

## 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	20/04/2019 11:25
Date Of Accident	19/04/2019 06:05
Exact Location Of Accident	ALONG PRINSEP STREET TWDS BT. TIMAH RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD3791K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LEE LUM HUAT PTE LTD
Co Reg No	201826339G
Email Address	ENQUIRY@VITAMEE.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-67542345

### Vehicle Particulars

Manufacturer	TOYOTA
Model	TOYOTA DYNA 150 MANUAL
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN3059251800
Cover Note Number	25/09/18 - 24/09/19

### Driver

Name of Driver	TIEW HOCK HUA
NRIC No	F7392141N
Date Of Birth	01/02/1967
Occupation	OUTDOOR
Date Of Driving Pass	18/01/2016
Driving Experience	3 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94826119
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	C/O LEE LUM HUAT PTE LTD
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 - U-TURN
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	JTH2483 (MOTORCYCLE)
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	WOODLANDS EAST N.P.C
Police Station Address	<b>ROAD:</b> 3 WOODLANDS DRIVE 63 , <b>POSTCODE:</b> 737890 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT ATTACHED. \* VEHICLE STILL AT TRAFFIC POLICE COMPOUND \*

#### 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	JTH2483
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	CHINESE MALE
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver) 2

Passenger 1  
NAME: : PILLION  
GENDER: : FEMALE

#### DETAILS OF INJURED PERSON 1

Name RIDER  
Approximate Age  
Injuries Sustain  
Injured person in which vehicle? JTH2483  
Were seat belts worn?  
Was this injured conveyed to hospital by ambulance? YES  
Address  
Postcode

#### DETAILS OF INJURED PERSON 2

Name FEMALE PILLION  
Approximate Age  
Injuries Sustain  
Injured person in which vehicle? JTH2483  
Were seat belts worn?  
Was this injured conveyed to hospital by ambulance? YES  
Address  
Postcode

## Sketch Plan

### SKETCH PLAN

VEHICLE NO.: GBD 3791K  
INSURER : China Taiping  
DATE & TIME: 19/4/19 @ 06:05am

### IMPORTANT NOTICE

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5. **Any false reporting may be referred to the Police for investigation.**
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 upon application by interested parties.
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.

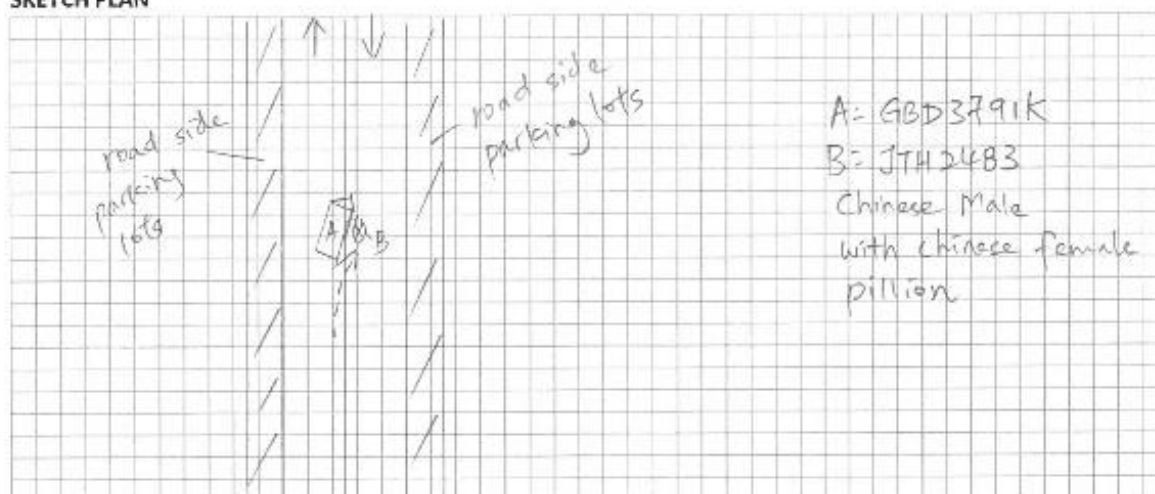


FE Hui H  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

19/4/19  
(YS)  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

### Sketch Plan #2

### SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report No: T/20190419/2021

\*Vehicle still lying at Traffic Police Compound.

