

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	27/05/2019 15:08
Date Of Accident	25/05/2019 06:30
Exact Location Of Accident	TUAS SOUTH AVENUE 5
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	XE3700H
Insured/Policyholder	
Name Of Registered Owner	THINK ONE LEASING PTE LTD
Co Reg No	201115609M
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96788288
Alternative Phone No	OFFICE-65553300

Vehicle Particulars

Manufacturer	UD TRUCKS
Model	GKB5ELDHNT ESCOT V
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	GOODS VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5107728339
Cover Note Number	

Driver

Name of Driver	ZHENG WEI
Work Permit No	G2476584P
Date Of Birth	29/10/1988
Occupation	OUTDOOR
Date Of Driving Pass	09/03/2015
Driving Experience	4 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86164919
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 648C JURONG WEST STREET 61 #11-200
Postcode	643648
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CROSS JUNCTION
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	NANYANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 2 JURONG WEST AVENUE 5 , POSTCODE: 649482 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7929999 - FAX NO: 67912972
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

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	YM5111R
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Vehicle Category	GOODS VEHICLE
Name of Driver	
NRIC/Passport Number	
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.



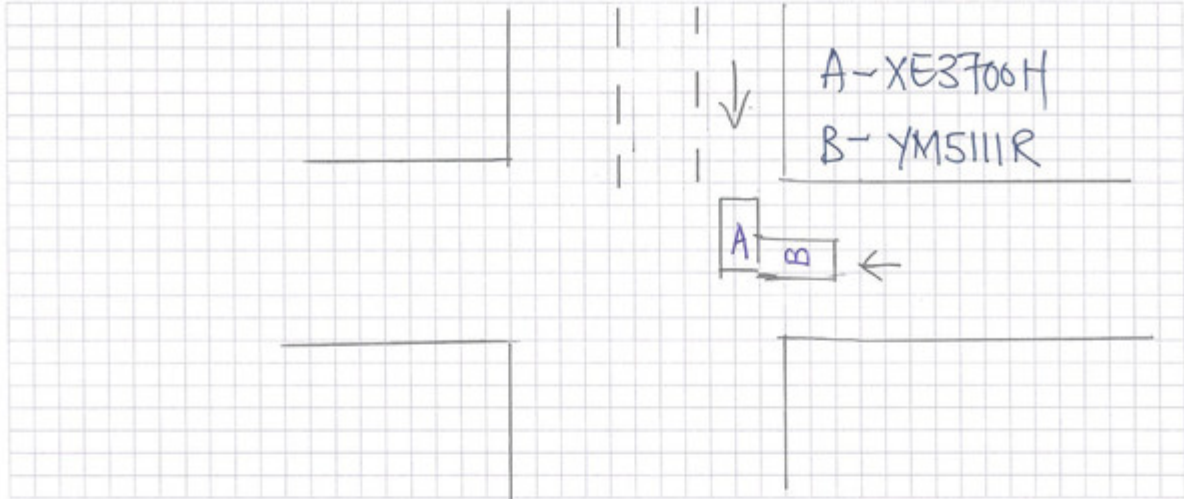
Policyholder's Signature
Date & Time:

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

27.5.19. PM: 15:08

Think One Autocare Pte Ltd
18 Defu Lane Avenue 2
Singapore 538522
Tel: 6844 3800 Fax: 6842 4988

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

SKETCH PLAN**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

Pls refer to the Police Report.

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:

Think One Autocare Pte Ltd
 18 Defu Lane Avenue 2
 Singapore 539522
 Tel: 6844 3800 Fax: 6842 4988


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

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: **G2476584P**

Name: **ZHENG WEI**

Birth Date: **29 Oct 1988**

Issue Date: **11 Sep 2014**

Valid Till: **10 Sep 2019**

092344594A

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

Employer:
KERRY DISTRIBUTION (SINGAPORE) PTE. LTD.

Name:
ZHENG WEI

S Pass No.
D 76229597

Sector:
SERVICE

K0913188

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

Class	Vehicle Class	Effective Date
Class 2B	Motorcycles < 200 CC	11 Sep 2014
Class 3	Motor cars < 2000 kg with < 7 passengers, exclusive of the driver; and motor tractors < 2500 kg	11 Sep 2014
Class 4	Heavy motor cars and motor tractors > 2500 kg	09 Sep 2015

G2476584P

S/No. 9000217681

License No. G2476584P

1/P 425A

VISIT PASS
Immigration Regulations

Name:
ZHENG WEI

FIN:
G2476584P

Date of Birth:
29-10-1988

Sex:
M

Nationality:
CHINESE

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.

