

## 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	30/05/2019 14:55
Date Of Accident	30/05/2019 08:40
Exact Location Of Accident	SERANGGON ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	XD3942G
<b>Insured/Policyholder</b>	
Name Of Registered Owner	NCK MANUFACTURING
Co Reg No	53062182K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-63671866

### Vehicle Particulars

Manufacturer	ISUZU
Model	CYH52T-15.7 D (M)
Exact Purpose for which vehicle was being used at time of accident	
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	YES
Policy Number	
Cover Note Number	

### Driver

Name of Driver	OH AH LENG
NRIC No	S1774614F
Date Of Birth	03/06/1966
Occupation	OUTDOOR
Date Of Driving Pass	23/09/1994
Driving Experience	24 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87388659
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	APT BLK 634 CHOA CHU KANG NORTH 6 #07-283 SINGAPORE 680634
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 ON COLLISION
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?	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

PLEASE REFER TO THE SKETCH PLAN

#### 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	SKS7754G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LIM SWEE KEOW
NRIC/Passport Number	S1208960J
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Sketch Plan

### SKETCH PLAN


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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:

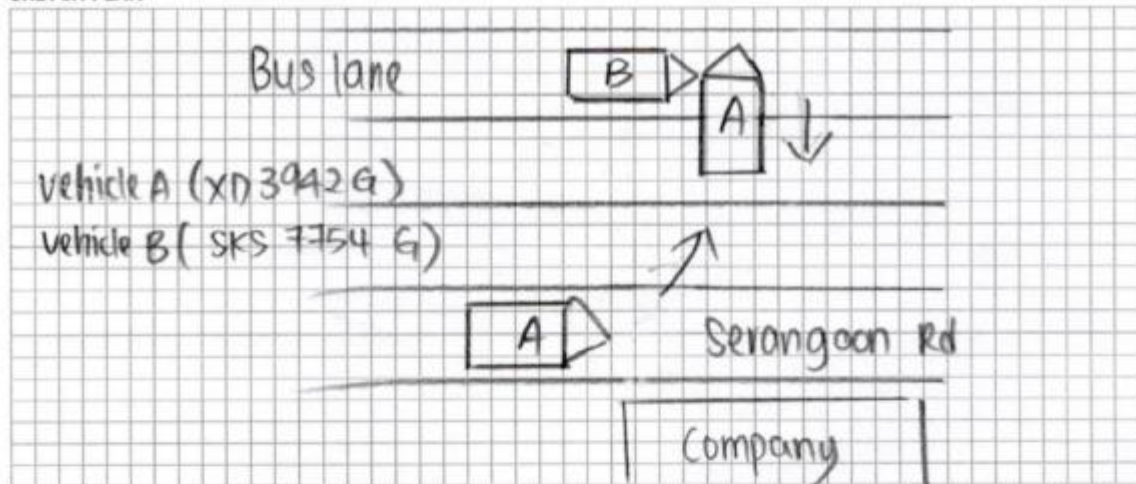
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

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

李光華摩嘜燒焊  
LEE KUAN HWA MOTOR SERVICE  
39, Westwood Avenue, Singapore 648744  
TEL: 6269 9192 FAX: 6269 2239 H/P: 9631 1712  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the date 30/05/2019 at about 0840 hrs, I was travelling my vehicle A (XD 3942 G) along Serangoon Rd. When I was reversing my vehicle A (XD 3942 G), I accidentally collided the right position of the vehicle B (SKS 7754 G).

## 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:

LEE KUAN HWA MOTOR SERVICE  
39, Westwood Avenue, Singapore 648719  
TEL: 6269 9192 FAX: 6269 2239 H/P: 9631 442

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

# Identification Card





# INSURANCE CERT

**ERGO**

## Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 159)  
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1992  
ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1958 (MALAYSIA)

<b>Certificate/Policy Number</b>	: DMCG19000708	<div> 24-hour Motor Accident Reporting and Assistance Helpline  <b>6333 2222</b>  <a href="http://www.ergo.com.sg">www.ergo.com.sg</a> </div>
<b>Vehicle Registration Number</b>	: XJ134DG	
<b>Cover Type</b>	: Comprehensive	
<b>Policy Type</b>	: Commercial Vehicle (Pto Use)	
<b>Name of Policyholder/Insured</b>	: NCK MANUFACTURING	
<b>Commencement Date of Insurance</b>	: 12/01/2019	
<b>Expiry Date of Insurance</b>	: 11/01/2020	
<b>Excess</b>	EXCESS (SECTION I) EXCESS: WINDSCREEN COVER (OVER 10 TONS & ABOVE) YOUNG/INEXP. DRIVERS (SECTION I)	<div>\$ 1,500.00</div> <div>\$ 200.00</div> <div>\$ 2,500.00</div>

**Finance Company/Hire Purchase Owner**: UNITED OVERSEAS BANK LTD

\*Persons or Classes of Persons entitled to drive:

1. The Policyholder
2. Any Person who is driving on the Policyholder's order or 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

\* Limitations as to Use:

- 1) Use in connection with the Policyholder's business
- 2) Use for carriage of passengers (other than for hire or reward) in connection with the Policyholder's business
- 3) Use for social domestic and pleasure purposes

This Policy does not cover:

- 1) Use for hire or reward, racing, pace-making, reliability trial or speed testing
- 2) Use whilst towing a trailer except the towing of any one certified mechanically propelled vehicle

Exclusions rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 159) and Section 95 of the Road Transport Act, 1987 (Malaysia) are not to be included under these headings ("").

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 159) and Part IV of the Road Transport Act, 1987 (Malaysia)

For and on behalf of ERGO Insurance Pte. Ltd.  
Approved Insurer

*David-Christ Jery*

Authorized Signatory

A070153/A000183	JIN-SHI (HOLDINGS) PTE LTD	
Vehicle Chassis Number : JA: EYH52197400006	Vehicle Engine Number : 6AN61411025	CP1: 00012019 11:02

ERGO Insurance Pte. Ltd. Co. Reg. No.: 196601011H GST Reg. No.: 60-0118925-6  
5 Tanjong Pagar Road, 10th Floor, Singapore 068956 Tel: +65 6829 8199 Fax: +65 6821 2295 [www.ergo.com.sg](http://www.ergo.com.sg)

# LOG CARD



## Enquire Vehicle Registration Details

Owner Particulars	
NRIC/Passport /Company Cert No.:	53062182K
Owner ID Type:	Business
Owner Name:	NCK MANUFACTURING
Registered Address:	APT BLK 634 CHOA CHU KANG NORTH 6 #07-283 SINGAPORE 680634
Mailing Address:	-
Birth Date:	-
Vehicle Particulars	
Vehicle No.:	XD3942G
Previous Vehicle No.:	-
Effective Date of Ownership:	12 Jan 2010
Original Regn Date:	12 Jan 2010
Registration Date:	12 Jan 2010
Year of Manufacture:	2009
Vehicle Type:	Goods (Open) Lorry (Wooden Body)
Vehicle Scheme:	-
Vehicle Attachment 1:	With Crane
Vehicle Attachment 2:	-
Vehicle Attachment 3:	-
Vehicle Make:	ISUZU
Vehicle Model:	CYH52T
Primary Colour:	White
Secondary Colour:	-
Passenger Capacity:	2
Chassis No.:	JALCYH52T97000009
Engine No.:	6WG1411026
Engine Capacity /Power Rating:	15681 cc / -
Maximum Power Output:	-
Propellant:	Diesel

Accident Photo





Accident Photo



Accident Photo



**Accident Photo**