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.

## DECLARATION

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



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

Reporting Centre Personnel's Signature  
Name: (45)  
NRIC/FIN No.:

SIARMC SketchPlanForm\_V3 ( ) Claim Own Policy ( ) Claim Third Party ( ) Reporting Only  
( ) Claim OD/TP at other workshop ( )



**SINGAPORE  
POLICE FORCE**



T/20190419/2021

Police Station Of Origin:  
Woodlands East N.P.C.  
3 Woodlands Drive 63 SINGAPORE 737890  
Tel No: 1800-7679999

1 of 3

Report No. T/20190419/2021

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 19/04/2019 09:44	Vide Report No.: A/20190419/0059	Station Diary No.: 31
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Informant's Particulars			
Name of Informant: TIEW HOCK HUA		Address:	
ID Type / ID No.: FIN NO / F7392141N		Contact No.: Home/Office: Mobile: 94826119	
Nationality: MALAYSIAN		Email:	
Sex: Male	Age: 52	Date of Birth: 01/02/1967	Type of Informant: Driver
Race: Chinese		Language: Mandarin	Institution / School Name:
Occupation: DRIVER		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 19/04/2019 06:05	Type of Location: X-Junction
Location: Along Road 1 Traveling Toward Road 2 PRINSEP STREET BUKIT TIMAH ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control:		Traffic Volume:
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
GBD3791K	Lorry				Slightly Damaged	0
JTH2483	Motorcycle				Slightly Damaged	1

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



**SINGAPORE  
POLICE FORCE**



T/20190419/2021

Police Station Of Origin:  
Woodlands East N.P.C.  
3 Woodlands Drive 63 SINGAPORE 737890  
Tel No: 1800-7679999

2 of 3

Report No. T/20190419/2021

**CONTINUATION OF REPORT**

Driver			
Name	TIEW HOCK HUA	ID No.	F7392141N
Related Vehicle	GBD3791K (Lorry)	Contact No.	94826119
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 19/04/2019 at about 0605hrs, I was driving my lorry bearing GBD3791K along Prinsep St, towards Bukit Timah Rd. It was a single lane road and I wanted to make a U-turn. Before making the U-turn, I checked my side mirrors and also my blind spot and noticed a motorcycle bearing JTH2483 about 5 cars away from me. As I was making the U-turn, I suddenly felt a collision towards the right side of my vehicle. I then noticed a motorcyclist and a pillion lying on the road, in pain. I then called for ambulance.

Ambulance and police then arrived at scene. Both motorcyclist and his pillion were conveyed by ambulance however I am not sure where were they conveyed to.

As a result of the accident, the driver's door of my vehicle was dented. The front bumper was also dented and detached. The driver's window was damaged and could not be winded up or down. I only noticed scratches on the motorcycle.

I am making this report as instructed by the Traffic Police officer. That is all.

PR



**SINGAPORE  
POLICE FORCE**



T/20190419/2021

Police Station Of Origin:  
Woodlands East N.P.C.  
3 Woodlands Drive 63 SINGAPORE 737890  
Tel No: 1800-7679999

3 of 3

Report No. T/20190419/2021

CONTINUATION OF REPORT

**Sketch Plan**

Informant is not able to provide sketch plan

**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:

L /

AHMAD DZUL DANIAL BIN ABDUL RAZAK

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

19/04/2019 09:44

Officer In Charge Of Case:

TP / GIT /

Sgt 2 LEE MING CAI

Contact No.: 65476960

Classification Of Case:



