

## 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	24/07/2019 15:17
Date Of Accident	24/07/2019 10:40
Exact Location Of Accident	ALONG MARYMOUNT ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE9667S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	STARWHIZ MANAGEMENT COMPANY PTE LTD
Co Reg No	199902614M
Email Address	FINANCE@SOFRESH.COM.SG
Mobile Phone No	(LOCAL) +65-96689666
Alternative Phone No	OFFICE-67759048

### Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA 150-3.0 D (M)
Exact Purpose for which vehicle was being used at time of accident	DELIVERY
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	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VCA/P1770763
Cover Note Number	

### Driver

Name of Driver	LI YE
Passport No/FIN	G3243134N
Date Of Birth	11/08/1990
Occupation	OUTDOOR
Date Of Driving Pass	19/04/2016
Driving Experience	3 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87501665
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	6 GUOK AVENUE MARKONO LOGISTICS BUILDING SINGAPORE
Postcode	119636
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	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?	NO
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 [OTHER]	TELOK BLANGAH NPP
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO ATTACHED POLICE REPORT NO.T/20190724/2091

#### 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	SLB4324L
Vehicle Make/Model/Colour	TOYOTA / AXIO / SILVER GOLD
Details Of Properties	REAR PORTION
Vehicle Category	PRIVATE CAR
Name of Driver	NIL
NRIC/Passport Number	
Contact Number	97673341
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2

Passenger 1

NAME: : NIL  
GENDER: : FEMALE

**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.

STARWHIZ MANAGEMENT COMPANY PTE LTD  
REG NO. 199902614M

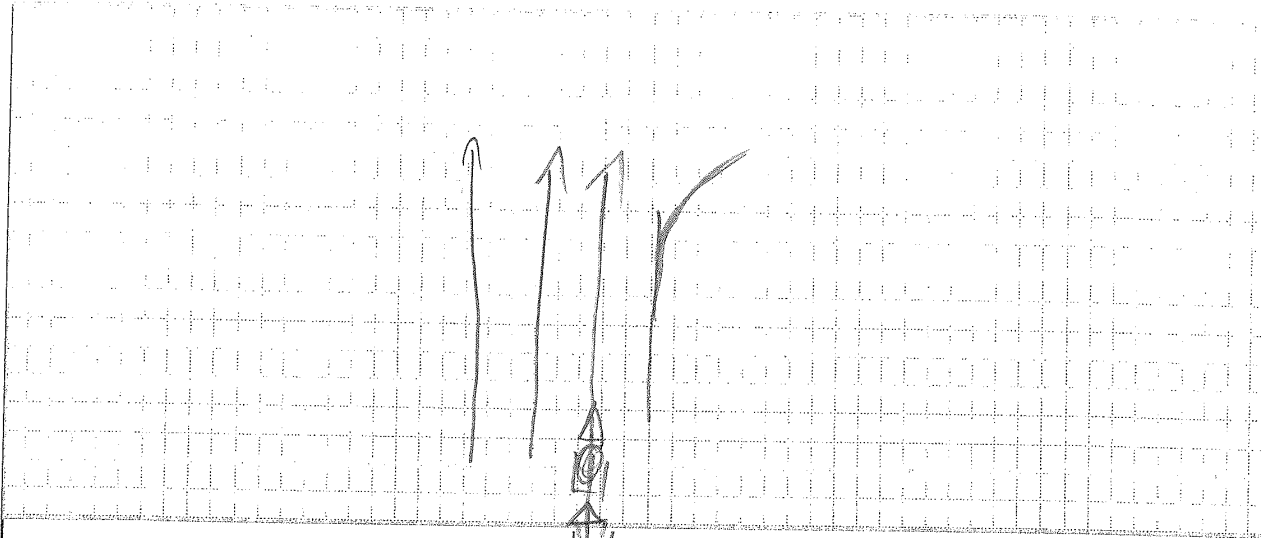
Policyholder's Signature  
Date & Time

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

COMPOSITE DELTA ENGINEERING PTE LTD  
EXTERNAL BUSINESS DEVELOPMENT  
NAME & SIGNATURE:   
DESIGNATION: \_\_\_\_\_ DATE: \_\_\_\_\_

Reporting Centre Personnel's Signature  
Name: **WONG CHEE WEI**  
NRIC / Fin No. **672180996**

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT.

