





## 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	12/12/2019 17:49
Date Of Accident	12/12/2019 07:35
Exact Location Of Accident	TPE TOWARDS PIE AFTER PASIR RIS DRIVE 12
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GY3652J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHAN & CHAN ENGINEERING PTE.LTD.
Co Reg No	200407B14Z
Email Address	LGW6356@HOTMAIL.COM
Mobile Phone No.	(LOCAL) +65-88215280
Alternative Phone No	OFFICE-88215280

### Vehicle Particulars

Manufacturer	NISSAN
Model	P/UP D/CAB-2.7 D (M)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMCVSN3016941900
Cover Note Number	

### Driver

Name of Driver	LING GUONG WEI
NRIC No	S8986707Z
Date Of Birth	31/07/1989
Occupation	INDOOR
Date Of Driving Pass	08/07/2017
Driving Experience	2 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88215280
Fax Number	
Contact Number	OTHERS-88215280
Email Address	LGW6356@HOTMAIL.COM

Address 19 FERNVALE LANE  
#21-21  
Postcode 797499

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 CHAIN COLLISION  
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 8

Was any body injured in the Accident? YES

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? YES

If Yes, Please state which Police Station:

Police Station Name TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY

Police Station Address ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY: SINGAPORE

Police Station Contact TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given? NO

If Yes, against whom?

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20191212/7005

#### 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 SGX4895Z

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SJS6305M

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number

SKQ5830T

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number

GBJ5745A

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 5

Vehicle Registration Number

YP4250M

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 6

Vehicle Registration Number SLV7037R  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 7

Vehicle Registration Number SLJ5849R  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF INJURED PERSON 1

Name LING GUONG WEI  
Approximate Age  
Injuries Sustain SLIGHT INJURY  
Injured person in which vehicle? GY3652J  
Were seat belts worn? YES  
Was this injured conveyed to hospital by ambulance? NO  
Address  
Postcode



## SKETCH PLAN

### IMPORTANT NOTICE

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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, 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:

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

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

### SKETCH PLAN

TYPE TOWARDS PIE AFTER PASSING R/L DRIVE 12



### Tampines Expressway

(A) GY3652J  
(B) SGx 4R95Z  
(C) SJSG305M  
(D) SKQ5830T  
(E) GBJ5745A  
(F) YP4250M  
(G) SLV7037R  
(H) SLJ5849R



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to police report (Report No. T 2019 1212 7005)



## 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.: \_\_\_\_\_



# SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 12 <sup>th</sup> DECEMBER 2019		TIME: 07:35 hrs. (hh:mm) 24 hrs Format	
LOCATION TPE TOWARDS PIE AFTER PASIR RIS DRIVE 12			
VEHICLE NUMBER GY3652J			
INSURED NAME Chan & Chan Engineering Pte Ltd			
NRIC / FIN 2004018147		CONTACT:	
MAKE Nissan		MODEL P/Up 0/G6	
Are you claiming under your own insurance policy for repair to your vehicle?			
( ) Yes, If No, Pls Select : ( / ) Third Party ( ) Reporting Only			
INSURANCE COMPANY China Taiping			
TYPE OF POLICY ( / ) COMPREHENSIVE ( ) THIRD PARTY ( ) TPFT			
POLICY NUMBER : DMCVSN3016941900			
NAME DRIVER : Ling Guang Wei		( ) SAME AS INSURED	
NRIC / FIN 889867072		CONTACT: 88215280	
DATE OF BIRTH: 31/07/1989			
DRIVING PASS DATE: 08/07/2017			
OCCUPATION : ( / ) INDOOR ( ) OUTDOOR			
GENDER : ( / ) MALE ( ) FEMALE			
EMAIL ADDRESS: lqw6356@hotmail.com		( ) NO EMAIL	
ADDRESS OF DRIVER: 19 Fernvale Lane #21-01			
56797499			
Number Of Passenger Include Driver: Driver Only			
Was driver an employee of the Insured's Company? ( / ) YES ( ) NO			
If No, Relationship Of The Driver With The Insured			
( ) Owner ( ) Spouse ( ) Friend ( ) Relative ( ) Children ( ) Sibling ( ) Others			
Does The Driver Own Any Other Vehicle? : ( ) YES ( / ) NO			
If Yes, Vehicle Registration Number Of Driver's Own Vehicle:			
Insurance Company Of Driver's Own Vehicle			
Weather Conditions: ( / ) Clear ( ) Raining ( ) Drizzling ( ) Others			
Road Surface : ( ) Dry ( / ) Wet ( ) Others			
Was Any Foreign Vehicle Involved In This Accident? ( ) YES ( / ) NO			
Was Anybody Injured In The Accident? ( ) YES ( / ) NO			
If YES, Injured details : Ling Guang Wei; 889867072			
Convey By Ambulance: ( ) YES ( / ) NO			
Was There Any Video Capture By Car Camera? ( ) YES ( / ) NO			
Was There Accident Reported To The Police? ( / ) YES ( ) NO If Yes Attach Police Report			
Police Report Number (if any) T/20191212/7005			
Details Of 3rd Party			
Name / NRIC		No. of Paxs (incl'driver)	Contact
Veh B	SGX 4895Z	( ) / Not Sure ( )	
Veh C	SJS 6305M	( ) / Not Sure ( )	
Veh D	SKG 5830J	( ) / Not Sure ( )	
Veh E	GBJ 5745A	( ) / Not Sure ( )	
Veh F	YP 4350M	( ) / Not Sure ( )	
Veh G	SLY 7037R	( ) / Not Sure ( )	
Veh H	SLJ 5849R	( ) / Not Sure ( )	





