

NATIONAL Assessment Centre Services. [part 1 Jan'05] : MNA 119103232

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 | 06/08/2019 15:34 |
| Date Of Accident | 05/08/2019 10:35 |
| Exact Location Of Accident | JUNC OF JLN JURONG KECHIL & UPP BT TIMAH RD |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|---------------------|
| Vehicle Registration Number | GY7266P |
| Insured/Policyholder | |
| Name Of Registered Owner | GC HARDWARE PTE LTD |
| Co Reg No | - |
| Email Address | NOEMAIL |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-62525643 |

Vehicle Particulars

| | |
|--|--------------------|
| Manufacturer | TOYOTA |
| Model | DYNA |
| 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 | REPORTING ONLY |
| Vehicle Category | COMMERCIAL VEHICLE |

Insurance Company

| | |
|---------------------------|-------------------------------|
| Name of Insurance Company | UNITED OVERSEAS INSURANCE LTD |
| Type Of Coverage | THIRD PARTY |
| Fleet Policy | NO |
| Policy Number | DHOM110155271702 |
| Cover Note Number | |

Driver

| | |
|----------------------|-----------------------|
| Name of Driver | LAI YEW KONG |
| NRIC No | S1672705I |
| Date Of Birth | 11/02/1964 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 23/11/2007 |
| Driving Experience | 11 YEARS AND 8 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-81889008 |
| Fax Number | |
| Contact Number | |
| Email Address | NOEMAIL |

| | |
|---|--|
| Address | APT BLK 312B CLEMENTI AVENUE 4 #17-179 |
| Postcode | 122312 |
| 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 (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 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 | SJV2792A |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | THNG HUI HIEN |
| NRIC/Passport Number | S7428324A |
| Contact Number | |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | |

SKETCH PLAN

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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.

GC HARDWARE PTE LTD

18 Tannery Lane #03-02

Lum Kong Building Singapore 347780

Tel: 6252 5649, 6252 6570 Fax: 6253 6461

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Upp Bt timah Rod

A = GY7266
B = SJV2792

Jln Jurong Kechil

Please Refer to statement

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

18 Tannery Lane #03-02
Lum Kong Building Singapore 347780
Tel: 6252 5649, 6252 8570 Fax: 6253 6461

Date & Time:

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

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

I WAS TRAVELLING ALONG JLN JURONG KECHIL WHILE APPROACHING JUNC WITH UPP BT TIMAH RD, THE TURNING RIGHT ARROW WAS GREEN ON MY FAVOR, WHILE TURNING INTO UPP BT TIMAH RD, SUDDENLY VEH B WHICH WAS INFRONT OF ME JAMMED BRAKE DUE TO THE TURNING ARROW STARTED TO FLASH, I MANAGE TO STOP BUT CANNOT STOP IN TIME. AS THE RESULT, MY VEH HIT ONTO THE VEH B REAR PORTION.

ACCIDENT STATEMENT

ACCIDENT DATE: (5 / 8 / 19) (DD/MM/YYYY), TIME: (10 : 35) (HH:MM)

LOCATION: Junc of Jln Jurong Kechil & Upp Bt timah Rd.

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: GY 7266 P.
b) INSURANCE COMPANY: IOI
c) POLICY NUMBER: _____
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: _____
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: Working
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: Gic Hardware pte Ltd. (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: 62525643.
c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

3. DRIVER

- a) NAME: _____ (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: 81889008.
c) ADDRESS: _____

*d) DATE OF BIRTH: (____ / ____ / ____) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: _____

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS) _____
b) ROAD SURFACE: (DRY / WET / OTHERS) _____

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SJV 2792A. MODEL: _____
b) DRIVER'S NAME: Thng Hui Hien
c) NRIC/FIN/PASSPORT: 57428324A CONTACT: _____

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
e) DRIVER'S NAME: _____
f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

Waiting chop.

email

video

Lai Augustine @ gmail.com.

