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 witholding 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	05/08/2019 14:44
Date Of Accident	03/08/2019 14:30
Exact Location Of Accident	BLK 914 TAMPINES AVE 5 OPEN CARPARK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBJ21M
Insured/Policyholder	
Name Of Registered Owner	HB SEAFOOD PTE LTD
Co Reg No	20134220M
Email Address	HAIDAOSEAFOOD@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-90919411
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	DYNA-3.0 D TURBO M/T 2WD (M)
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	GOODS VEHICLE
Insurance Company	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN3075481800
Cover Note Number	
Driver	
Name of Driver	ONG BENG YONG

NRIC No S1167402Z Date Of Birth 05/08/1955 Occupation **OUTDOOR Date Of Driving Pass** 10/10/1979 **Driving Experience** 39 YEARS AND 9 MONTHS Gender MALE

Mobile Number (LOCAL) +65-90919411

Fax Number **Contact Number**

EMail Address NOEMAIL Address BLK 909 TAMPINES AVE 4 #13-248

Postcode 520909

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident SIDE SWIPE
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?

YES

Was any other material or property damaged? 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 TAMPINES N.P.C

Police Station Address ROAD: TAMPINES N.P.C., POSTCODE: 529682, COUNTRY: SINGAPORE

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

AS PER SKETCH PLAN & POLICE REPORT ATTACHED.

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 SMM7455C

Vehicle Make/Model/Colour TOYOTA SILVER COLOUR

Details Of Properties

Vehicle Category PRIVATE HIRE

Name of Driver LEE THIAM YONG

NRIC/Passport Number S1737366H Contact Number 90044938

Address Postcode

Insurance Company Name

Nature Of Damage LEFT FRONT

Sketch Plan Pg. 1

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As per Po	lice Notice of wo the	reporting !	s/s retie	SD91 dated	04/08
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declarathe to egoing particu	lars are true in every respect. Driver's Signature O	151eA19	100000000000000000000000000000000000000	Centre Personnel's Sig.	nature

GIARMC SketchPlanForm_V3

POLICE REPORT Pg. 1

CONFIDENTIAL

ANNEX E

NOTICE OF REPORTING

This is to confirm that <u>ONG BENG YONG</u>, NRIC/FIN: <u>S1167402Z</u>, <u>HP: 90919411</u>, <u>ADDRESS:BLK 909 TAMPINES AVENUE 4 #13-248</u> has reported to the Police a non-injury traffic accident which occurred at <u>BETWEEN BLK 915 AND 914 TAMPINES ST 91 OPEN CARPARK LOT 45 AND LOT 955</u> on <u>03/08/2019</u> at <u>1450HRS</u> involving the following vehicles:

- a) SMM7455C
- b) GBJ21M

On the 03/08/2019 at around 1450hrs, my vehicle GBJ21M was parked at the open carpark between Blk 914 and 915, Lot 45. As my vehicle was parked head in to the lot, thus I want to reverse to get out of the lot. While I was reversing a quarter, there was another vehicle SMM7455C coming from my left then honk at me, I then stopped my vehicle as I assumed that he wants to park his vehicle into Lot 955. While he was trying to park into the lot, the left front side of his vehicle then collided onto the right rear side of my vehicle.

Both of us then got down of the vehicle and agreed to settle it privately and we both then left the location. There is no damage to my vehicle. There is a front in-car camera inside my vehicle. I have also notice that there is an in-car camera inside the other party vehicle which may have captured the accident.

No one was injured. No government property damaged. No pedestrian or cyclist involved.

2. If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap276.

Rank/Name of Issuing Officer: <u>SGT LAM XUE TING</u>

Date: <u>04/08/2019</u> Time: <u>2120HRS</u>

S/D Ref: <u>eSD 91 dated 04/08/2019</u>

Police Post / Unit: Tampines NPC

Original — to be issued to complainant Duplicate - to be submitted to Traffic Police SINGARORE
POLICE FORCE

SIGNATURE

CONFIDENTIAL

Version as of 15 Sep 2000

INSURED CI Pg. 1



中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

3 Anson Road #16-00 Springleaf Tower Singapore 079909 Tel: 6389 6111 Fax: 6222 1033 Website: www.sg. cntalping.com Co. Reg. No. 200208384E

