#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

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 <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.

aloresalu.	
	ACCIDENT STATEMENT
Date Of Report	12/02/2020 18:31
Date Of Accident	08/02/2020 10:15
Exact Location Of Accident	ALONG TUAS ROAD ROUNDABOUT TOWARDS AYE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBK525X
Insured/Policyholder	
Name Of Registered Owner	REEFERTEC PTE LTD
Co Reg No	199501597C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-68620438
Vehicle Particulars	
Manufacturer	ISUZU
Model	TFR86JSR-2.5 D (M)
Exact Purpose for which vehicle was being used at time of accident	
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	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	
Cover Note Number	102496
Driver	
Name of Driver	OH CHONG GUAN, ROYDEN (HU CHANGYUAN)
NRIC No	S8608822C
Date Of Birth	16/03/1986
Occupation	OUTDOOR
Date Of Driving Pass	29/05/2009
Driving Experience	10 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96399870
Fax Number	
Contact Number	

**NOEMAIL** 

Address APT BLK 18D HOLLAND DRIVE

# 13-431 SINGAPORE

Postcode 275018

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 - ROUNDABOUT

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?

NO

NO

1

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

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 JURONG NPP

Police Station Address ROAD: 158 YUNG LOH ROAD #01-58, POSTCODE: 610158, COUNTRY:

SINGAPORE

NO

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

**Circumstances of Accident** 

REFER TO THE POLICE REPORT NO. J/20200210/2114.

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 SDJ2224H

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR
Name of Driver MISS BAY
NRIC/Passport Number S2506920Z
Contact Number 92763090

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Sketch Plan

#### SKETCH PLAN

#### IMPORTANT NOTICE

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- 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

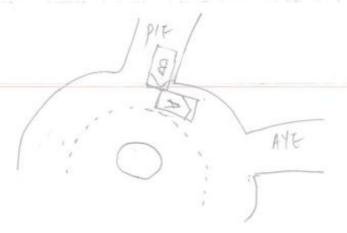
(ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time: Oriver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name:

NRIC/FIN No .:

#### Sketch Plan #2

SKETCH PLAN



A: GBK575X B: SDJ >224H

#### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO THE	POLICE REPORT NO. J/20200210/2114.	
- W		
ECLARATION		Contraction of

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.:





1 of 2

#### **POLICE REPORT (NP299)**

Police Station Of Origin Jurong NPP 158 Yung Loh Road #01-58 SINGAPORE 610158

Tel No: 1800-2659999

Report No. J/20200210/2114

Date/Time Report Made	Vide Report No.		Station Diary No.	
10/02/2020 20:25				58
Name Of Informant	Address			and the state of t
OH CHONG GUAN, ROYDEN	APT BL	APT BLK 18D HOLLAND DRIVE #13-431 SINGAPORE		
	275018			
ID Type / ID No.	Contact No.			
NRIC NO / S8608822C	Home/Office Mobile			
			96399870	
Nationality	Email Address			
SINGAPORE CITIZEN				
Occupation	Sex	Age	Date of Birth	Race
Operation Executive	Male	33	16/03/1986	Chinese
Institution/School Name	Language			
Date/Time Of Incident	Location Of Incident			
08/02/2020 10:15	TUAS ROAD SINGAPORE			
	Tuas Road Roundabout			

# Brief details.

On 08/02/2020 at about 1015hrs, I was driving my vehicle GBK525X along Tuas Road roundabout towards AYE. At the point of time, there was a vehicle SDJ2224H, Miss Bay, S2506920Z, HP: 92763090 entering to the roundabout from a slip road and I sounded my horn to prevent her from colliding onto my vehicle. Subsequently, she started to slow down however, she did not stop and it resulted collision between both of our vehicles. I alighted and made a checked on my vehicle and discovered my left rear bumper signal light came off. There were no traffic police or ambulance at scene. No one was injured. I

Signature Of Officer Recording The Report:	Signature Of Informant:
J / Sgt 1 LIM FANG JIE	
Signature Of Interpreter: Not applicable	Date/Time: 10/02/2020 20:25
Officer In-Charge Of Case: J / Jurong Police Divisional Investigation Branch / Sr Staff Sgt NOOR IZWAN BIN SALEH Contact No.: 67910000	Classification Of Case:
Authorities Olessa	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\

Authentication Stamp

SN 124

Signature:

Singapore Police Force





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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20200210/2114

am lodging this report for my company record and insurance claiming purposes.