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S16727051



Name
LAI YEW KONG
黎耀光
Race
CHINESE
Date of birth
11-02-1964
Country of birth
SINGAPORE

Sex
M



REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number: S16727051
Name
LAI YEW KONG
Birth Date: 11 Feb 1964
Issue Date: 23 Nov 2007



001546538A

4823423



NRIC No. S16727051



Date of issue
10-02-2012

APT BLK 312B CLEMENTI AVENUE 4 #17-179
SINGAPORE 122312
NRIC No: S16727051 Date: 10/10/2016

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE
23 Nov 2007

Class 3 Motor Cars \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg

NP 428A



License No: S16727051

RENEWAL CERTIFICATE

ORIGINAL

| | | | | | |
|---------|---------|-----------------|-------------------------|----------------------|------------------------|
| Agency | A000041 | Class of Policy | MOTOR | Policy Number | DHOM110155271702 |
| Account | A000041 | Issued on | 07/01/2019 in UOI | Replacing Policy no. | DHOM110155271701 |
| Client | 0003315 | Acceptance Date | 31/12/2018 | | |

Period of Insurance from 17/02/2019 to 16/02/2020, both dates inclusive

Insured's Name.... GC HARDWARE PTE LTD
 Mailing Address... 18 TANNERY LANE
 #03-02 LIAN TONG BUILDING
 SINGAPORE 347780

Business/Occupn... WHOLESALE OF WELDING EQUIPMENT

| | | | | |
|---------|-----------------------|-------------|-------------|-----------|
| Premium | BASIC ANNUAL PREMIUM | SGD1,060.00 | | |
| | NO CLAIM BONUS 20.00% | SGD212.00- | | |
| | Total Annual Premium | SGD848.00 | Premium Due | SGD848.00 |
| | | | Less Disc. | SGD84.80 |
| | | | Premium GST | SGD53.42 |
| | | | Total Due | SGD816.62 |

| | | | | |
|--------------------------------|--------------------|---------------|-----------------------------|----------------------------|
| Risk No. 001 | COMMERCIAL VEHICLE | | | |
| 1. Registration | GY7266P | Make/Model .. | TOYOTA DYNA 150D DIESEL [2] | |
| Type of Cover | THIRD PARTY | No. of seats | 1 | Body Type LORRY/VAN |
| Engine No. .. | 5L5602722 | Capacity cc's | 0 | Yr of Manuf/Regn 2005/2005 |
| Chassis No. .. | JTFUF34Y203010830 | | | NCB%..... 20.00 |
| | | Tonnage | 2.00 | Certificate Ref. LCVC |
| THIRD PARTY ONLY | | | SGD0.00 | |
| APPL TO <25 YRS & OR <3YRS EXP | | | SGD2,000.00 | |

2 E - YOUNG AND INEXPERIENCED DRIVERS

3(P) - THIRD PARTY ONLY

72(B) - LEGAL LIABILITY OF PASSENGERS FOR ACTS OF NEGLIGENCE

POLICY OWNERS' PROTECTION SCHEME

THIS POLICY IS PROTECTED UNDER THE POLICY OWNERS' PROTECTION SCHEME WHICH IS ADMINISTERED BY THE SINGAPORE DEPOSIT INSURANCE CORPORATION (SDIC). COVERAGE FOR YOUR POLICY IS AUTOMATIC AND NO FURTHER ACTION IS REQUIRED FROM YOU. FOR MORE INFORMATION ON THE TYPES OF BENEFITS THAT ARE COVERED UNDER THE SCHEME AS WELL AS THE LIMITS OF COVERAGE, WHERE APPLICABLE, PLEASE CONTACT YOUR INSURER OR VISIT THE GIA / LIA OR SDIC WEBSITES (www.gia.org.sg OR www.lia.org.sg OR www.sdic.org.sg).

PREMIUM PAYMENT WARRANTY

1. NOTWITHSTANDING ANYTHING HEREIN CONTAINED BUT SUBJECT TO CLAUSE 2 HEREOF, IT IS HEREBY AGREED AND DECLARED THAT IF THE PERIOD OF INSURANCE IS 60 DAYS OR MORE, ANY PREMIUM DUE MUST BE PAID AND ACTUALLY RECEIVED IN FULL BY THE INSURER (OR THE INTERMEDIARY THROUGH WHOM THIS POLICY WAS EFFECTED) WITHIN 60 DAYS OF THE INCEPTION DATE OF THE COVERAGE UNDER THE POLICY, RENEWAL CERTIFICATE OR COVER NOTE.

2. IN THE EVENT THAT ANY PREMIUM DUE IS NOT PAID AND ACTUALLY RECEIVED IN