

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	12/06/2018 15:29
Date Of Accident	11/06/2018 18:20
Exact Location Of Accident	ALONG BUKIT BATOK STREET 33 IN FRONT OF BLK 324
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJM3513E
Insured/Policyholder	
Name Of Registered Owner	LIM CAI YI
NRIC No	S8703760F
Email Address	JIMMYBLL@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-88764348
Alternative Phone No	OFFICE-88764348

Vehicle Particulars

Manufacturer	HYUNDAI
Model	HD AVANTE 1.6 A

Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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Are you claiming under your own insurance policy for repair to your vehicle?	YES
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If No, Please state action to be taken

Vehicle Category	PRIVATE CAR
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Insurance Company

Name of Insurance Company	AVIVA LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	10563963
Cover Note Number	N.A.

Driver

Name of Driver	TAN WEI TECK
NRIC No	S7931041G
Date Of Birth	26/09/1979
Occupation	INDOOR
Date Of Driving Pass	24/09/2004
Driving Experience	13 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88764348
Fax Number	
Contact Number	
Email Address	JIMMYBLL@HOTMAIL.COM

Address	NIL
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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 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)	3
Passenger 1	NAME: : ADELICIA TAN GENDER: : FEMALE
Passenger 2	NAME: : ADELSON TAN GENDER: : MALE

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

I WAS DRIVING ALONG BUKIT BATOK STREET 33 AND IM ABOUT TO REACH THE T JUNCTION IN FRONT OF BLK 324 BUKIT BATOK STREET 33. VEHICLE B WAS ALL TIME IN FRONT. SUDDENLY, VEHICLE B APPLIED EMERGENCY BRAKED A D STOP. I IMMEDIATE APPLIEDE EMERGENCY BRAKED BUT COULDNT STOP IN TIME AND COLLIDED ONTO HIS REAR PORTION. I DIDNT EXCHANGED PARTICULARS AND TOOK PHOTO BUT ONLY GET HIS PHONE NUMBER. NO INJURIES INVOLVED.

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	NA
Vehicle Make/Model/Colour	UNKNOWN MODEL
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	97666013

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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6. The 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 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.
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.

VERIFIED BY AJAX MARS
REPORTING OFFICER
THOMAS NG CHIN CHUN

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Blk 322 Bkt 1 Bkt 2 St 13

Blk 322 Bkt 1 Bkt 2 St 13

A: 5573513E
B: unknown

ACCIDENT STATEMENT (2000 characters)

I WAS DRIVING ALONG BUKIT BATOK STREET 33 AND IM ABOUT TO REACH THE T JUNCTION IN FRONT OF BLK 324 BUKIT BATOK STREET 33. VEHICLE B WAS ALL TIME IN FRONT. SUDDENLY, VEHICLE B APPLIED EMERGENCY BRAKED A D STOP. I IMMEDIATE APPLIEDE EMERGENCY BRAKED BUT COULDNT STOP IN TIME AND COLLIDED ONTO HIS REAR PORTION. I DIDNT EXCHANGED PARTICULARS AND TOOK PHOTO BUT ONLY GET HIS PHONE NUMBER. NO INJURIES INVOLVED.

Taxi Voucher No

DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -
NG CHIN CHUN

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

12 June 2018 3:22 pm

Date/Time:

12 June 2018 3:22 pm

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ACCIDENT STATEMENT

Date Of Report	14/06/2018 14:41
Date Of Accident	11/06/2018 17:55
Exact Location Of Accident	ALONG BT BATOK ST 33
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJM3500S
Insured/Policyholder	
Name Of Registered Owner	HI-VAC TECHNOLOGY AND SERVICES
Co Reg No	52888066K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-94572119

Vehicle Particulars

Manufacturer	DONGFENG
Model	EQ6380 1.3 MANUAL
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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	PRIVATE CAR
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Insurance Company

Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D-17089119MVQC
Cover Note Number	-

Driver

Name of Driver	CHIA MENG HUA
NRIC No	S1233019G
Date Of Birth	29/06/1957
Occupation	OUTDOOR
Date Of Driving Pass	29/03/1977
Driving Experience	41 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94572119
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 346 BUKIT BATOK ST 34 #09-210
Postcode	650346
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 involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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 ATTACHED STATEMENT.