**SINGAPORE  
POLICE FORCE**



T/20191212/7005

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 3

Report No. T/20191212/7005

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 12/12/2019 10:43		Vide Report No.: G/20191212/0072		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: LING GUONG WEI			Address: 19 FERNVALE LANE #21-21 SINGAPORE 797499		
ID Type / ID No.: NRIC NO / S8986707Z			Contact No.: Home/Office: Mobile: 88215280		
Nationality: MALAYSIAN			Email: LGW6356@HOTMAIL.COM		
Sex: Male	Age: 30	Date of Birth: 31/07/1989	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: ENGINEER			Driving Licence Information: Class:		Date of Expiry:

**General Information of the Accident**

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 12/12/2019 07:35	Type of Location: Straight Road
Location:  TAMPINES EXPRESSWAY				
Weather: Clear		Road Surface: Wet		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume: Moderate
Type of Collision: CHAIN COLLISION				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
GBJ5745A	Van E					0
GY3652J	Lorry A					0
SGX4895Z	Car B					0
SJS6305M	Car C					0
SKQ5830T	Car D					0



# SINGAPORE POLICE FORCE



T/20191212/7005

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20191212/7005

## CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLJ5849R	Car H					0
SLV7037R	Car G					0
YP4250M	Lorry F					0

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LING GUONG WEI	ID No.	S8986707Z
Related Vehicle	GY3652J (Lorry)	Contact No.	88215280
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

### Brief Details.

On 12th December 2019 at about 7:35am, I was travelling along TPE towards PIE after Pasir Ris Drive 12. I was on lane 2 of 3 lanes. The vehicle in front of me slowed down and stopped. Noticing that, I followed suit and stopped my vehicle. After a few seconds, I felt a great impact from the rear. The impact was so huge that it pushed my vehicle forward and collided onto the vehicle in front of me (SLJ5849R). I alighted and realised the vehicle behind of me (SGX4895Z) had collided onto my vehicle and it was a chain collision involving a total of 8 vehicles. I was the 3rd vehicle in the chain. I was told by the Traffic Police to lodge a Traffic Accident Report.





**SINGAPORE  
POLICE FORCE**



T/20191212/7005

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

3 of 3

Report No: T/20191212/7005

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPB /  
YEO CHUN JIAN  
Contact No.: 65476213

Authentication Stamp

NP168

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:  
12/12/2019 10:43

Classification Of Case:

**CERTIFICATE OF INSURANCE**

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)  
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1950  
Road Transport Act, 1987 (Malaysia)  
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.	DMCVSN3016941980	Engine No. TD27753372 Chassis No. JN1CHGD2220077143
1. Index Mark and Registration Number of Vehicle	GY3652J	
2. Name of Policy Holder	M/S CHAN & CHAN ENGINEERING PTE LTD	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	05 MARCH 2019 (15:35 HOURS) 04 MARCH 2020	
4. Date of Expiry of Insurance		
5. Persons or Classes of Persons entitled to drive *		

ANY PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH 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.

\* 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

**I/We hereby Certify** that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) 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: **ITRUST PTE LTD**  
52 FOCH ROAD  
#03-02  
SINGAPORE 209274  
TEL: 6488 0883 FAX: 6286 0295  
EMAIL: [itrust@singnet.com.sg](mailto:itrust@singnet.com.sg)  
Authorised Officer

  
Authorised Signatory



> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Company
Owner ID:	814Z
<b>Vehicle Details</b>	
Vehicle No.:	GY3652J
Vehicle to be Exported:	Yes
Intended Deregistration Date:	12 Dec 2019
Vehicle Make:	NISSAN
Vehicle Model:	P/UP D/CAB
Primary Colour:	Silver
Manufacturing Year:	2005
Engine No.:	TD27753372
Chassis No.:	JN1CHGD22Z0077143
Maximum Power Output:	-
Open Market Value:	\$19,687.00
Original Registration Date:	16 Mar 2005
First Registration Date:	16 Mar 2005
Transfer Count:	1
Actual ARF Paid:	\$21,656.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	15 Mar 2020
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$27,286.00
COE Rebate Amount:	\$1,694.00
<b>Total Rebate Amount:</b>	<b>\$1,694.00</b>
<b>Message</b>	
Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.	

The information contained herein is correct as at 12 Dec 2019