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 <u>truthful and accurate</u> 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

aforesaid.	J , J J	
	ACCIDENT STATEMENT	
Date Of Report	15/10/2019 15:59	
Date Of Accident	14/10/2019 12:40	
Exact Location Of Accident	PARKWAY PARADE SHOPPING CENTRE 4TH FLOOR CARPARK	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBF565G	
Insured/Policyholder		
Name Of Registered Owner	ETERNAL JOY TRADING	
Co Reg No	52882235K	
Email Address	CHOCTONG@163.COM	
Mobile Phone No		
Alternative Phone No	OFFICE-97682189	
Vehicle Particulars		
Manufacturer	FIAT	
Model	DOBLO CARGO MAXI 1.6 MT J6MT GLAZE	
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	THIRD PARTY	
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	DMCVSN3034291900	
Cover Note Number		
Driver		
Name of Driver	ZHENG ZUOTONG	
NRIC No	S2666624D	

Date Of Birth 16/11/1951
Occupation OUTDOOR
Date Of Driving Pass 20/10/2003

Driving Experience 15 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97682189

Fax Number
Contact Number

EMail Address CHOCTONG@163.COM

20 CARMAN STREET Address

459748 Postcode

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) YES

soliciting/offering accident claims assistance.

2 Number of Passengers (Including Driver)

Passenger 1

NAME: : JAMIE

GENDER: : FEMALE

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?

If Yes, against whom?

NO

1

Circumstances of Accident

AS PER ATTACHED SKETCH PLAN

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 SLA2860Z

Vehicle Make/Model/Colour MER BENZ SILVER COLOUR

Details Of Properties

Vehicle Category PRIVATE CAR

YIP SWEE HENG DAPHNE Name of Driver

NRIC/Passport Number S1406265C **Contact Number** 93650133

Address 15 MINARET WK

Postcode 467388

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 19

SKETCH PLAN

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- 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, gulators, law enforcement and government agencies as reasonably required for the purposes stated, or

for complying with requirements under any regulations, laws or court orders.

Policynolaer's Signature Date & Time: Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

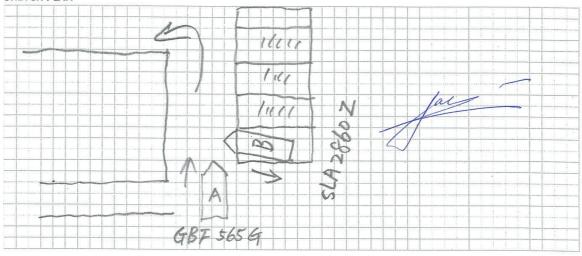
15/10-19 12:20 pm.

Name:

NRIC/FIN No.:

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The Accident
昨天中午约12:38,别赠发生在PARKWAY PARADE SHOPING
CENTRE的四楼停车坞。当形的车(红色)在WAY OUT 省级
上,在我前面的(SLA 2860 Z) 魏色器车要倒车进在形
女右向的爱你 PARKING LOT, 我的车面当时就停在
蓝田地要PARKING的车位亭丛,地当时马顶着
地车后面的方向没注意到刑的车就在空车
长的要位,而用地信车的使我很快,一下子
就把车倒进地要停的车位,当时形看到这
情况,怕她的车头倒进车位时,会碰到我的
车头,就赶快要往后退,但她另两倒车,
另看她的华尼亚, 没注意到我的车就在她
车的旁位, 和且地面倒车进位的速挡
决,我来不及倒展,当她的车倒供她的车位
时,她车的前头就接触到我的车头位置。
M. P. G. C.
TOV 2

DECLARATION

We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

15/0-19/12:20 pm

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

GIARMC SketchPlanForm_V3



中国太平保险(新加坡)有限公司 CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

MZ300/C N SN AN0450A COMPREHENSIVE AUTOSAFE

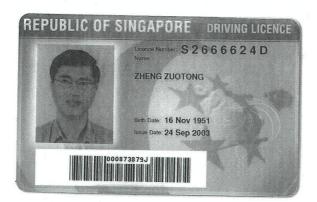
Engine No :198A30007584915

CERTIFICATE OF INSURANCE

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)

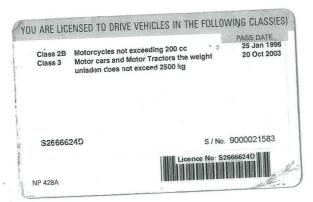
CERTIFICATE NO.	DMCVSN3034291900	Chassis No: ZFA26300006C31627		
Index Mark and Registration Number of Vehicle	GBF565G			
2. Name of Policy Holder	m/s eternal joy t	RADING (52882235K).		
Effective date of the Commencement of Insur- the purposes of the Regulations, Ordinance or		EX SECT. I		
4. Date of Expiry of Insurance	06 JUNE 2020			
5. Persons or Classes of Persons entitled to driv	e *			
1				
ANY PERSON WHO IS DRIVING ON T	HE POLICYHOLDER'S ORDER OR WI	TH 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.				
× =				
6. Limitations as to use: *		*		
(1) USE IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS. (2) USE FOR THE CARRIAGE OF PASSENGERS (OTHER THAN FOR HIRE OR REWARD) IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS. (3) USE FOR SOCIAL, DOMESTIC OR PLEASURE PURPOSES.				
THE POLICY DOES NOT COVER. (1) USE FOR HIRE OR REWARD OR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED TESTING. (2) USE WHILST DRAWING A TRAILER EXCEPT THE TOWING OF ANY ONE DISABLED MECHANICALLY PROPELLED VEHICLE.				
HIRE PURCHASE CO.: MERCEDES-BENZ FINANCIAL SERVICES SINGAPORE LTD AS HP OWNER * 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.				
(Third-Party Risks and Compensation) A	olicy to which this Certificate relates is iss act (Chapter 189) and Part IV of the Road	Transport Act, 1987 (Malaysia). Please see reverse For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.		
Countersigned By:Autho	rised Officer	Authorised Signatory		

