SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Mobile Number

Fax Number **Contact Number EMail Address**

- 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.

By the lodgement of this report to the insurers, you hereby consaforesaid.	ent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	07/01/2020 16:34
Date Of Accident	22/11/2019 13:10
Exact Location Of Accident	PIE TOWARDS CHANGI NEAR LORNIE RD EXIT 20B
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	GBB8374J
Insured/Policyholder	
Name Of Registered Owner	T.A.P EXPRESS
Co Reg No	53363121A
Email Address	ENQUIRIES@TAPEXPRESS.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-69315392
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	FB70BB1SRDEA
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	DMCVSN1922391900
Cover Note Number	27/5/19-26/5/20
Driver	
Name of Driver	NOR ZAIRI BIN NOR ZAHID
NRIC No	S9634948C
Date Of Birth	07/10/1996
Occupation	OUTDOOR
Date Of Driving Pass	08/10/2015
Driving Experience	4 YEARS AND 1 MONTH
Gender	MALE

(LOCAL) +65-98068845

NOEMAIL

BLK 338 WOODLANDS AVE 1 #01-569 Address

Postcode 730338

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 NO COLLISION

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

1

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

Was any other material or property damaged? I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO 1

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name NANYANG N.P.C

ROAD: 2 JURONG WEST AVE 5, POSTCODE: 649482, COUNTRY:

Police Station Address **SINGAPORE**

TEL NO: 1800-7929999 - FAX NO: Police Station Contact

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

REFER ATTACHED

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

YES

NO NO

Sketch Plan

SKETCH PLAN

VEHICLE NO.: GB3 8374J

INSURER DATE & TIME:

22/11/19

IMPORTANT NOTICE

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- 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.
- 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.
- 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:
 - 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:
 - 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:

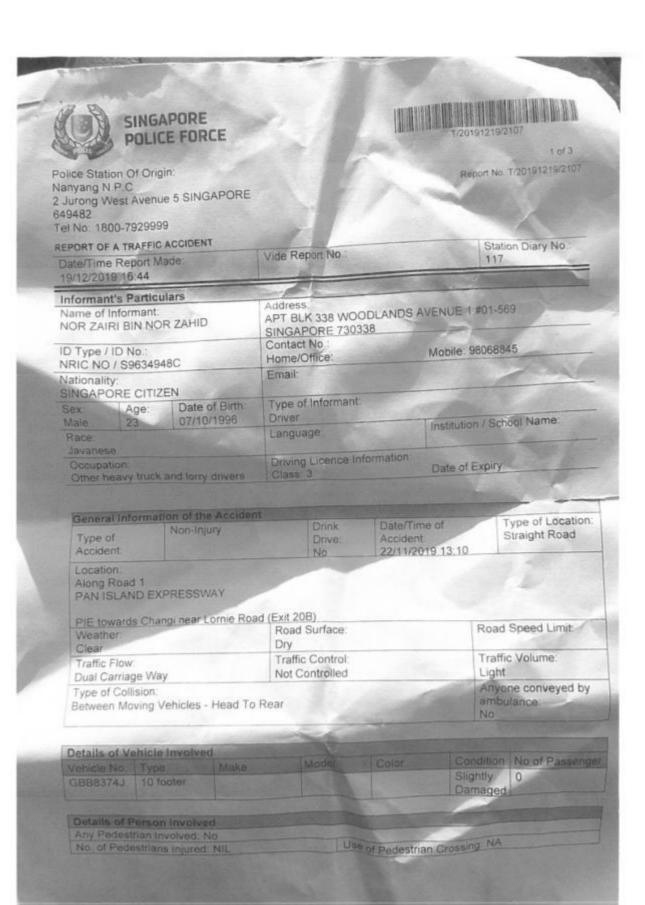
Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name: Yeur (US)

