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 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 aforesaid.	u hereby consent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	22/05/2020 12:01
Date Of Accident	21/05/2020 12:20
Exact Location Of Accident	NO, 6 ANG MO KIO INDUSTRIAL PARK 2
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GU4276B
Insured/Policyholder	
Name Of Registered Owner	BEESTON BARONS PTE LTD
Co Reg No	1XXXXX280R
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91180875
Alternative Phone No	OFFICE-91180875

Vehicle Particulars

NISSAN Manufacturer Model **CABSTAR**

Exact Purpose for which vehicle was being used at

time of accident

BUYING GOODS

Are you claiming under your own insurance policy

for repair to your vehicle?

REPORTING ONLY If No, Please state action to be taken Vehicle Category COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company UNITED OVERSEAS INSURANCE LTD

Type Of Coverage THIRD PARTY

Fleet Policy NO

Policy Number DHOM110138501405

Cover Note Number

Driver

Name of Driver LOW KONG LAU NRIC No SXXXX926B Date Of Birth 09/02/1965 Occupation **OUTDOOR Date Of Driving Pass** 31/05/2010

Driving Experience 9 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91180875

Fax Number

OTHERS-91180875 Contact Number

EMail Address NOEMAIL Address BLK 132 JALAN BUKIT MERAH

#07-1330

Postcode 160132

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 Registration Number of Driver's Own

-

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO YES

NO

2

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

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 TIONG BAHRU NEIGHBOURHOOD POLICE POST

Police Station Address ROAD: BLK 128 KIM TIAN ROAD #01-123/ 125 , POSTCODE: 160128 ,

COUNTRY: SINGAPORE

Police Station Contact **TEL NO**: 1800-2739999 - **FAX NO**: 62785651

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20200521/2035

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? YES
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBA2868X

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Page 2 of 27

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

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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)

Lunderstand, 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)
 - (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
- 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.

BEESTON PAROL

Policyholder's Signature Date & Time:

Driver's Signature

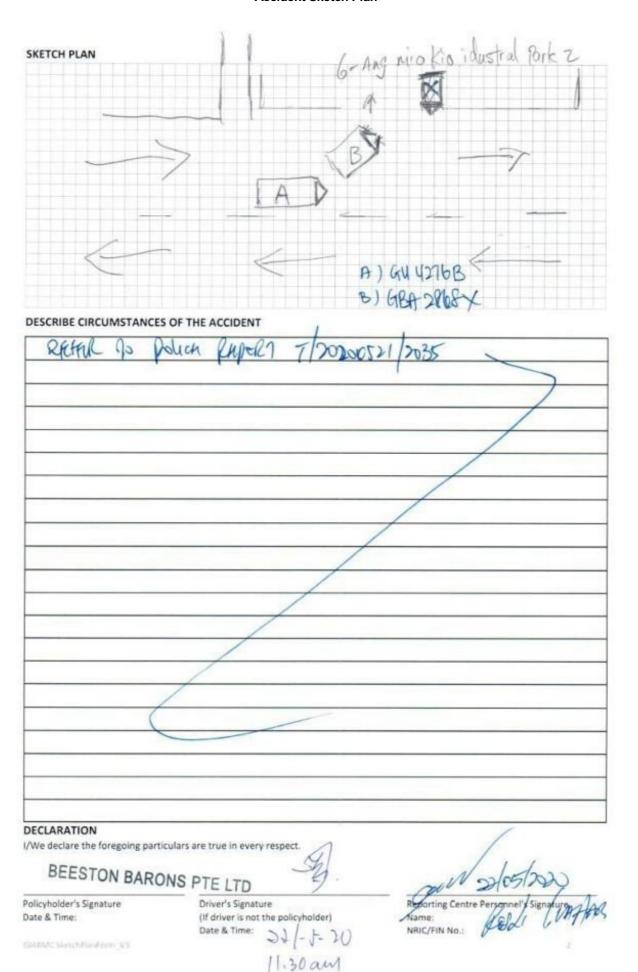
Date & Time

(If driver is not the policyholder)

