

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	11/03/2020 14:51
Date Of Accident	12/02/2020 14:30
Exact Location Of Accident	ALONG SENOKO AVE AT THE JUNCTION OF SENOKO WAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE1849L
Insured/Policyholder	
Name Of Registered Owner	SH FOODS LLP
Co Reg No	T12LL0537F
Email Address	SHFOODSLLP@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-67555511

Vehicle Particulars

Manufacturer	NISSAN
Model	CABSTAR 3.0 5M/T ABS 2DR 2WD EURO 5
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	DMCVSN3064531900
Cover Note Number	22/9/19-21/9/20

Driver

Name of Driver	GOH BOON TECK
NRIC No	S6920922Z
Date Of Birth	19/05/1969
Occupation	INDOOR
Date Of Driving Pass	05/11/2002
Driving Experience	17 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94502833
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 322 WOODLANDS ST 32 #06-187
Postcode	730322
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	COLLISION - CHANGE/CROSS LANE
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?	YES
If Yes, Please state which Police Station	
Police Station Name	WOODLANDS NPC
Police Station Address	ROAD: 3 WOODLANDS DRIVE 63 , POSTCODE: 737890 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO 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	UNKNOWN
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)

Sketch Plan

SKETCH PLAN

VEHICLE NO.: G8E 1849L
INSURER : CHINA TAIPING
DATE & TIME: 12/02/2020 2:30 PM

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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.

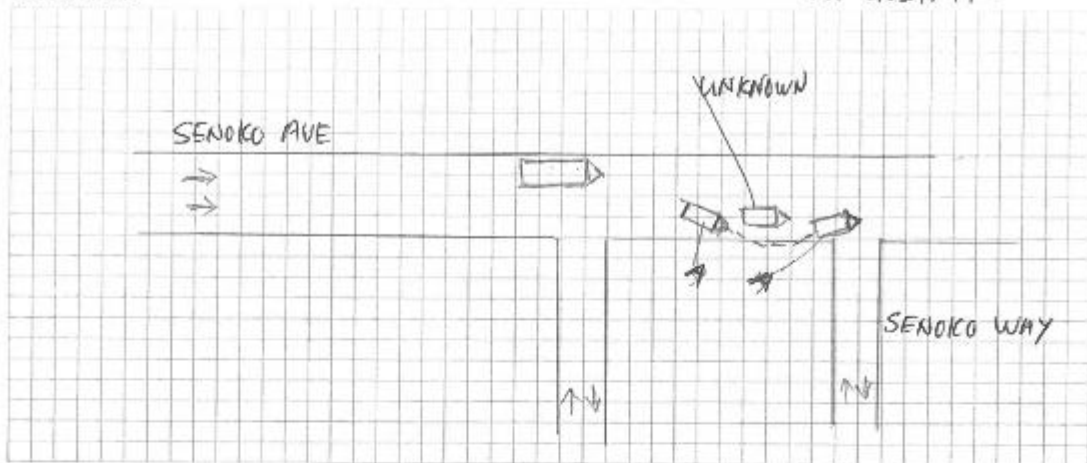
SH FOODS LLP
HARVEST@WOODLANDS
280 WOODLAND INDUSTRIAL
PARK #5-#5-7 S-757322
ROC: T1218532F TEL: 67555511

Driver's Signature
(If driver is not the policyholder)
Date & Time: 11/3/2020

Reporting Centre Personnel's Signature
Name: (WL)
NRIC/FIN No: 11/03/20

SKETCH PLAN

A: GBE1844 L



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ATTACHED TO POLICE REPORT

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

We declare the foregoing particulars are true in every respect.

SH FOODS LLP
HARVEST WOODLANDS
280 WOODLANDS INDUSTRIAL
PARK #55-005-76757322
ROC: T12440637 TEL#52555511

Driver's Signature
(If driver is not the policyholder)
Date & Time: 11/3/2020

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

GRIFFIN'S Motor Policies, V3

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

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20200310/2111

Police Station Of Origin:
Woodlands West N.P.C.
1 Woodlands Street 12 SINGAPORE 738622
Tel No: 1800-363 9999

1 of 3

Report No. T/20200310/2111

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/03/2020 16:40		Vide Report No.:		Station Diary No.: 145	
Name of Informant: GOH BOON TECK		Address: APT BLK 322 WOODLANDS STREET 32 #08-187 SINGAPORE 730322			
ID Type / ID No.: NRIC NO / S6920922Z		Contact No.: Home/Office: Mobile: 94502833			
Nationality: SINGAPORE CITIZEN		Email:			
Sex: Male	Age: 50	Date of Birth: 19/05/1969	Type of Informant: Driver		
Race: Chinese		Language:		Institution / School Name:	
Occupation: Lorry driver		Driving Licence Information: Class: 3 Date of Expiry:			

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 12/02/2020 12:30	Type of Location: T-Junction
Location: Junction of Road 1 and Road 2 SENOKO AVENUE SENOKO WAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved					
GBE1849L	Lorry			No Damage	0

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20200310/2111

Police Station Of Origin:
Woodlands West N.P.C.
1 Woodlands Street 12 SINGAPORE 738622
Tel No: 1800-363 9999

2 of 3

Report No. T/20200310/2111

CONTINUATION OF REPORT

Driver			
Name	GOH BOON TECK	ID No.	S6920922Z
Related Vehicle	NIL	Contact No.	94502833
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 12/02/20 at about 2.30pm along Senoko Ave at the junction of Senoko Way, for a delivery along Senoko Ave. I was driving on the left most lane on a two lane road. While driving, a lorry was parked at the side of the road, to unload some goods. In order to avoid the lorry, I filtered to the right most lane to over take the lorry. However, there was a van that was stationary. Hence, I have decided to over take the van by filtering out on its right side. While doing so, the Van suddenly made a right turn to Senoko Way after I overtook it. I did not suspect there was any damage or collision that has taken place during that time as there was no collision or honks from the opposing party. I checked my rear mirror, there was no damaged on each vehicle. I then decided to move off. That's all.



**SINGAPORE
POLICE FORCE**



T/20200310/2111

Police Station Of Origin:
Woodlands West N.P.C.
1 Woodlands Street 12 SINGAPORE 738622
Tel No: 1800-363 9999

3 of 3

Report No. T/20200310/2111

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

L /

Insp TAY MING WEI

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIA /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Signature Of Informant:

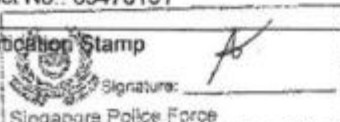
Date/Time:

10/03/2020 16:40

Classification Of Case:

Authentication Stamp

NP108



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S6920922Z



Name

GOH BOON TECK



Race

CHINESE

Date of Birth

19-05-1969

Sex

M

Country of Birth

SINGAPORE



Identification Card



2380408



NRIC No. S6920922Z



Blood Group Date of issue
A+ 13-09-1994

APT BLK 322 WOODLANDS STREET 32 #06-187
SINGAPORE 730322

NRIC No: S6920922Z Date: 25-07-2006 No: 543493

Driving License



Driving License

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

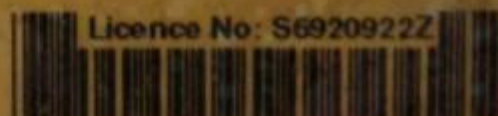
PASS DATE

Class 3

Motor Cars and Motor Tractors the weight of
which unladen does not exceed 2500 kilograms

05 Nov 2002

NP 428A



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