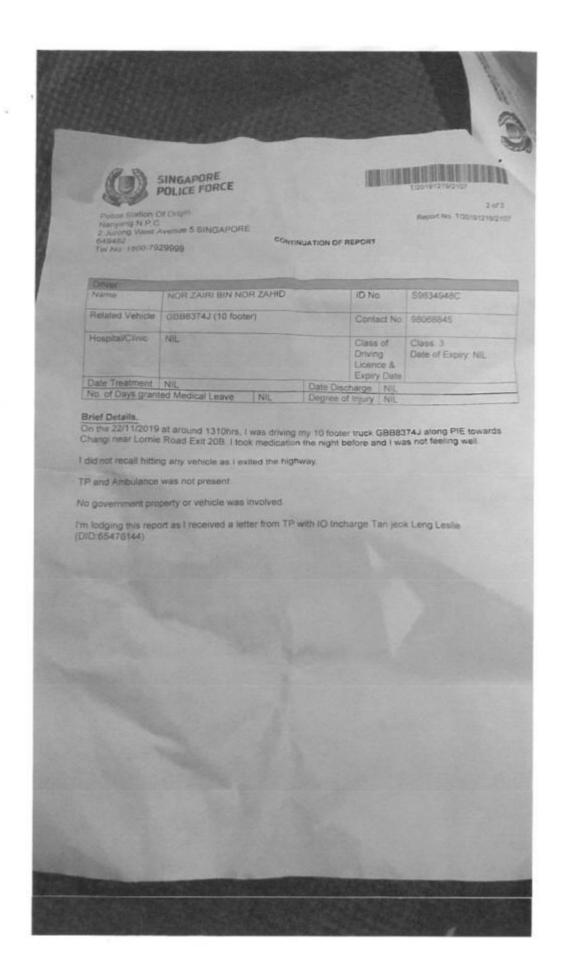
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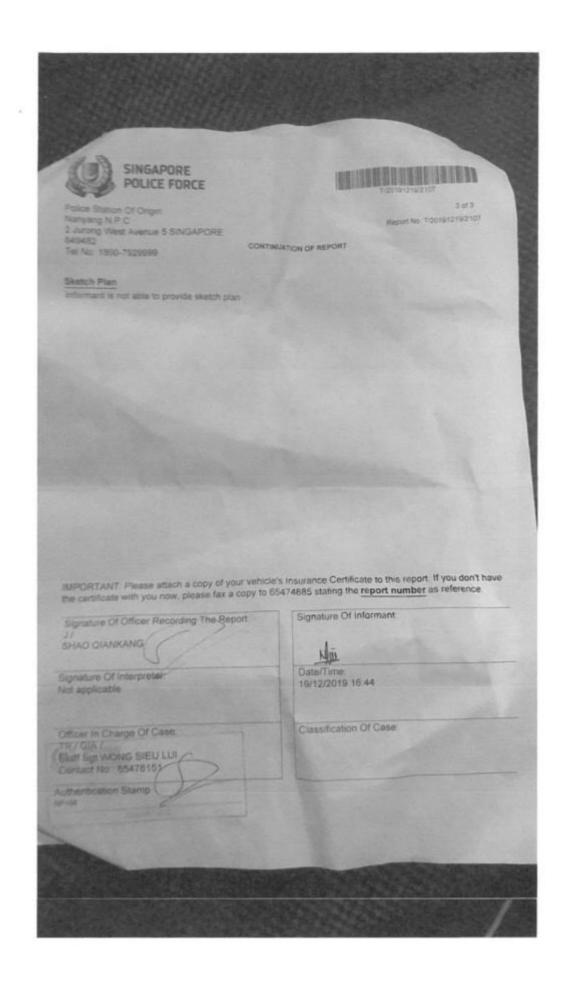
NRIC/FIN No.:

GOARMC SkeschPlanForm_V3

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Co: Representiu:	ASHARI 5-90415 1720169	588-C 15			driver	is n	0 10n 2/11 / 1	g.	
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Report No. L/20191123/2006

POLICE REPORT (NP299)

Police Station Of Origin Yishun North N.P.C 31 Yishun Central SINGAPORE 768827 Tel No: 1800-8529999