I am working for STARWHIZ MANAGEMENT and using the vehicle for delivery at the time accident and refer to attached police report No. T/20190724/2091

**IMPORTANT NOTE**

Under General Condition – Conduct of Claim of the Motor Policy, you have to decide **within 21 days** of occurrence or discovery of damage whether or not to claim under the policy. Please check your policy for more information.

**DECLARATION**

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

STARWHIZ MANAGEMENT COMPANY PTE LTD  
REG NO. 19090000000000000000

EXTENSIVE  
NAME & SIGNATURE: [Signature]  
DESIGNATION: [Signature] DATE: 24/07/19

Policyholder's Signature  
Date & Time

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

Reporting Centre Personnel's Signature  
Name: WONG CHEE WEI  
NRIC / Fin No.: 672180996



**SINGAPORE  
POLICE FORCE**



T/20190724/2091

1 of 3

Police Station Of Origin:  
Telok Blangah NPP  
51 Telok Blangah Drive #01-116  
SINGAPORE 100055  
Tel No: 1800-2729999

Report No. T/20190724/2091

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 24/07/2019 13:37		Vide Report No.: E/20190724/0055		Station Diary No.: 11	
<b>Informant's Particulars</b>					
Name of Informant: LI YE			Address: 6 GUOK AVENUE MARKONO LOGISTICS BUILDING SINGAPORE 119636		
ID Type / ID No.: FIN NO / G3243134N			Contact No.: Home/Office: Mobile: 87501665		
Nationality: CHINESE			Email:		
Sex: Male	Age: 28	Date of Birth: 11/08/1990	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Driver			Driving Licence Information: Class: 3 Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 24/07/2019 10:40	Type of Location: Straight & Right turn
Location: Along Road 1 MARYMOUNT ROAD				
Marymount Rd				
Weather: Clear		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBE9667S	Lorry				Slightly Damaged	0
SLB4324L	Car				Slightly Damaged	1

<b>Details of Person Involved</b>	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20190724/2091

Police Station Of Origin:  
Telok Blangah NPP  
51 Telok Blangah Drive #01-116  
SINGAPORE 100055  
Tel No: 1800-2729999

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Report No. T/20190724/2091

**CONTINUATION OF REPORT**

Driver			
Name	LI YE	ID No.	G3243134N
Related Vehicle	GBE9667S (Lorry)	Contact No.	87501665
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 24/07/2019 at about 1040hrs, I was driving along Marymount Rd in my lorry bearing GBE9667S. I was on the second lane wanting to make a right turn when the car in front of my lorry bearing plate number SLB4324L whom was moving forward suddenly slowed down. Thus I was unable to brake in time thus collided with the rear of the car. Police and ambulance then arrived to assist.



**SINGAPORE  
POLICE FORCE**



T/20190724/2091

Police Station Of Origin:  
Telok Blangah NPP  
51 Telok Blangah Drive #01-116  
SINGAPORE 100055  
Tel No: 1800-2729999

3 of 3

Report No. T/20190724/2091

**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:  
D /  
Sgt 3 LUQMAN HAKIM BIN KHAIRUDEN

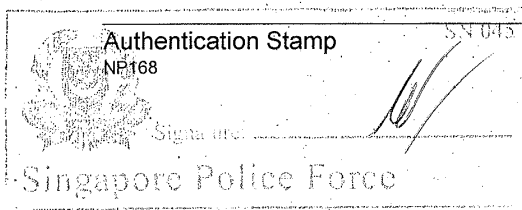
Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
24/07/2019 13:37

Officer In Charge Of Case:  
TP / GIT /  
Sr Staff Sgt CHONG GUAN FATT  
Contact No.: 65476083

Classification Of Case:



INSURANCE PTE LTD  
 100, North Bridge Road, #24-01  
 Tower, Singapore 068811  
 Tel: 65 6339 8888 Fax: 65 6339 8889  
 Email: www.axa.com.sg  
 Registration Number: 199903512M  
 Email: mer.care@axa.com.sg



