



## 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	18/07/2020 15:37
Date Of Accident	17/07/2020 14:00
Exact Location Of Accident	PIE TOWARDS TUAS BEFORE CTE ANG MO KIO
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GX6A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TOMY ELECTRICAL
Co Reg No	3XXXX000L
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90255020
Alternative Phone No	OFFICE-90255020
<b>Vehicle Particulars</b>	
Manufacturer	MERCEDES-BENZ
Model	VITO 114
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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
<b>Insurance Company</b>	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN1823881901
Cover Note Number	
<b>Driver</b>	
Name of Driver	CHAN SOI SAN
NRIC No	SXXXX865H
Date Of Birth	19/12/1958
Occupation	OUTDOOR
Date Of Driving Pass	08/02/1982
Driving Experience	38 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90255020
Fax Number	
Contact Number	OTHERS-90255020
Email Address	NOEMAIL



Address	BLK 604B TAMPINES AVENUE 9 #12-874
Postcode	522604
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	CHAIN 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	3
Was any body injured in the Accident?	YES
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)	2
Passenger 1	NAME: : SIVASUBRAMANIAM MAHENDRAN GENDER: : MALE

#### Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

#### 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	SGP29B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

## 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)

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.

### TOMY ELECTRICAL

Blk 201D Tampines St 21  
#03-1143 Singapore 524201  
HP: 9025 5020 Fax: 6782 1700  
Email: tomychan@singnet.com.sg

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

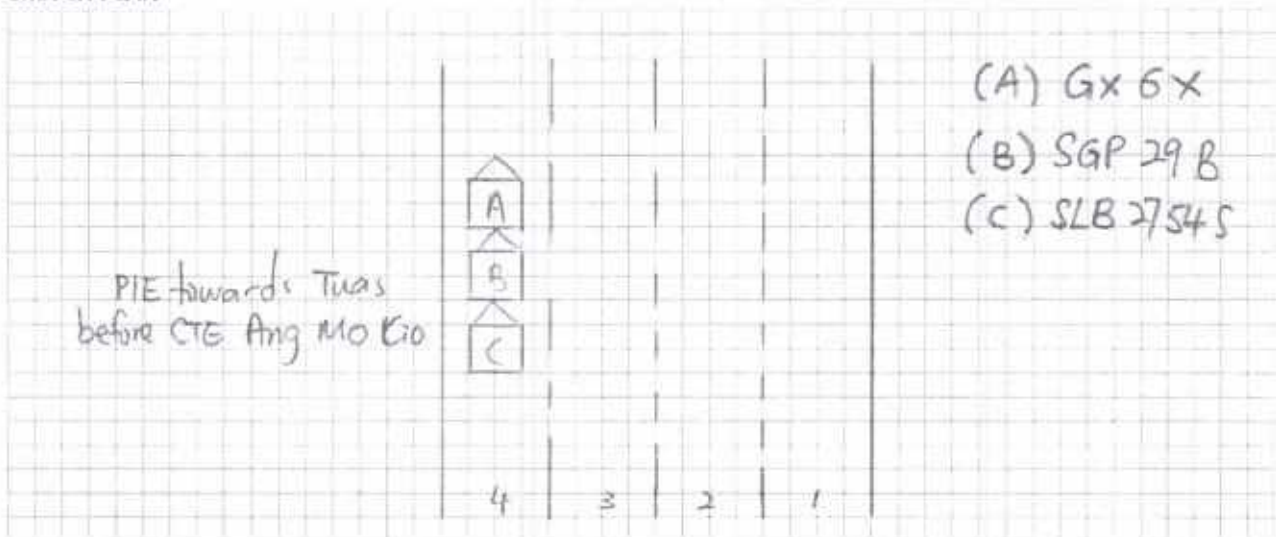
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 17/07/2020 at around 1400hrs. I was driving along PIE towards Tuas before CTE Ang Mo Kio At lane 4. Vehicle in front stopped & I follow suit. All of sudden, I felt an impact from behind. I alighted & realized that vehicle B (SGP 29 B) hit onto my rear. Tofo 3 vehicle was involved chain collision.

**TOMY ELECTRICAL**  
 Blk 201D Tampines St 21  
 #03-1143 Singapore 524201  
 HP: 9025 5020 Fax: 6782 1700  
 Email: tommychan@singnet.com.sg

## DECLARATION

I hereby declare that the particulars are true in every respect.