Date/Time Report Made 23/11/2019 02:55	Vide Report No. L/20191123/0002		Station Diary No. 22				
Name Of Informant	Address	Address					
ABDUL AZIZ BIN ZUBIR	APT BLK 709 YISHUN AVENUE 5 #03-86 SINGAPORI						
ID Type / ID No. NRIC NO / S8423948H	(0.00000)	Contact No. Home/Office					
Nationality SINGAPORE CITIZEN	92371108 Email Address						
Occupation	Sex	Age	Date of Birth	Race			
SELF-EMPLOYED	Male	35	19/08/1984	Indian			
Institution/School Name	Language English						
Date/Time Of Incident 22/11/2019 15:10	Location Of Incident 15 YISHUN INDUSTRIAL STREET 1 WIN 5 SINGAPORE 768091 T.A.P. EXPRESS						

Brief details.

I am the owner of the truck (black Mitsubishi Canter bearing registration no.: GBB 8374J) for my company, T.A.P. Express, a delivery company.

Around mid-September 2019 (exact date unknown), I handed over the truck to my worker (Nor Zairi bin Nor Zahid, NRIC: S9634948C, HP: 81027723) for working purposes.

Signature Of Officer Recording The Report:

L / Sgt 2 MUHAMAD SYABIL BIN SALLEH

Signature Of Interpreter: Not applicable

Officer In-Charge Of Case: L / Woodlands Police Divisional Investigation Branch / ASP TAN TENG HONG, COLIN Contact No.:

Authentication Stamp

Signature Of Informant:

Date/Time: 23/11/2019 02:55

Classification Of Case:









2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20191123/2006

On 22/11/2019, at 3.11pm, one of my clients informed my admin officer that their products were not delivered. At 3.27pm, Zairi informed that he will reach in 5 minutes.

At 8.17pm to 9.39pm, my client chased me to inform that they still have yet to receive their products and informed to deliver the products the following day instead. By then, Zairi was uncontactable.

At 10.40pm, my supervisor, Iliya (HP: 87422944), informed that the vehicle is at Woodlands Exchange.

At around 11.30pm, I went to the said location.

My supervisor then informed that Zairi had just left when I arrived. I proceeded to make a check on the vehicle and I observed that the front right headlight was broken and the front right bumper was dented badly. The front bumper was also dented.

I wish to state that the vehicle was involved in a previous accident but the damage was not as bad.

I called Zairi's mother and she told us to come to her house (Blk 338 Woodlands Ave 1, #01-569) instead, which I refused to.

I am lodging this report to protect myself if any other party wishes to claim insurance from me as I am not sure if my worker was involved in a traffic accident. I also understand that if any other party wishes to claim insurance from my company, it will be between the insurance agencies to settle.

Signature Of Officer Recording The Report:

L / Sgt 2 MUHAMAD SYABIL BIN SALLEH

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
L / Woodlands Police Divisional Investigation Branch / ASP TAN TENG HONG, COLIN
Contact No.:

Signature Of Informant:

Date/Time:
23/11/2019 02:55

Classification Of Case:
L / Contact No.:

Authentication Stamp

Singapore Police Force



T.A.P. EXPRESS
CO. REG. NO.: 53363121A
15 YISHUN INDUSTRIAL STREET 1, WIN 5
#09-21, SINGAPORE 768091
PHONE: +65 6931 5392

EMAIL: enquiries@tapexpress.com.sg

25th November 2019

To Zairi,

RE: LETTER CONFIRMING TERMINATION

Dear Nor Zairi Bin Nor Zahid,

This letter confirms that you have been TERMINATE due to your misconduct behaviour in this company on 22nd November 2019. Your misconduct of behaviour and lateness is highly discouraged by the company and is expressly indicated as a misconduct under company policy.

We wish you all the best for your future.

Thank you.

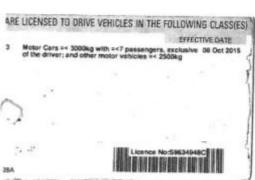
Sincerely,

Director of T.A.P. Express













Accident Photo









Accident Photo