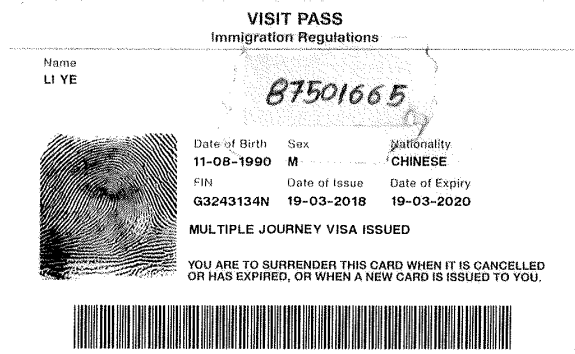
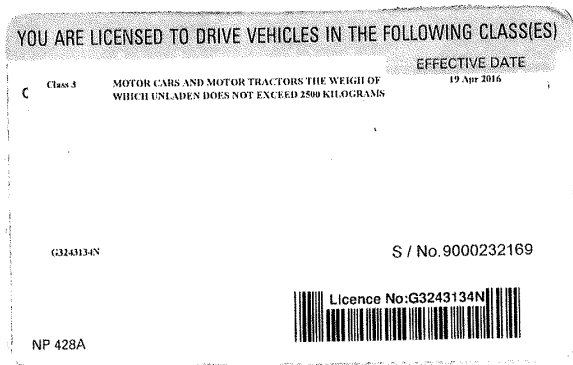
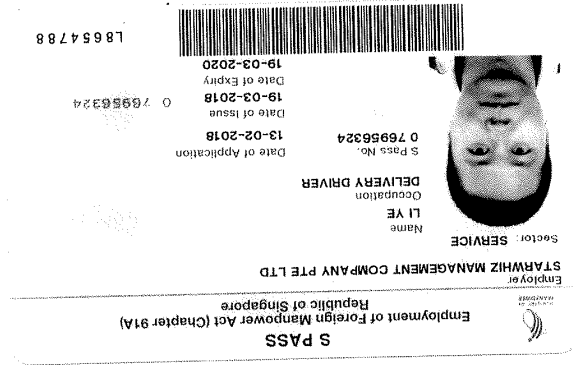
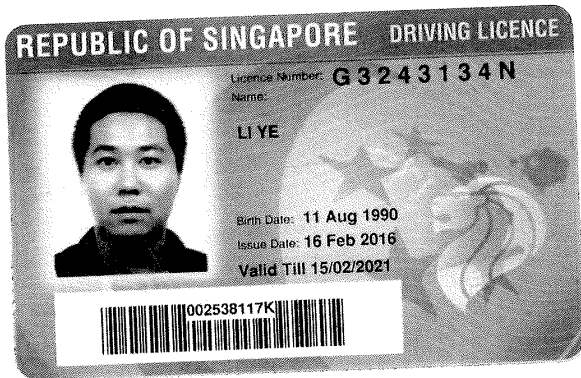
70170

Commercial Vehicles COMP  
 POLICY SCHEDULE  
 RENEWAL  
 Intermediary Copy

<b>POLICY INFORMATION</b>		Policy No. : VCA/P1770763	
Source	: 04437 ALLINK INSURANCE AGENCY		
Insured	: STARWHIZ MANAGEMENT COMPANY PTE LTD		
Address	: BLK 1 WHOLESALE CENTRE #03-11 SINGAPORE 110001		
Business/Profession	: CONSULTANCY <i>Carrying on or engaged in the business or profession last declared and no other for the purpose of this insurance.</i>		
Period of Insurance	: From 03/05/2019 To 02/05/2020 (Both Dates Inclusive)		
Any subsequent period for which the Insured shall pay and the Company shall agree to accept a renewal premium.			
<b>PREMIUM</b>			
Premium After 15.00% NCD	: SGD 1,623.14		
GST 7.00%	: SGD 113.61		
Annual Premium	: SGD 1,736.75		
Total Payable	: SGD 1,736.75		
<b>RISK DETAILS THE MOTOR VEHICLE</b>			
Type of Cover	: Comprehensive		
Regn. No.	: GBE9667S		
Type Of Use	: Commercial Vehicle		
Make/Model	: TOYOTA DYNA 3.0 M		
Year of Manufacture	: 2015		
Seating Cap. (Excl.)	: 2		
Driver	Carrying	Cap. (Tons) : 1.60	
Body Type	: LORRY WITH CANOPY/HOOD		
Engine No.	: 1KD2567009		
Chassis No.	: KDY2318022309		
Insured's Estimated Market Value	: Market Value At The Time Of Loss (including Accessories and Spare Parts)		
Limitations as to Use	: As specified in Certificate of Insurance		
Hire Purchase	: DAIMLER FINANCIAL SERVICES AFRICA & ASIA PACIFIC LTD		
<b>Excess Applicable</b>			
Sect I - Any Authorised Driver	: SGD 700.00		
Windscreen Excess	: SGD 140.00		

Continuation page 1

# Sketch Plan Pg. 7



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