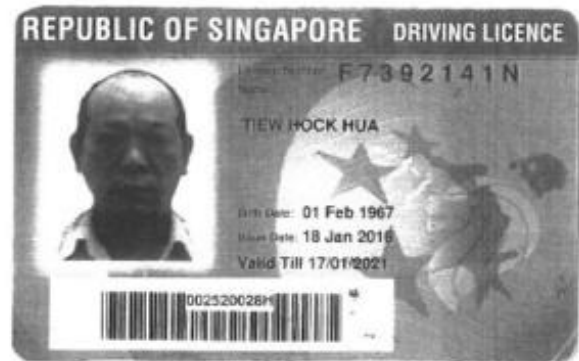
Authentication Stamp

SN 130

Signature :



DL



FWPOL545b - Notification Letter - Renew (Reporting)



TIEW HOCK HUA  
LEE LUM HUAT PTE. LTD.  
15 WOODLANDS LOOP  
#01-30/31  
SINGAPORE 738322

**Card Registration Completed!**

Please show your employer this letter.  
We will deliver your card to the authorised  
recipient(s) 4 to 5 working days later.  
They will get the delivery details via SMS  
the day before.

Inah

209

180419

MINISTRY OF  
MANPOWER

50610811-260493

For Immigration Use (To clear by FIN)



F7392141N

12 Apr 2019

## You need to make an appointment for Card Registration

Dear TIEW HOCK HUA

We have received a request to renew your work permit on 12 Apr 2019. Now you need to come to the MOM Services Centre - Hall C by **22 Apr 2019** for card registration.

Please go to <https://services.mom.gov.sg/appointment> to make an appointment for Work Pass Card Registration. At registration, we will check your documents (listed on page 2), register your fingerprints and take your photograph. We can only deliver your work permit card to the authorised recipient(s) 4 working days after you have successfully registered. An SMS / email with the delivery details will be sent to your authorised recipient(s) at least 1 working day before the delivery.

**This Notification Letter allows you to work and stay in Singapore until you get your new card. It is valid from 12 Apr 2019 till 12 May 2019.**

Yours sincerely

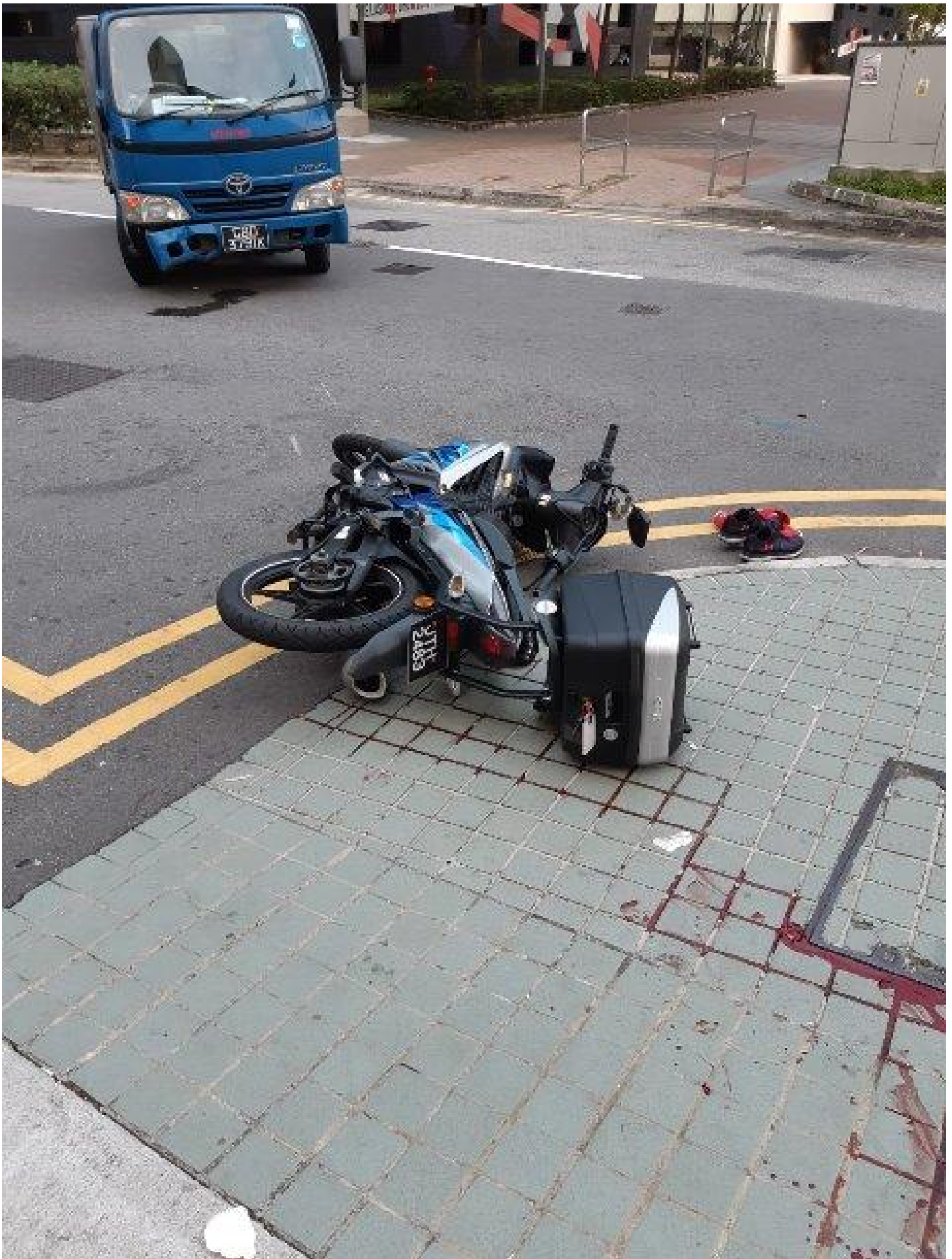
Mdm Chow Choon Yen  
for Controller of Work Passes