Signature Of Officer Recording The Report:

J / Sgt 1 LIM FANG JIE

Signature Of Interpreter:
Not applicable

Date/Time:
10/02/2020 20:25

Classification Of Case:
J / Jurong Police Divisional Investigation Branch /
Sr Staff Sgt NOOR IZWAN BIN SALEH
Contact No.: 67910000

Signature:

Singarore Police Force



















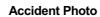




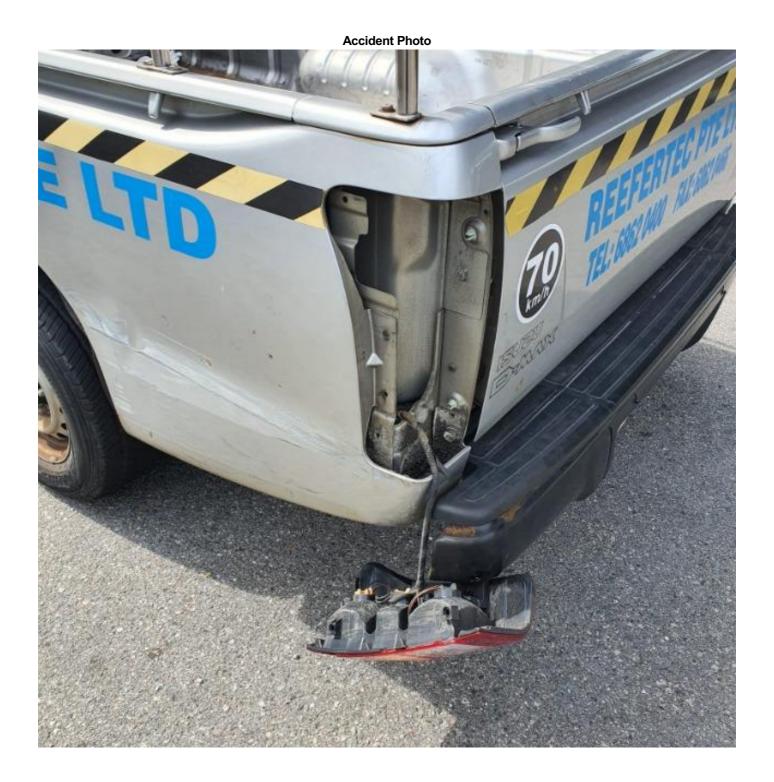


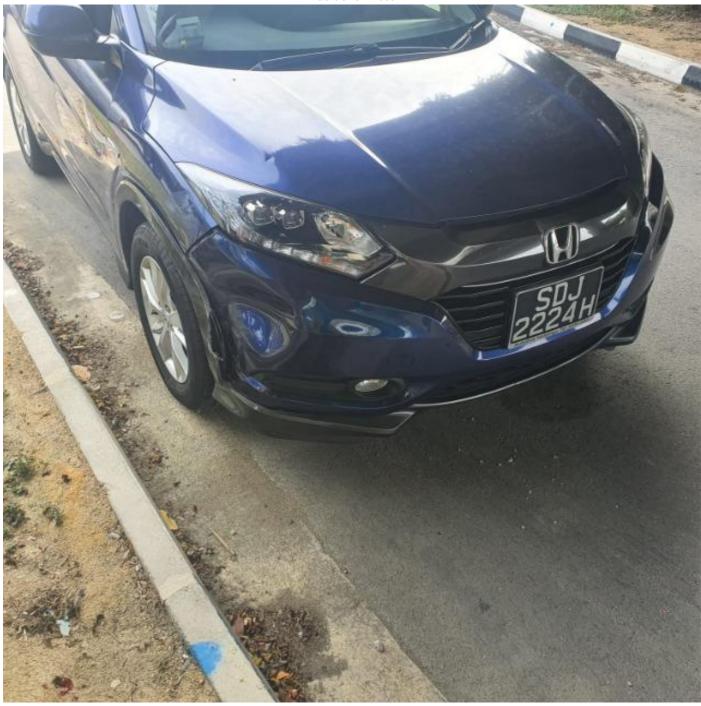


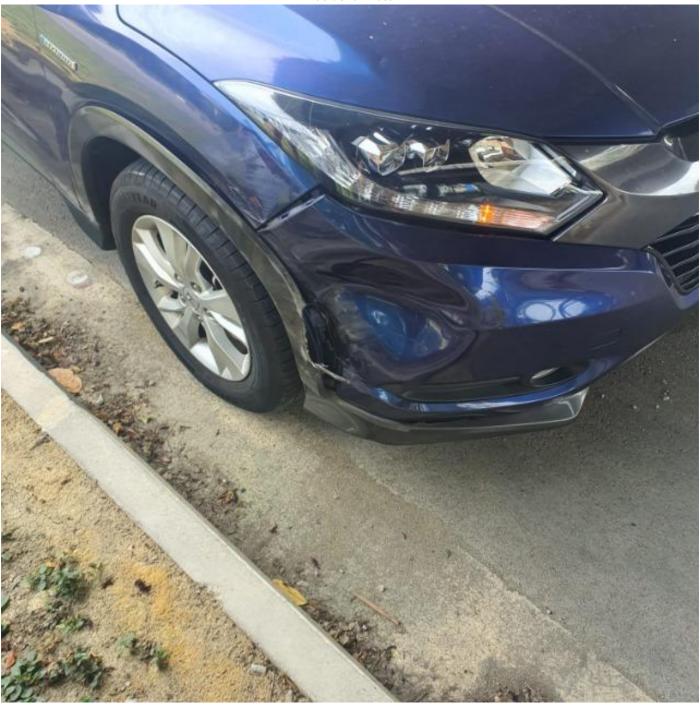












#### **Identification Card**