Attachment(s)

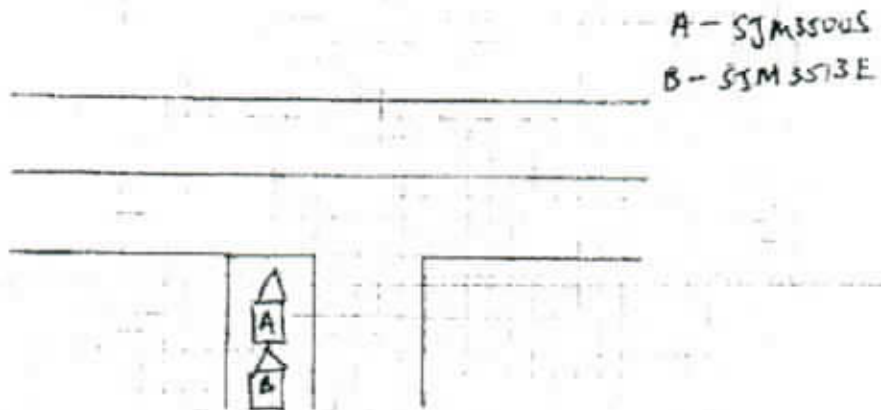
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJM3513E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on 11/6/18 at 1755 hrs I was driving my vehicle A
along Bukit Batok St 33. I stop at the T-junction
to wait for on-coming vehicle to be clear. Suddenly
vehicle B hit on my rear portion

DECLARATION

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

Policyholder's Signature
Date & Time:

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

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

CERTIFICATE OF INSURANCE**ORIGINAL**

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Type of Policy. : COMPANY CAR - PRIVATE INSURANCE
Type of Cover. : Comprehensive
Certificate No. : D-17089119MVQC
Vehicle No / Chassis No : SJM3500S / LGK132K7689139812
Name of Insured : HI-VAC TECHNOLOGY AND SERVICES
Period Of Insurance : 28.11.2017 To 27.11.2018
Insured Estimated Value : Market Value At Time Of Loss
Financial Institution : OVERSEA-CHINESE BANKING CORPORATION LTD

Excess :

SGD500.00 - SECTION I
SGD3,500.00 SECTION I & II SEPARATELY IS IMPOSED ON THOSE DRIVERS WHO ARE
BELOW 22 YEARS OLD AND/OR WHO HAVE LESS THAN 2 YEARS OF DRIVING EXPERIENCE

Authorised Driver*

ANY AUTHORISED DRIVERS

Persons or classes of persons entitled to drive*

Any person who is driving on the Insured's order or with their 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.

Limitations as to use*

Use only for social, domestic and pleasure purposes and for the Insured's business.

The Policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.


* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I/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 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

First Capital Insurance Limited
(Approved Insurers)

ITHMINAH/A0021/MX4A

Issued at Singapore on 13.11.2017


Authorised Signature

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1233019G



NAME
CHIA MENG HUA

RACE
CHINESE

DATE OF BIRTH
29-06-1957

SEX
M

PLACE OF BIRTH
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



NAME
CHIA MENG HUA

ISSUE DATE
29 Jun 1997

EXPIRY DATE
14 Feb 2002

94572119

IDENTITY CARD NO. S1233019G



DATE OF BIRTH
17-05-1994

ADDRESS
APT. BLK 346 BUKIT BATOK STREET 34
#09-210
SINGAPORE 2385

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

CLASS	VEHICLE CLASS	PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	29 Mar 1977
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	23 Nov 1978

