

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	08/05/2019 13:19
Date Of Accident	08/05/2019 07:15
Exact Location Of Accident	PIE TOWARDS TUAS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB3746C
Insured/Policyholder	
Name Of Registered Owner	SAN HSING FOOD MANUFACTURING
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93382683
Alternative Phone No	OFFICE-93382683

Vehicle Particulars

Manufacturer	NISSAN
Model	-
Exact Purpose for which vehicle was being used at time of accident	WORK
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	LONPAC INSURANCE BHD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z19VC05001466
Cover Note Number	

Driver

Name of Driver	NG PANG HENG (HUANG BANGXING)
NRIC No	S7134469Z
Date Of Birth	02/10/1971
Occupation	OUTDOOR
Date Of Driving Pass	01/09/1992
Driving Experience	26 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93382683
Fax Number	
Contact Number	OTHERS-93382683
EEmail Address	NOEMAIL

Address	BLK 677B JURONG WEST STREET 64 #14-299
Postcode	642677
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	RAINING
Road Surface	WET

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)	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

PLS REFER TO THE ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	REVERT
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBG7341J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	ADEN LEE KOK GEE
NRIC/Passport Number	S1486939E
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

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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.



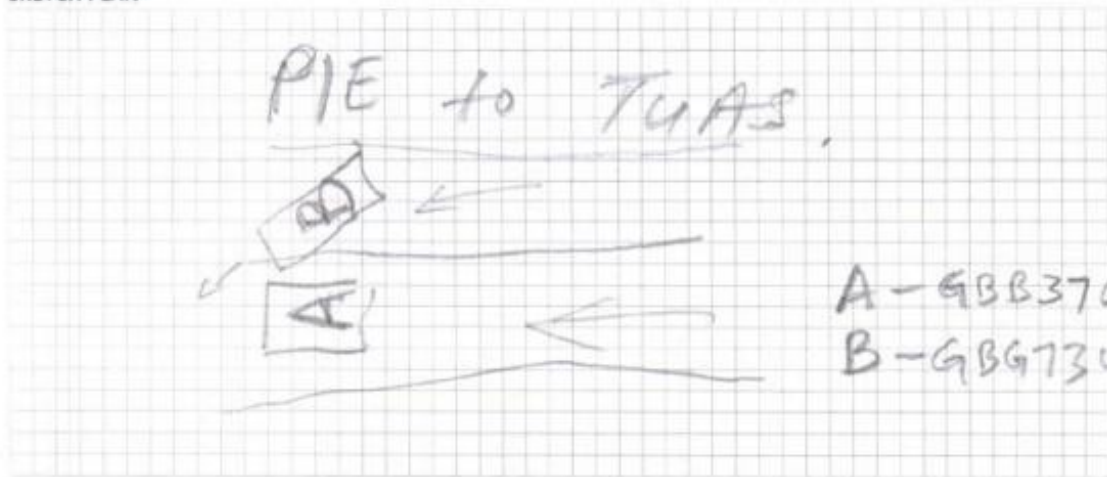
Policyholder
Date & Time:

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

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

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Vehicle A was driving along PIE towards Tuas. When I was driving straight suddenly Vehicle B change and cross lane and hit on Vehicle A front right side portions. The Vehicle A damages was slightly damages.

DECLARATION

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



Policyholder: _____
Date & Time: _____

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

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

Sketch Plan #3

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7134469Z



Name
NG PANG HENG
(HUANG BANGXING)
黄邦兴

Race
CHINESE

Date of birth
02-10-1971

Country of birth
SINGAPORE

Sex
M

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S7134469Z

Name
NG PANG HENG (HUANG BANGXING)

Birth Date 02 Oct 1971

Issue Date 16 Dec 2002

100017061C

4756786



NRIC No. S7134469Z



Date of issue
08-08-2011

Address
APT BLK 677B JURONG WEST STREET 64
#14-299
SINGAPORE 642677

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE
01/09/1992

Class 3	Motor Cars and Motor which unladen does not
Class 4	Heavy Motor Cars and weight of which unladen

NP 426A

Licence No. S7134469Z

Sketch Plan #4

TP



Aden Lee
Sales Executive

Forem Electric Pte Ltd

1, Ecotech Park @ Sunview Road
#01 -06 Singapore 627615

T: +65 6255 4932

F: +65 6255 4942

M: +65 9759 8700

E: sales@forem.com.sg

Web: www.forem.com.sg

Accident Photo



Accident Photo



Accident Photo



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Accident Photo



Accident Photo



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Accident Photo



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CHASSIS NO: JN1MG4E25Z0792172
U.L.W : 1800 KGS
M.L.W : 3200 KGS
P. CAP : F: 1 DRIVER, 2 OTHER
R: 00
TYRE SIZE : F: 195x15 PLY 8
R: 195x15 PLY 8 (S)

Accident Photo