3 Anson Road #16-00 Springleaf Tower Singapore 079909 Tel: 6389 6111 Fax: 6225 3592 Website: www.sg.cntaiping.com









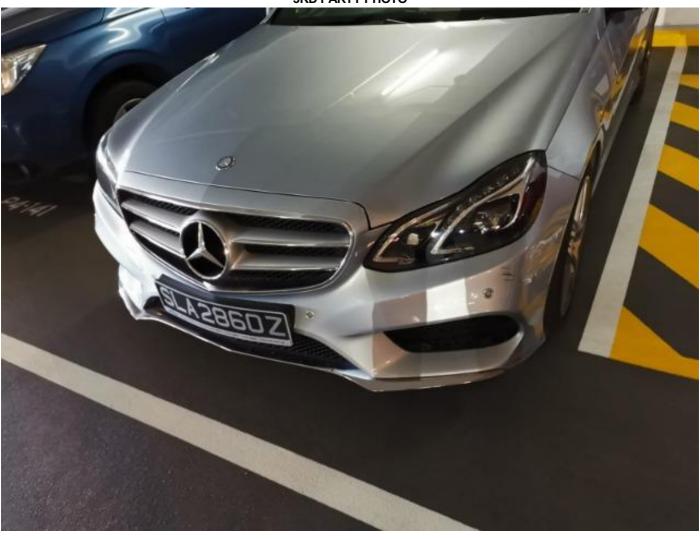


3RD PARTY PHOTO

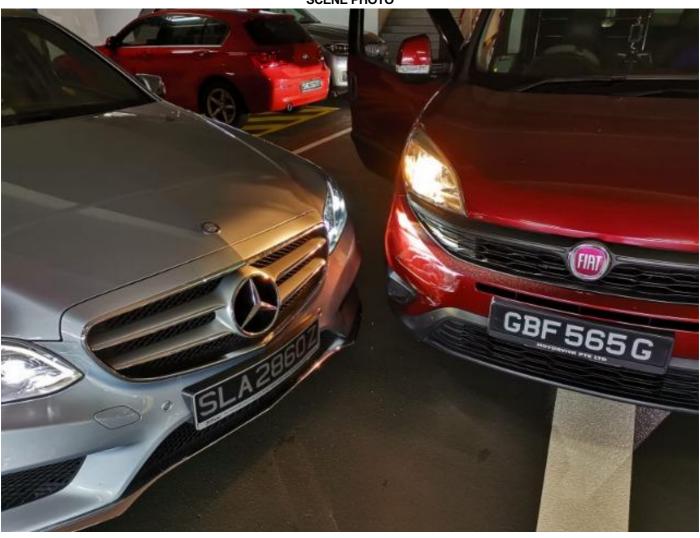


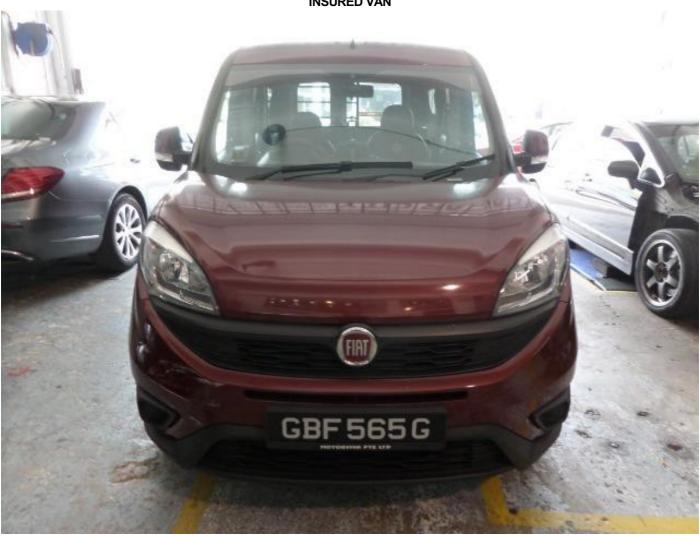


3RD PARTY PHOTO



SCENE PHOTO







INSURED VAN VOKOHAMA VOKOHAMA GBE 565 G GBE 565 G











