

## 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	02/12/2019 11:16
Date Of Accident	30/11/2019 06:50
Exact Location Of Accident	YISHUN ST.42 - WORKSITE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	XE1978L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SOON LEE TRANSPORT PTE LTD
Co Reg No	200900750R
Email Address	SOONLEETRANSPORT@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-62881705

### Vehicle Particulars

Manufacturer	ISUZU
Model	CYZ52K
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	DMCVSN1822381901
Cover Note Number	26/07/19 - 25/07/20

### Driver

Name of Driver	TEO PENG GUAN
NRIC No	S1626147E
Date Of Birth	22/10/1963
Occupation	OUTDOOR
Date Of Driving Pass	29/06/1988
Driving Experience	31 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97707688
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	25 CANBERRA DRIVE #08-50
Postcode	768078
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	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?	
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

I on my double hazard light and left signal light and was about to turn left into the worksite. Out of sudden, I heard sound at my left and realised m/taxi SHF475L was beside me. Both vehicles had came into contact with each other. No one was injured.

#### 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	SHF475L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	SIVASANKAR S/O MANOHARAN
NRIC/Passport Number	S7832914I
Contact Number	90270943
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Sketch Plan

### SKETCH PLAN

VEHICLE NO.: XE 1978L  
INSURER : China Taiping  
DATE & TIME: 30/11/19 @ 06:50am

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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.



Policyholder's Signature  
Date & Time:

*[Signature]* 02/12/2019  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

*[Signature]* 02/12/19  
Reporting Centre Personnel's Signature  
Name: *(YS)*  
NRIC/FIN No.:

## Sketch Plan #2

### SKETCH PLAN

Worksite

Vishnu St. 42

A- XE1978L  
B- SHF 475L  
Sivasankar s/o  
Manoharan  
\$7B329141  
HP-90270943

### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I on my double hazard light and left signal light and was about to turn left into the worksite. Out of sudden, I heard sound at my left and realised m/taxi SHF475L was beside me. Both vehicles had came into contact with each other. No one was injured.

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.

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.:

G:\ARMC SketchPlanForm\_V3

( ) Claim Own Policy ( ) Claim Third Party ( ) Claim OD/TP at other workshop ( ) Reporting Only

## Driving License

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1626147E



Name

TEO PENG GUAN

张炳源

Race

CHINESE

Date of birth

22-10-1963

Sex

M

S1626147E

Country/Place of birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number S1626147E

Name

TEO PENG GUAN

Birth Date 22 Oct 1963

Issue Date 16 Dec 2002



0000361078

6194332



MRIC No. S1626147E



Date of issue

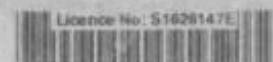
15-05-2019

Address

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

PASS DATE

Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	05 Jan 1984
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	13 Jan 1986
Class 5	Motor Vehicles which are not constructed themselves to carry any load and the weight of which unladen exceeds 7250 kilograms	29 Jun 1986



License No: S1626147E

NP 428A

Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



## SCENE



SCENE





SCENE