Recorting Centre P

NRIC/FIN No.:

Accident Sketch Plan



Police Report





Police Station Of Origin:

Tiong Bahru NPP 128 Kim Tian Road #01-123 SINGAPORE

160128

Tel No: 1800-2739999

1 of 3 Report No. T/20200521/2035

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/05/2020 16:08		fade:	Vide Report No.:	Station Diary No.: 19		
Informa	nt's Partic	ulars		THE RESERVE TO SHARE THE PARTY OF THE PARTY		
	Informant: ONG LAU		Address: APT BLK 132 JALAN BUKIT MERAH #07-1330 SINGAPORE 160132			
ID Type / ID No.: NRIC NO / S2617926B			Contact No.: Home/Office:			
Nationality: MALAYSIAN			Email:			
Sex: Male	Age: 55	Date of Birth: 09/02/1965	Type of Informant: Driver			
Race: Chinese			Language: English	Institution / School Name:		
Occupation: Building and construction project manager		uction project	Driving Licence Information: Class: 3	Date of Expiry:		

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 21/05/2020 12:20	Type of Location Straight Road	
ANG MO KIO	No. 6	2 Road Surface:		Road Speed Limit:	
Clear		Dry			
Traffic Flow: One Way		Traffic Control:		Traffic Volume: Light	
		Not Controlled		Light	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenge
GBA2868X	Van			Grey	Slightly Damaged	1
GU4276B	Lorry			Silver	Slightly Damaged	0

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

Police Report



T/20200521/2035

Police Station Of Origin: Tiong Bahru NPP 128 Kim Tian Road #01-123 SINGAPORE

Report No. T/20200521/2035

2 of 3

160128

Tel No: 1800-2739999

CONTINUATION OF REPORT

Driver	The same of the sa		I man the state of			
Name	LOW KONG LAU			ID No		S2617926B
Related Vehicle	GU4276B (Lorry)			Conta	ct No.	91180875
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: 3 Date of Expiry: NIL	
Date Treatment	NIL		Date Disc	charge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o	fInjury	Injury NIL	

Brief Details.

On 21/05/2020 at about 1220hrs, I was driving straight my company lorry along Ang Mo Kio Industrial Park 2 and at that time. I was behind the mentioned vehicle (GBA 2868X) when suddenly, the said vehicle then jammed brake and wanted to turned into No. 6 Ang Mo Kio Industrial Park 2, Upon the brake, I immediately swerved my vehicle towards the right and but my vehicle was not able to avoid the vehicle infront of me fully, resulting the front left side of my vehicle to knock into the right rear side of the other vehicle.

This collision caused the left front part of my vehicle to have dents and damages. Whereas for the other party's vehicle, the rear right mirror glass has been shattered and there were dents and damages on the right rear side of his vehicle as well. I then got out of my vehicle and wanted to exchange ID from the other party and the male chinese driver who was accompanied by another male Chinese, informed me that he did not have any physical particulars with him. He then immediately called for another man who was believed to be their mechanic (98229288 Ah Beng) then told the driver to hurry off and continue with their deliverying duties while he stayput to settle it with me.

I then felt confused and asked the reason he told them to go off first and was informed by him that the vehicle belongs to him.

I also wish to state that there is a witness (Indian National) who was also at the scene but I had forgotten to take down his particulars. Nobody was injured in this accident. That is all.

Police Report





Police Station Of Origin: Tiong Bahru NPP 128 Kim Tian Road #01-123 SINGAPORE 160128 Tel No: 1800-2739999

3 of 3 Report No. T/20200521/2035

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 Record A / Sgt 2 MARCUS LIM JIA CH	VALUE OF COSTS OF COS	Signature Of Informant:			
Signature Of Interpreter: Not applicable Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151		Date/Time: 21/05/2020 16:08 Classification Of Case:			
					Authentication Stamp NP168
	Singapo	Signature Pre Police Force			



