94572119

License No. S1233019G

DATE : 11.06.2018

TO : Aviva

RE : ACCIDENT INVOLVING VEHICLE NO. SSM 3500S &
SSM 3513E only
ALONG BT Batok St 33
ON 11.06.2018

I/We, Hi-Vac Technology & Services
(of (NRIC No./ROC No.) 528880661C
of Midwin Bldg, 50 Bukit Batok St 23 S-659578
owner of vehicle no. SSM 3500S in consideration of M/s FASTECH AUTO
PTE LTD repairing my/our vehicle SSM 3500S at my/our instruction and hereby
authorise M/s FASTECH AUTO PTE LTD to demand claim settlement whatever
amount settled/payable by the Insurance Company and/or third party or to commence legal
proceedings, if necessary, under my name, for the cost of repairs, car rental and/or loss of use,
etc. and to their appointing solicitor to act for me/us in respect of the said accident/claim and
all claimed and/or settled shall belong to them absolutely.

I/We further agree and undertake to indemnify them against the above-mentioned claim cost
which may arisen therewith.

Signature of Owner :



Name of Owner :

Constant Appraiser Services

Qualified Automobile Accident Damage Appraisers/Loss Adjusters

Blk 2 Rivervale Link, #09-02 Singapore 545040

Tel/Fax: 6886 1106 Mobile: 9007 5234

Email: constant_as@yahoo.com.sg

RCB No. 53138015K

INVOICE

To: Hi-Vac Technology And Services
c/o 1 Kaki Bukit Ave 6
#01-48 Autobay
Singapore 417883

Date : 05/07/2018

Invoice No : IV18-07015/CAS

Particulars	Amount
Fee For Services Rendered In Respect Of: Surveying, Adjusting, and Re-inspection Of Accident Damaged Vehicle SJM 3500S (Inclusive Of Photographs And Transport Charges) Our reference : CAS/18-07/015	\$601.00
Total	\$601.00

E & OE

Constant Appraiser Services



Cheque Should Be Crossed And Made Payment To 'Constant Appraiser Services'

TAX INVOICE

FASTECH AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-48 Autobay

Singapore 417883

Tel No: 67452063 / 67467158 Fax No: 67458520

Tax Reg No: 200006262D

Aviva Insurance Pte Ltd

4 Shenton Way

#01-01 SGX Centre 2

Singapore 068807

Attn: Motor Claims Department

Tax Invoice : 20348

Date : 26.07.2018

Vehicle No : SJM 3500S

Make/Model : DONGFENG EQ6380

Chassis/Eng# :

Accident Date : 11.06.2018

Claim No : 0618- 20348

Reference :

Policy No :