**TOMY ELECTRICAL**  
 Blk 201D Tampines St 21  
 #03-1143 Singapore 524201  
 HP: 9025 5020 Fax: 6782 1700  
 Email: tommychan@singnet.com.sg

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.:



# SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 17/07/2020	TIME: 1400 hrs	(hh:mm) 24 hrs Format
LOCATION: PIE towards Tuas before CTE Ang Mo Kio		
VEHICLE NUMBER: Gx 6A		
INSURED NAME: Tony Electrical		
NRIC / FIN: 37727000L	CONTACT: 9025 5020	
MAKE: Mercedes Benz	MODEL: Vito 114	
Are you claiming under your own insurance policy for repair to your vehicle?		
( ) Yes, If No, Pls Select: ( / ) Third Party ( ) Reporting Only		
INSURANCE COMPANY: China Taping		
TYPE OF POLICY: ( / ) COMPREHENSIVE ( ) THIRD PARTY ( ) TPFT		
POLICY NUMBER: DUCVEN 123 221901		
NAME DRIVER: Chan Soi San ( ) SAME AS INSURED		
NRIC / FIN: S2538865H	CONTACT: 9025 5020	
DATE OF BIRTH: 19/12/1958		
DRIVING PASS DATE: 02/02/1982		
OCCUPATION: ( ) INDOOR ( / ) OUTDOOR		
GENDER: ( / ) MALE ( ) FEMALE		
EMAIL ADDRESS: ( / ) NO EMAIL		
ADDRESS OF DRIVER: Blk 604 B Tampines Ave 9 #12-874 S(522604)		
Number Of Passenger Include Driver: 2		
(1) Sivasubramanian Mahendran G.8336924 Male		
(2) Chan Soi San Male		
Was driver an employee of the Insured's Company? ( / ) YES ( ) NO		
If No, Relationship Of The Driver With The Insured		
( ) Owner ( ) Spouse ( ) Friend ( ) Relative ( ) Children ( ) Sibling ( ) Others		
Does The Driver Own Any Other Vehicle? ( ) YES ( / ) NO		
If Yes, Vehicle Registration Number Of Driver's Own Vehicle:		
Insurance Company Of Driver's Own Vehicle		
Weather Conditions: ( / ) Clear ( ) Raining ( ) Drizzling ( ) Others		
Road Surface: ( / ) Dry ( ) Wet ( ) Others		
Was Any Foreign Vehicle Involved In This Accident? ( ) YES ( / ) NO		
Was Anybody Injured In The Accident? ( / ) YES ( ) NO		
If YES, Injured details:		
(1) Chan Soi San		
(2) Sivasubramanian Mahendran		
Convey By Ambulance: ( ) YES ( / ) NO		
Was There Any Video Capture By Car Camera? ( ) YES ( / ) NO		
Was There Accident Reported To The Police? ( ) YES ( / ) NO If Yes Attach Police Report		
Police Report Number (if any)		
Details Of 3rd Party	Name / NRIC	No. of Paxs (incl' driver) Contact
Veh B	SGP 29 B	( ) / Not Sure ( )
Veh C	SLB 2754 S	( ) / Not Sure ( )
Veh D		( ) / Not Sure ( )
Veh E		( ) / Not Sure ( )
Veh F		( ) / Not Sure ( )
Veh G		( ) / Not Sure ( )



中国太平  
CHINA TAIPING

中国太平保险(新加坡)有限公司  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.  
Co. Reg. No. 200208364E

M2300/C  
R 5N  
AN0381A  
Cov. Type: C

MOTOR COMMERCIAL VEHICLE

**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, 1952 (Malaysia)

ORIGINAL

CERTIFICATE No.

DMCVSN1823881901

Engine No : 65195034068376

ChNo: WDF44760323300143

1. Index Mark and Registration  
Number of Vehicle

GXEA

AUTOSAFE

2. Name of Policy Holder

M/S TONY ELECTRICAL

3. Effective date of the Commencement of  
insurance for the purposes of the Regulations,  
Ordinance or Enactment

04 August 2019

Excess Sect I ..... S\$500.00

EX ON WINDSCREEN ..... S\$100.00

4. Date of Expiry of Insurance

03 August 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. : DAIMLER FINANCIAL SVCS AFRICA & ASIA PACIFIC

\* 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/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.

Issued By: CHUA SUAT LAY SALLY  
Authorised Officer

Authorised Signatory

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Business
Owner ID:	000L
<b>Vehicle Details</b>	
Vehicle No.:	GX6A
Vehicle to be Exported:	Yes
Intended Deregistration Date:	18 Jul 2020
Vehicle Make:	MERCEDES BENZ
Vehicle Model:	VITO 114 CDI PANEL VAN LONG AT ABS 5DR
Primary Colour:	Silver
Manufacturing Year:	2017
Engine No.:	65195034068376
Chassis No.:	WDF44760323300143
Maximum Power Output:	-
Open Market Value:	\$37,761.00
Original Registration Date:	04 Aug 2017
First Registration Date:	04 Aug 2017
Transfer Count:	0
Actual ARF Paid:	\$1,889.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	03 Aug 2027
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$27,574.00
COE Rebate Amount:	\$19,420.00
<b>Total Rebate Amount:</b>	<b>\$19,420.00</b>

The information contained herein is correct as at 18 Jul 2020

OK