ORIGINAL

THE SCHEDULE

Agency	AN0444A	Class of Policy	MOTOR COMME	RCIAL VEHICLE	Polic	y Number	DMCVSN3075481800
Account	AN0444A	Issued on	26/11/2018	in SINGAPORE		•	
Client	3214415	Acceptance Date	23/11/2018		Repla	cing Cover Note	60013983
Period o	of insuranc	e from 1617 hours	on 23/11/20	18 to 2400 hour	s on 22/11/2019		
Insured'	s Name		HB SEAFOOD	PTE LTD			TIPELL TO THE TOTAL THE TOTAL TO THE TOTAL TOTAL TO THE T
	Address.		1 TAMPINES	NORTH DRIVE 1			
			#02-20				
			T-SPACE				
			SINGAPORE 5	28559			
Business	/Occupn	IMPORTER OF LIVE	SEAFOOD				
Premium Base Annual Prem							
Premium	• • • • • • • • • •	Base Annual Premi	ium		S\$1,905.30		
Premium		No Claim Discount	t		S\$1,905.30 S\$0.00		
Premium		No Claim Discount Windscreen @ \$1,0	t 000		. ,		
Premium	••••	No Claim Discount	t 000		\$\$0.00 \$\$50.00	Premium Due	S\$1,955.3
Premium		No Claim Discount Windscreen @ \$1,0	t 000		\$\$0.00 \$\$50.00	Premium Due Premium GST	
Premium		No Claim Discount Windscreen @ \$1,0	t 000		\$\$0.00 \$\$50.00		\$\$1,955.3 \$\$136.8 \$\$2,092.1
Premium		No Claim Discount Windscreen @ \$1,0 Total Annual Pres MOTOR COMMERCIAL	t		\$\$0.00 \$\$50.00	Premium GST	\$\$136.8
Risk No.	001	No Claim Discount Windscreen @ \$1,0 Total Annual Pres MOTOR COMMERCIAL ORIGINAL REGISTRE	t	23-11-2018	\$\$0.00 \$\$50.00	Premium GST	\$\$136.8
Risk No.	001	No Claim Discount Windscreen @ \$1,0 Total Annual Pres MOTOR COMMERCIAL ORIGINAL REGISTRA GBJ21M	t	23-11-2018 Make/Model	\$\$0.00 \$\$50.00	Premium GST Total Due	\$\$136.8
Risk No. 1. Reg	001 (istration be of Cover	No Claim Discount Windscreen @ \$1,0 Total Annual Pres MOTOR COMMERCIAL ORIGINAL REGISTRA GBJ21M Comprehensive	t	23-11-2018 Make/Model No. of seats	\$\$0.00 \$\$50.00 \$\$1,955.30	Premium GST Total Due	S\$136.8 S\$2,092.1
Risk No. 1. Reg Typ Eng	001 (istration be of Cover (ine No	No Claim Discount Windscreen @ \$1,0 Total Annual Pres MOTOR COMMERCIAL ORIGINAL REGISTRA GBJ21M	t	23-11-2018 Make/Model	\$\$0.00 \$\$50.00 \$\$1,955.30 TOYOTA DYNA	Premium GST Total Due G150	\$\$136.8 \$\$2,092.1
Risk No. 1. Reg Typ Eng	001 (istration be of Cover (ine No	No Claim Discount Windscreen @ \$1,0 Total Annual Pres MOTOR COMMERCIAL ORIGINAL REGISTRA GBJ21M Comprehensive 1KD2753039	t	23-11-2018 Make/Model No. of seats	\$\$0.00 \$\$50.00 \$\$1,955.30 TOYOTA DYNA 3	Premium GST Total Due G150 Body Type Yr of Manuf/Reg	S\$136.8 S\$2,092.1 . LORRY m 2017/2018
Risk No. 1. Reg Typ Eng Cha	001 distration se of Cover dine No	No Claim Discount Windscreen @ \$1,0 Total Annual Pres MOTOR COMMERCIAL ORIGINAL REGISTRA GBJ21M Comprehensive 1KD2753039	t	23-11-2018 Make/Model No. of seats Capacity cc's	\$\$0.00 \$\$50.00 \$\$1,955.30 TOYOTA DYNA 3 0	Premium GST Total Due G150 Body Type	S\$136.8 S\$2,092.1 . LORRY m 2017/2018
Risk No. 1. Reg Typ Eng Cha	001 (istration of Cover ine No issis No	No Claim Discount Windscreen @ \$1,0 Total Annual Pres MOTOR COMMERCIAL ORIGINAL REGISTRA GBJ21M Comprehensive 1KD2753039 KDY2318031409	t	23-11-2018 Make/Model No. of seats Capacity cc's Tonnage	\$\$0.00 \$\$50.00 \$\$1,955.30 TOYOTA DYNA 3 0	Premium GST Total Due G150 Body Type Yr of Manuf/Reg	S\$136.8 S\$2,092.1 . LORRY m 2017/2018

The following clauses and endorsements apply to this policy Subject to Endts. 2, Y, 25, 57, 72 & W(\$1,000.-). Endorsement E - Elderly Excess

It is hereby declared and agreed that an Excess of S\$2,000.00 shall apply for accident loss or damage for any unnamed authorised driver who is 66 years old and above (Age as at Date of Accident).

Once this S\$2,000.00 Excess is applied, other Excess(es) applicable under different Endorsement(s) of this Policy shall not be applicable.