	Amount
To proceed on lump sum repair	S\$ 5,800.00

E. & O. E.

Total	: S\$	5,800.00
GST @ 7%	: S\$	406.00
Amount Due	: S\$	<u>6,206.00</u>


FASTECH AUTO PTE LTD

All Invoices are subjected to GST

Accident Photo



Accident Photo



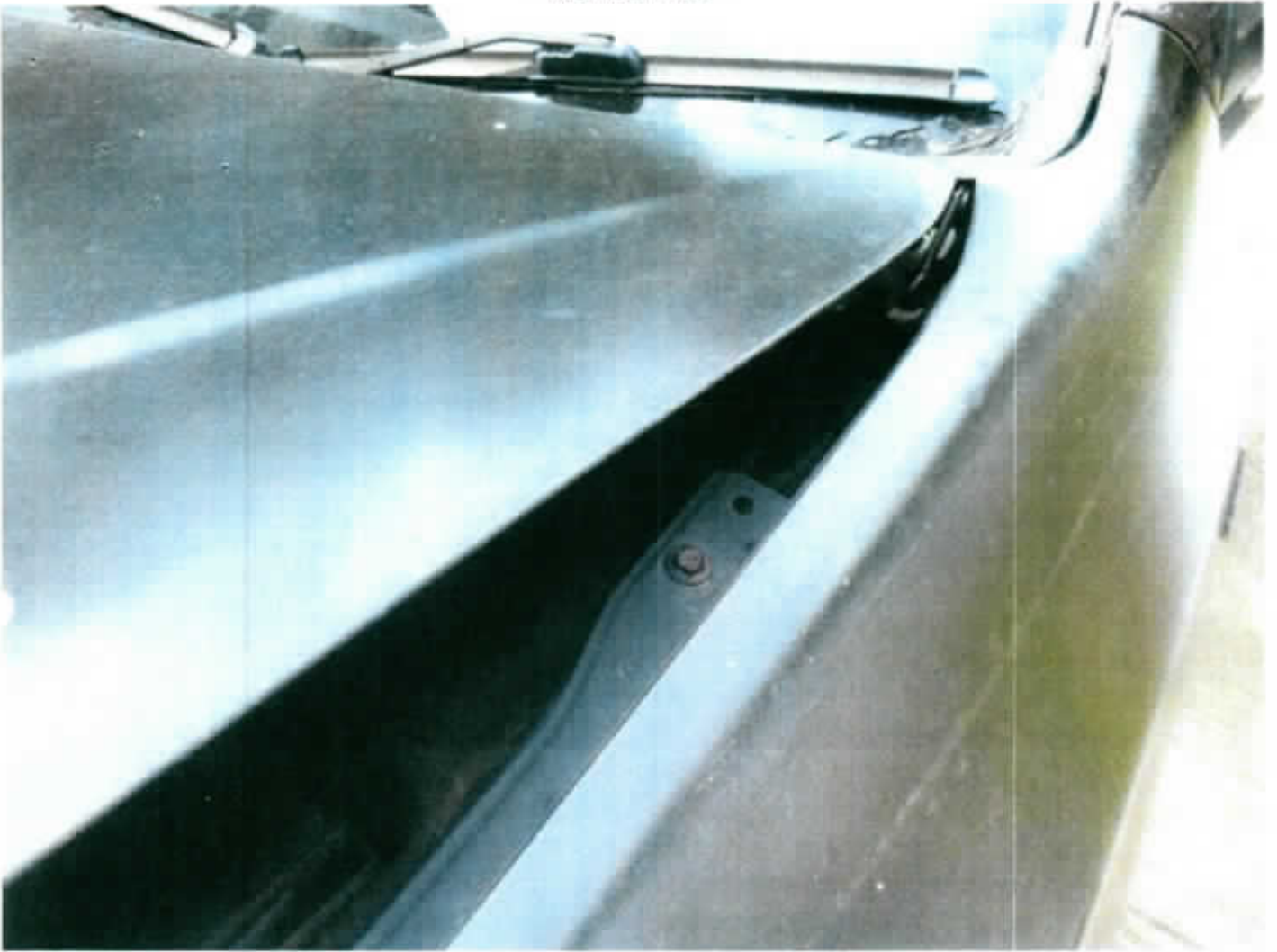
Accident Photo



Accident Photo



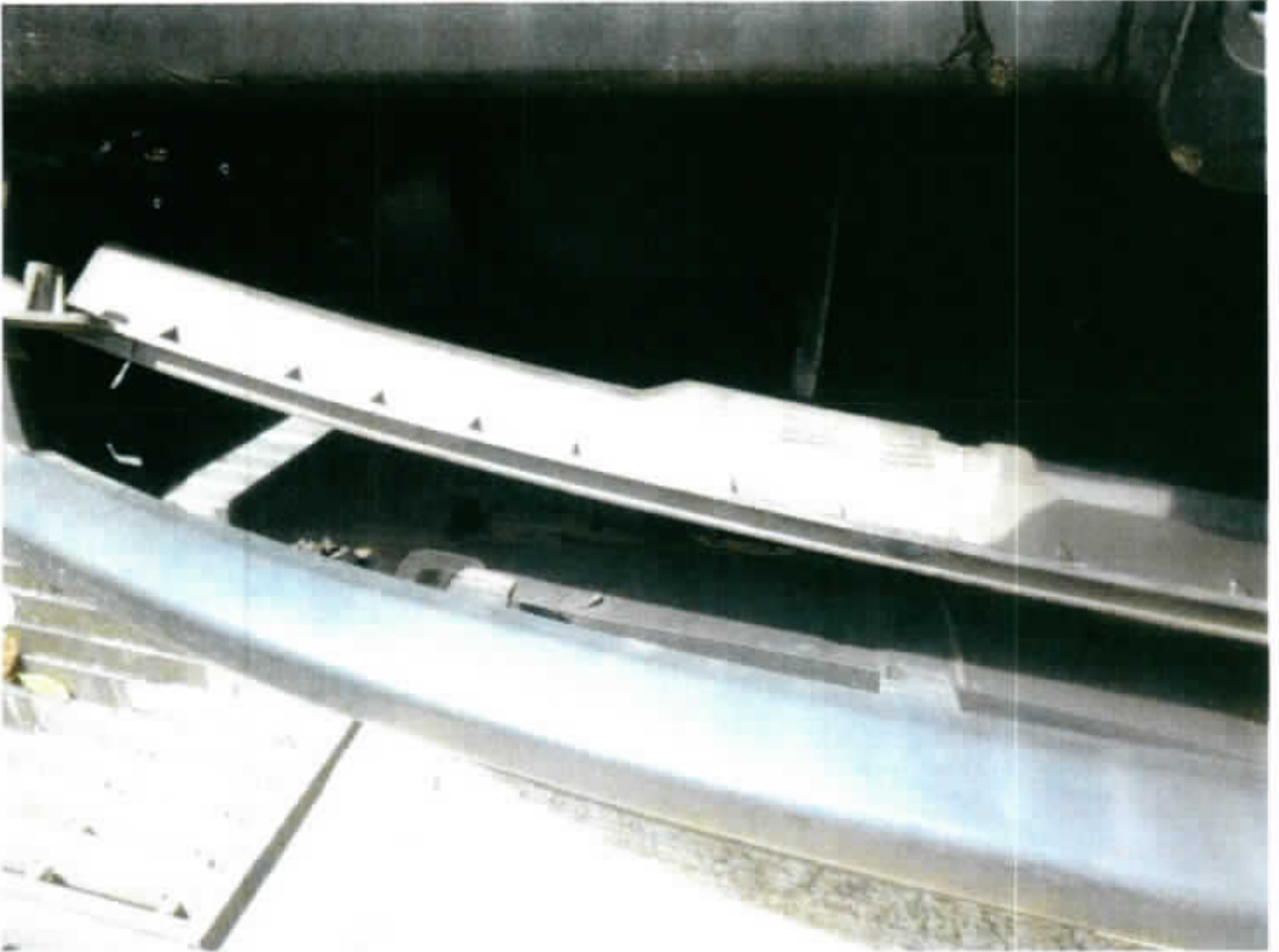
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Accident Photo



