with up to 7 passengers, exclusive of the driver, and motor tractors up to 2500 kg	07 Aug 2013
Class 2	Heavy motor cars and motor tractors > 2500 kg	20 Feb 2017

G2155980L

S / No. 9000258949

UP 425A



License No. G2155980L

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

