

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	25/06/2020 11:04
Date Of Accident	25/06/2020 07:35
Exact Location Of Accident	ALONG TUAS WEST ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBJ6651E
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Insured/Policyholder

Name Of Registered Owner	METRACO REFRIGERATION ENGINEERING PTE. LTD
Co Reg No	200303077D
Email Address	METRACO@SINGNET.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62619076

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA 1.5T-3.0 (M)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSE
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
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	DMCVSN1927871900
Cover Note Number	

Driver

Name of Driver	TAN CHEN KUANG
NRIC No	S8084504I
Date Of Birth	17/06/1980
Occupation	OUTDOOR
Date Of Driving Pass	22/09/2004
Driving Experience	15 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90090566
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	55 TUAS VIEW LOOP
Postcode	637704
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 - CROSS JUNCTION
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
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	10 UBI AVENUE 3
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , 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 THE CIRCUMSTANCES.

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	SHB5344U
Vehicle Make/Model/Colour	TOYOTA / PRIUS HYBRID 1.8 CVT
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	OMAR BIN ABU
NRIC/Passport Number	S1369332C
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)


SKETCH PLAN

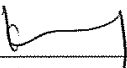
IMPORTANT NOTICE

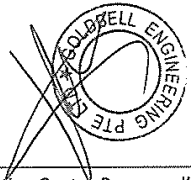
1. Please report correctly the details of the accident to speed up the claims process.
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6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
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: ENV6 Kwok Long
NRIC/FIN No.: 6238 1879K

SKETCH PLAN

Refer to the Attachment

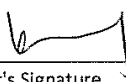

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to the attachment.

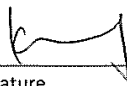
DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time:

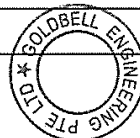



Driver's Signature
(If driver is not the policyholder)
Date & Time:



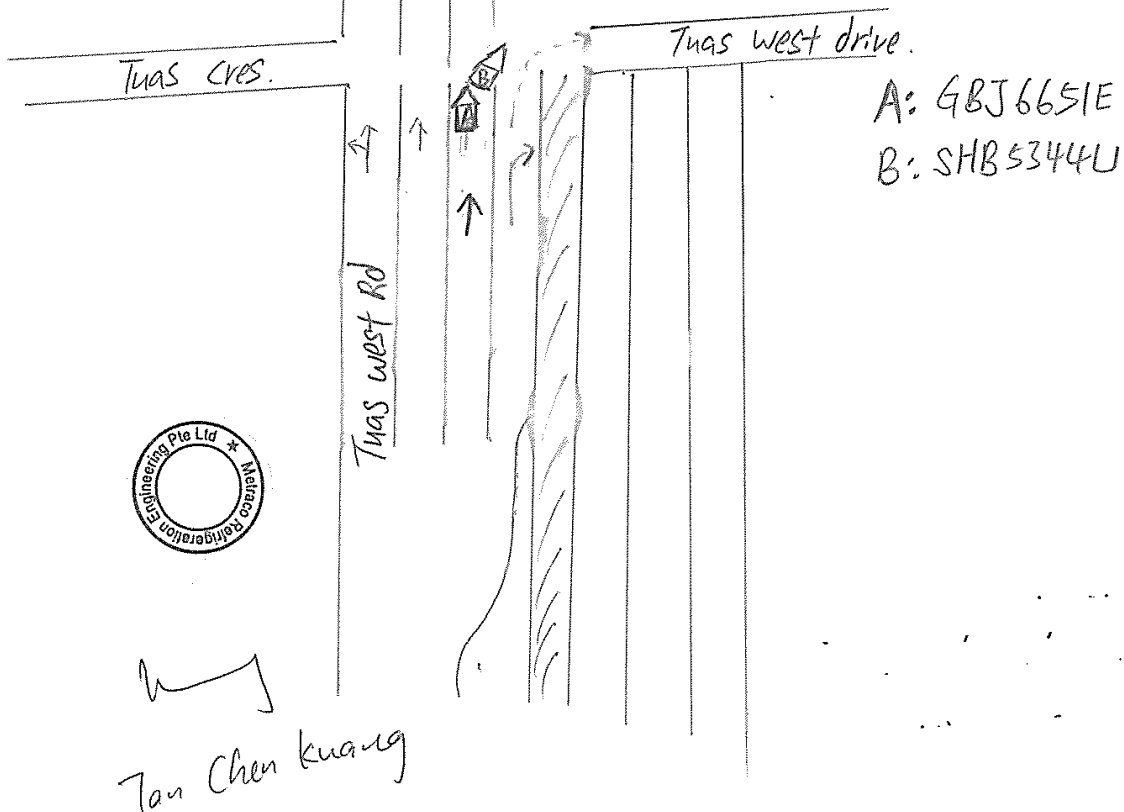
Reporting Centre Personnel's Signature
Name: ENG KWOK LONG
NRIC/FIN No.: G238 1879K