Accident Photo



Accident Photo



Accident Photo



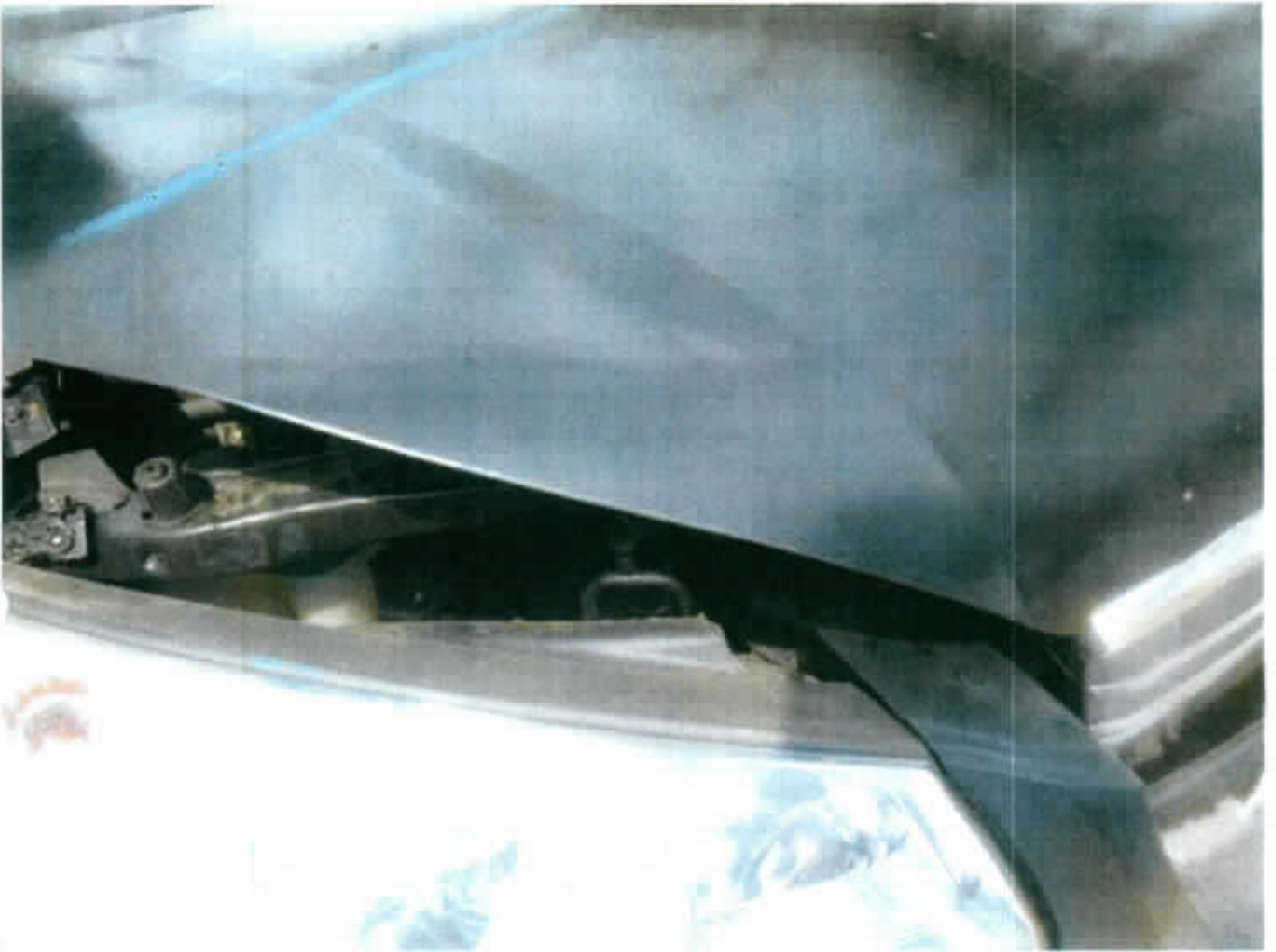
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7931041G



Name
**TAN WEI TECK
(CHEN WEIDE)**
陳偉德

Race
CHINESE

Date of birth
26-09-1979

Sex
M

Country of birth
SINGAPORE

S7931041G

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number **S7931041G**

Name
**TAN WEI TECK
(CHEN WEIDE)**

Birth Date **26 Sep 1979**

Issue Date **06 Oct 2011**



002006307D

Driving License

4938628



NRIC No: S7931041G



Date of issue
31-01-2013

Address
APT BLK 337 BUKIT BATOK STREET 34
#05-1B
SINGAPORE 650337

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

	EFFECTIVE DATE
Class 2B Motorcycles \leq 200 cc	26 Jan 2006
Class 3 Motor Cars \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg	24 Feb 2004