YOUR NAME  
TIEW HOCK HUA  
FIN  
F7392141N  
WORK PERMIT NO.  
5 0610811-  
DATE OF APPLICATION  
26 Apr 1993  
DATE OF RENEW  
12 Apr 2019  
WORK PERMIT EXPIRY DATE  
28 May 2020  
DATE OF BIRTH  
01 Feb 1967  
SEX  
MALE  
NATIONALITY  
MALAYSIAN  
TRAVEL DOCUMENT NO.  
A35301660  
TRAVEL DOCUMENT EXPIRY DATE  
28 Jun 2020  
YOUR EMPLOYER'S NAME  
LEE LUM HUAT PTE. LTD.  
SECTOR  
MANUFACTURING  
OCCUPATION  
LORRY/ TRUCK DRIVER  
SALARY  
\$1800

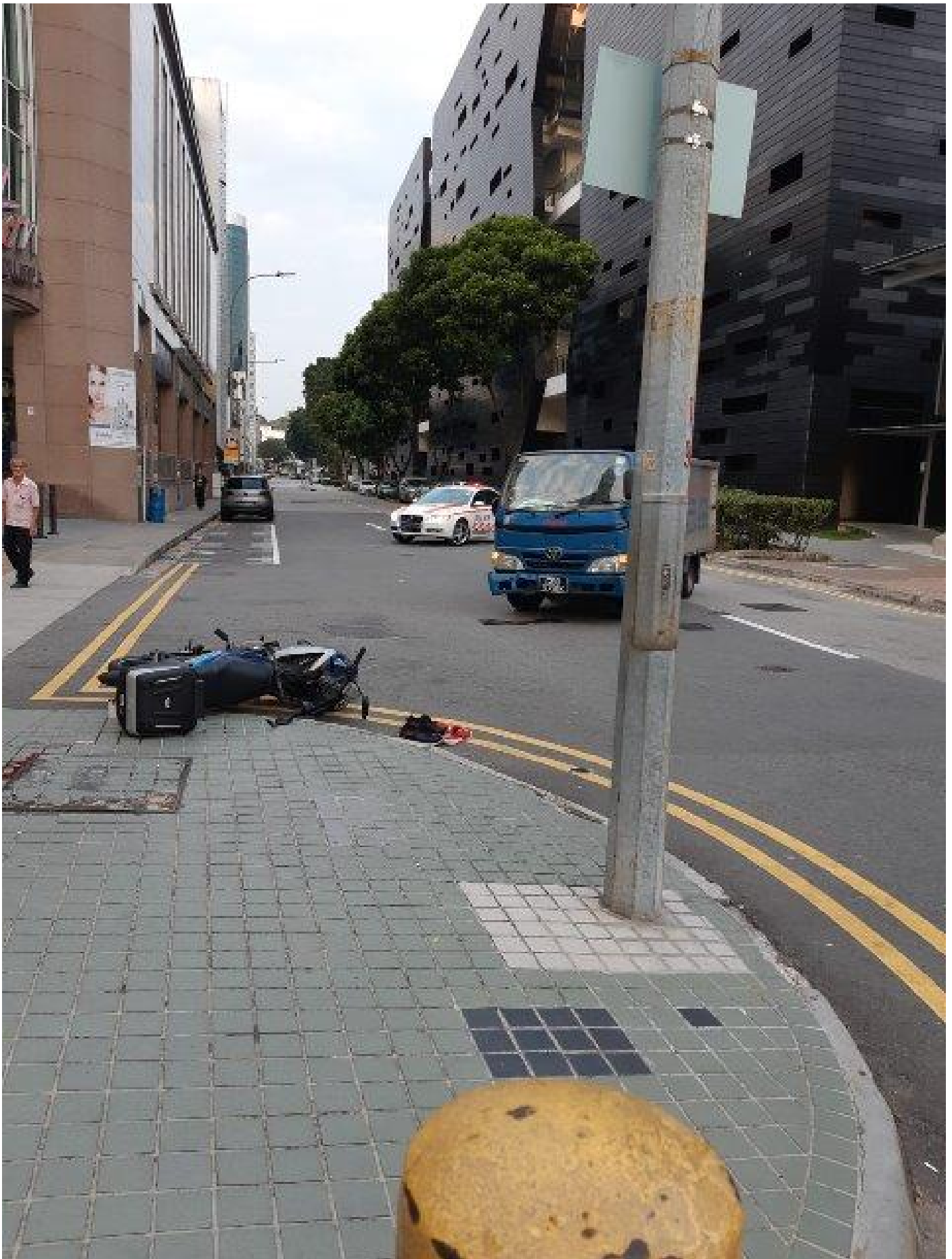
**IMPORTANT**

- If you fail to report to the MOM Services Centre - Hall C for card registration, your work permit may be cancelled.
- You must keep this Notification Letter with you until you get your card. If you need to leave / enter Singapore, you will have to show this letter at the Immigration Checkpoints.

SCENE



# SCENE



## SCENE





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



# Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE  
6 Raffles Quay #28-00 Singapore 048580  
Tel (65) 6224 0000 Fax (65) 6224 0090  
Operating Hours: Monday to Friday, 09:00 - 17:00  
UEN: S60850286 / GST Reg. No.: M400617734

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

## ADDENDUM

### (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: MCHM 19051096 Vehicle Registration No: G8D 3791 K  
Name (as shown in NRIC): Tiew Hock Hua NRIC/FIN/Passport No: F 392141 N  
(\* Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address: 40 Lee Lum Huat Pte Ltd Singapore  
Contact (Tel): 67542345 Mobile No: 94826119  
Email Address: enquiry@vitamar.com.sg  
Date of Accident: 19/04/2019 Time of Accident: 06:05  
Place of Accident: Along Prinsep Street Towards Bt. Timah Rd  
Insurance Company: China Taiping

### (B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Attach Accident photos.



Policyholder /  
Date: 8/5/19

GLR/ATC addendum/01/03 V3



Reporting Centre Personnel's Signature

Name: Sharon  
NRIC/FIN No.:  
Date: 08/5/19