Download SGWorkPass App to check status

30-10-2018



**SINGAPORE
POLICE FORCE**



T/20190525/2087

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

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Report No. T/20190525/2087

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/05/2019 13:29		Vide Report No.: J/20190525/0049		Station Diary No.: 41	
Informant's Particulars					
Name of Informant: ZHENG WEI			Address: APT BLK 648C JURONG WEST STREET 61 #11-200 SINGAPORE 643648		
ID Type / ID No.: FIN NO / G2476584P			Contact No.: Home/Office: Mobile: 86164919		
Nationality: CHINESE			Email:		
Sex: Male	Age: 30	Date of Birth: 29/10/1988	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: PRIME MOVER DRIVER			Driving Licence Information: Class: 2B,3,4		Date of Expiry: 10/09/2019

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 25/05/2019 06:30	Type of Location: X-Junction
Location: TUAS SOUTH AVENUE 5 Junction of Tuas South Ave 5 and Tuas South Way				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
XE3700H	Prime Mover				Seriously Damaged	0
YM5111R	Lorry				Seriously Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20190525/2087

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

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Report No. T/20190525/2087

CONTINUATION OF REPORT

Driver			
Name	ZHENG WEI	ID No.	G2476584P
Related Vehicle	NIL	Contact No.	86164919
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3,4 Date of Expiry: 10/09/2019
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight

Brief Details.

On 25/05/2019 at about 0630hrs, I was driving my Prime Mover (XE3700H) along Tuas South Ave 5. I was travelling South towards an unnamed road. I was travelling on the first lane as I was approaching the junction of Tuas South Way. The traffic light was green in my favour. I had already slowed down my speed slightly. My estimated speed at that point of time was about 40 to 50km/h. The traffic light was still green in my favor. I drove past the stop line of the junction, the traffic light turned amber and I continued driving as I was already past the stop line. All of a sudden, I saw a blue lorry (YM 5111R) in front of me. The said lorry was along Tuas South Way towards Tuas South Boulevard. The said lorry had started moving from the stationary position even before the traffic light turned green in his favour. I braked and swerved right to try and avoid the said lorry however it happened too quickly and there was no time to avoid the lorry. The front left side of my Prime Mover hit the front part of the lorry. I then stopped my Prime Mover, and gave myself some time to compose myself. After making sure that I was fine, I got down from my Prime Mover to assist the lorry driver and his passengers. The lorry driver and his passengers were still in their lorry. There were no other vehicles at that junction. The passengers and myself managed to pry open the driver side door of the lorry however we did not extract the driver from the lorry as we feared it may aggravate his injuries. There were many passengers sitting at the rear of the lorry. I then called for Police assistance as the lorry driver was injured and so were some of his passengers. While waiting for Police to arrive, I took some pictures of the accident and the damages to both vehicles and informed my company of the matter. The passengers and the lorry driver were sitting at the roadside. The front left side of my prime mover is seriously damaged. The front part of the lorry is seriously damaged. Both vehicles cannot be driven anymore.

After Police and ambulance arrived, the paramedics attended to those injured and the Police interviewed me. Subsequently both the Prime Mover and the lorry were towed away. I did not manage to get the particulars of the lorry driver and the passengers as there were too many people at scene and it was very chaotic. I saw that some of the passengers were conveyed to hospital by ambulance. I suffered some pain on the top and back part of my head as a result of the accident. I have not seen a doctor yet. The Traffic Police gave me a case card and advised me to lodge a Police report.

I am lodging this report as advised by the Traffic Police and for insurance claim purposes.



**SINGAPORE
POLICE FORCE**



T/20190525/2087

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

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Report No. T/20190525/2087

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

YRC

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:

J /
Sgt 2 WU JIALEI

A

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
SI THABAGESH JEYATHESH
Contact No.: 65476232

SN 127



Authentication Stamp

NP168

Signature : _____

Singapore Police Force

Signature Of Informant:

YRC

Date/Time:
25/05/2019 13:29

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