This accident happened on 25/06/2020 morning 7.35am at the Tuas West Road.
I was driving my lorry GBJ6651E in the 2nd lane and the lane is straight lane towards to Tuas South area.
When the traffic turned into green; I started my vehicle, Taxi driver Omar Bin Abu (S1369332C) in front of me suddenly stop without signal and he wanted turning to the right side lane which is straight lane unable turns to right. His suddenly stop damaged my vehicle.





中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

MC300/CN SN
AN0633A
Cov.Type: C
AUTOSAFE

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.	DMCVSN1927871900	Engine No :1KD2860132 Chassis No:JTFAT35Y10K213689
1. Index Mark and Registration Number of Vehicle	GBJ6651E	
2. Name of Policy Holder	M/S METRACO REFRIGERATION ENGINEERING PTE LTD	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	5 JULY 2019	EXCESS SECT IS\$350.00 EX ON WINDSCREENS\$100.00
4. Date of Expiry of Insurance	4 JULY 2020	
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.	
HIRE PURCHASE CO. : UNITED OVERSEAS BANK LIMITED AS HP OWNER <i>* 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>		

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:

Authorised Officer

Authorised Signatory

Identification Card Pg. 1

REPUBLIC OF SINGAPORE DRIVING LICENCE

001562939E

Name: TAN CHEN KUANG

Birth Date: 17 Jun 1980

Issue Date: 17 Jan 2008

001562939E

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S8084504I

Name: TAN CHEN KUANG

陈志光

Race: CHINESE

Date of birth: 17-06-1980

Sex: M

Country/Place of birth: MALAYSIA

5342458

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

PASS DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg 22 Sep 2004

Licence No: S8084504I

5342458

NRIC No. S8084504I

Date of issue: 20-08-2014

APT BLK 710 JURONG WEST STREET 71 #11-20
SINGAPORE 640710

NRIC No: S8084504I

Date: 24/12/2017



FEEDBACK ON ROAD USERS

Traffic Police
Singapore Police Force
10 Ubi Avenue 3
Singapore 408865
Tel No: 6547 0000
Fax : 6547 4749

Date/Time Report Made
30/6/2020 11:14 am



Submission Number: 20200630-0023
Public Violation Report No.: APV/20/10112

Informant Name TAN CHEN KUANG	Email Chenkuang617@gmail.com
ID Type / ID No. S8084504I	Contact No. 90090566
Date / Time Of Violation 25/6/2020 7:30 am	Location Of Violation TUAS WEST ROAD
Video URL	

Description of Incident

The said taxi was travelling along the Tuas West Road. The taxi was travelling along the second lane. Coming to the junction, the said taxi make a right turn which is not suppose and not allow to do so. The said lane was meant to go straight and the said taxi brake which resulting to an accident.

Vehicle Involved			
S/N	Vehicle No	Colour	Make
1	SHB5344U	Maroon	Toyota

Independent Eyewitness				
S/N	Name	ID No	Contact No	Email
NO DATA FOUND.				

Items submitted or uploaded	
S/N	File Name
1	IMG_20200630_111101.jpg
2	IMG_20200630_111114.jpg

Signature Of Informant:

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

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Identification Card



Accident Photo



Accident Photo



Accident Photo



Accident Photo



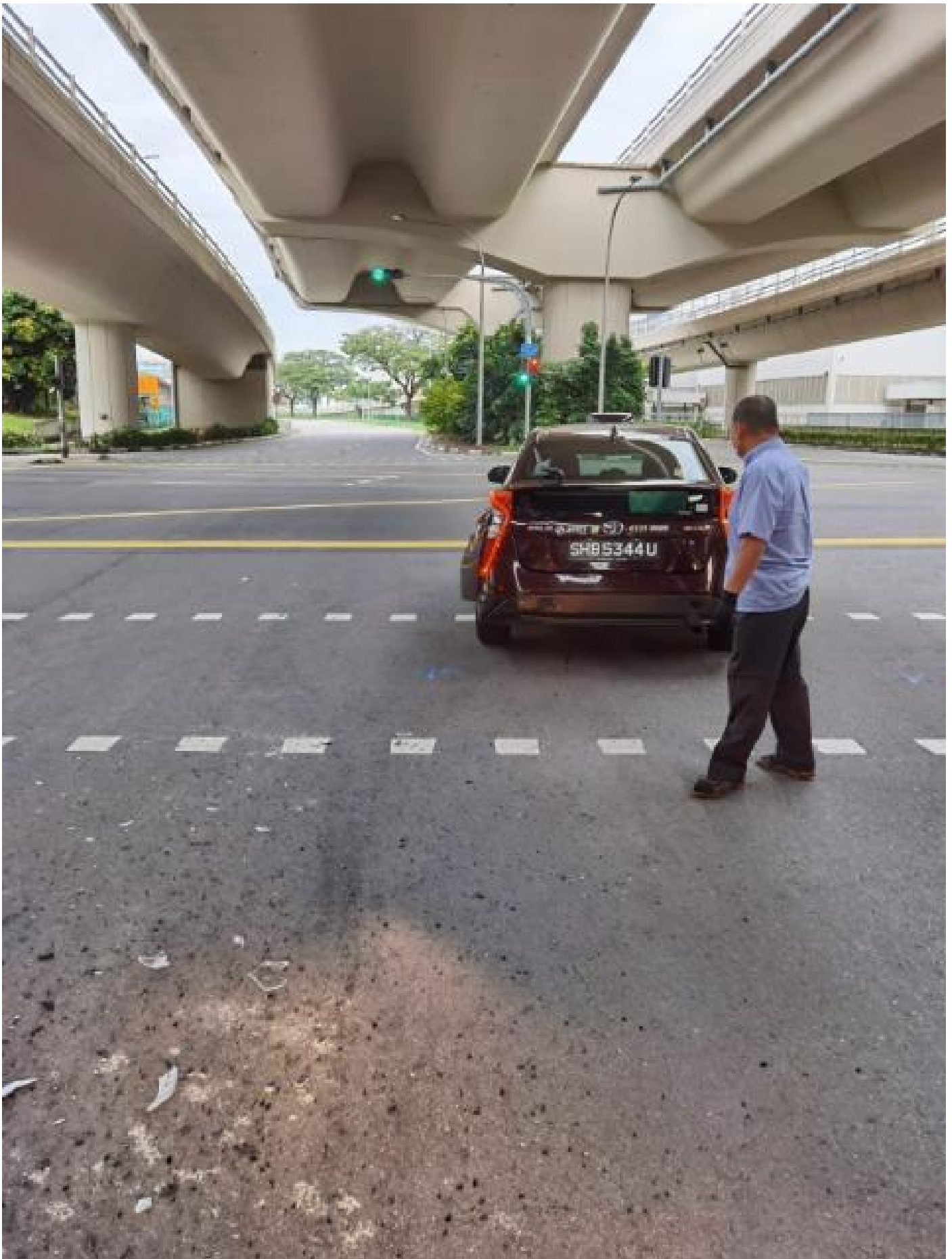
Accident Photo



Accident Photo



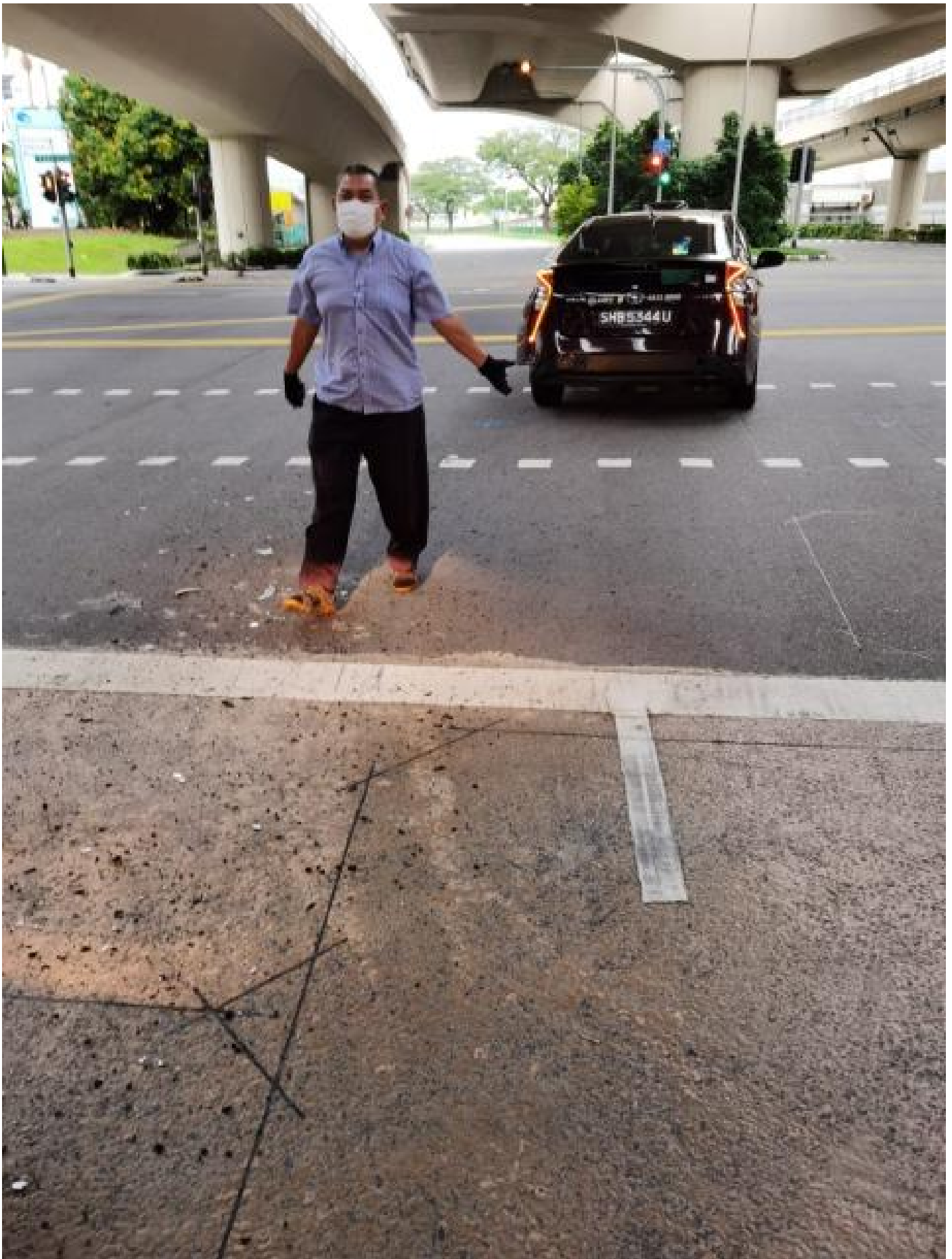
Accident Photo



Accident Photo



Accident Photo



Addendum Sheet Pg. 1



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 - 17:00
UEN: S66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

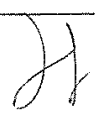
(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MGE120054296 Vehicle Registration No: GBJ6651E
Name (as shown in NRIC) : METRA CO Refrigeration Engg Pte Ltd NRIC/FIN/Passport No : _____
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore ()
Contact (Tel) : _____ Mobile No. : _____
Email Address : _____
Date of Accident : 25/06/20 Time of Accident : 0735 hr.
Place of Accident : Along Tuas West Road
Insurance Company : China Taiping.

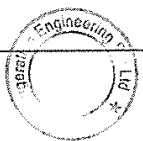
(B) ADDITIONAL INFORMATION / AMENDMENTS:


I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Amend Third party claims to OD claims.



Policyholder / Driver's Signature
Date:





Reporting Centre Personnel's Signature
Name: ENG Kwik Loo G.
NRIC/FIN No.: 62381879K
Date: 03/7/2020



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: SG65500206 / GST Reg. No.: M400017735

ADDENDUM

Original Report No : MGF120054296 Vehicle Registration No: GBJ6651E
 Name(as shown in NRIC) : METRA CO Refrigeration Eng Pte Ltd NRIC/FIN/Passport No : _____
 (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate

Address : _____ Singapore()

Contact (Tel) : _____ Mobile No. : _____

Email Address : _____

Date of Accident : 25/06/20 Time of Accident : 0735 hrs.

Place of Accident : Along Trans West Road

Insurance Company: China Taiping.

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Amend Third Party claims to OP claims.

Re-attach Police Report.


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[illegible]

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[illegible][illegible]

[Redundant/Unnecessary Characters](#)



Date: 03/7/2020