117 428A

Licence No: S7931041G

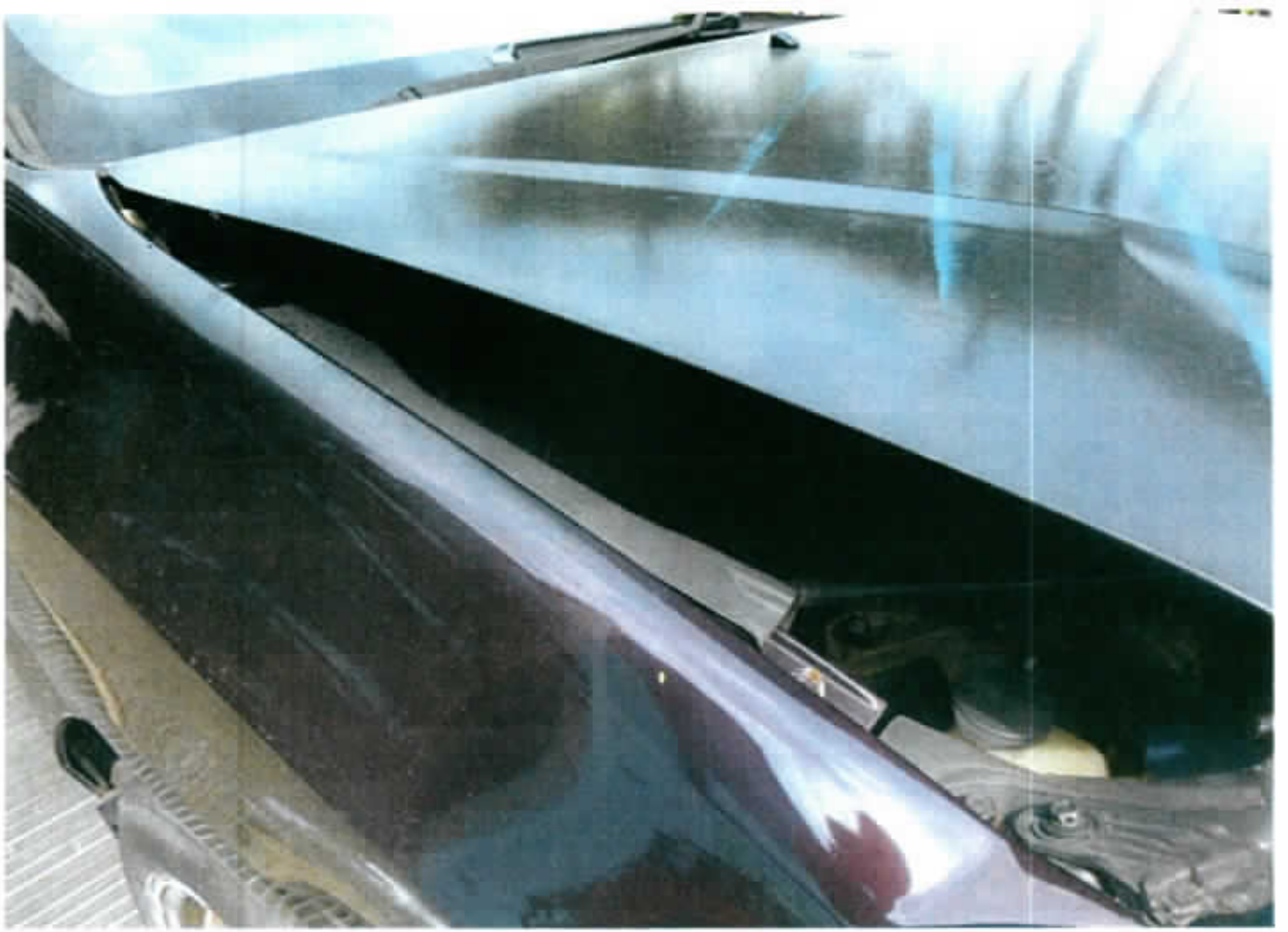






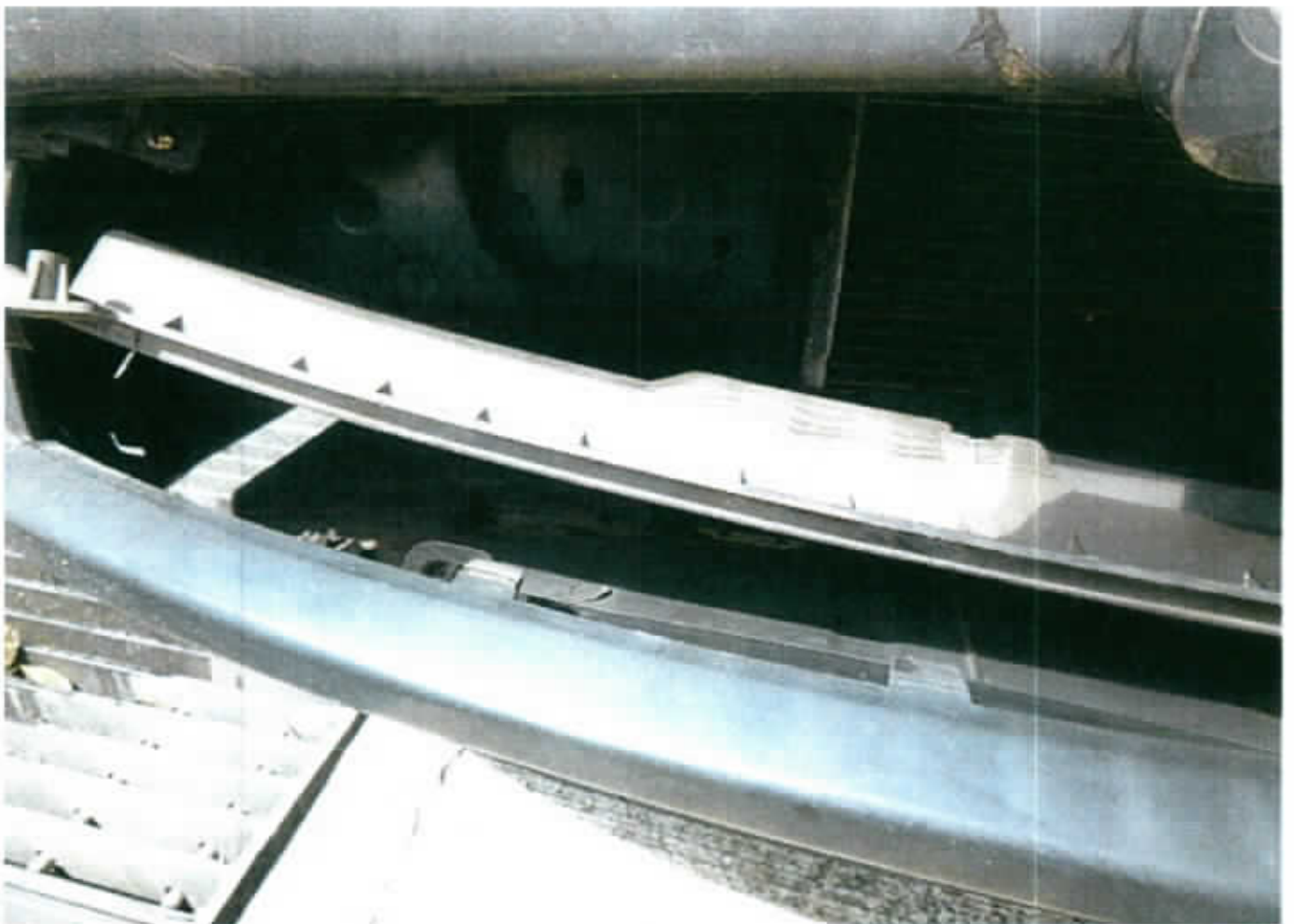


















REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7931041G



Name
TAN WEI TECK
(CHEN WEIDE)
陳偉德

Race
CHINESE

Date of birth
20-09-1979

Sex
M

Country of birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number S7931041G

Name
TAN WEI TECK
(CHEN WEIDE)

Birth Date 20 Sep 1979

Valid Date 06 Oct 2011



0020042070