MODIFIED VEHICLES (FOR COMMERCIAL VEHICLES/BUSES/RENTAL VEHICLES)

It is hereby declared and agreed that the Company shall not be liable for any claims under SECTION I or II or both if the vehicle has been modified without prior notice/declaration to the Company.

Subject otherwise to the terms, exceptions and conditions of the Policy.

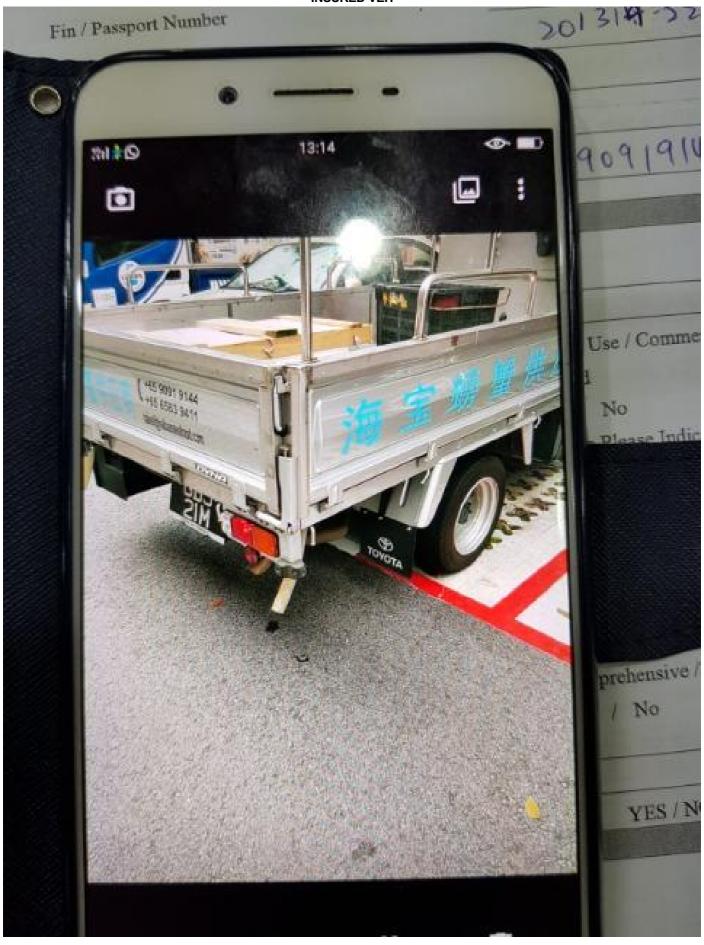
MEMORANDUM : CONDITION NO. 4 - NOTIFICATION OF ACCIDENTS

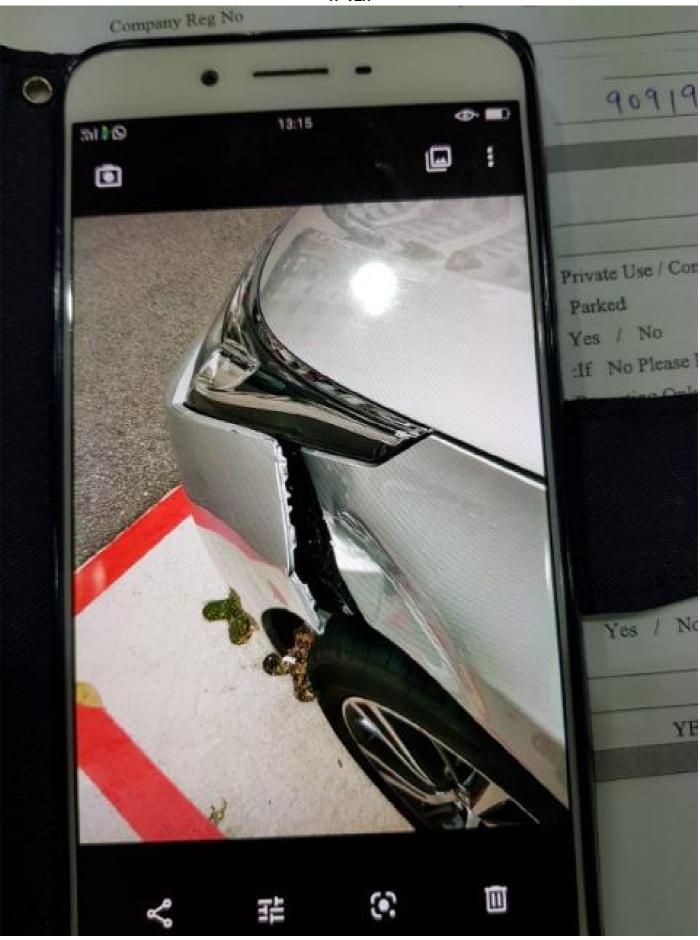
It is hereby noted and agreed that Condition No. 4 of the Policy is amended to read as follows:-

Notification Clause

Continued on page 2









INSURED VEH CHASSIS NO















