

## 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	17/08/2020 16:11
Date Of Accident	17/08/2020 12:35
Exact Location Of Accident	FROM FERNVALE ROAD TOWARD TO BLK 409C ENTRANCE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBA7941J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CKS GAS INSTALLATION SERVICES
Co Reg No	5XXXX586A
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-NOPHONE

### Vehicle Particulars

Manufacturer	NISSAN
Model	URVAN
Exact Purpose for which vehicle was being used at time of accident	FOR WORKING
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	ERGO INSURANCE PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMCG20007030
Cover Note Number	

### Driver

Name of Driver	CHAN KOK SIONG (CHEN GUO XIANG)
NRIC No	SXXXX210J
Date Of Birth	19/02/1977
Occupation	OUTDOOR
Date Of Driving Pass	30/10/2006
Driving Experience	13 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93886095
Fax Number	
Contact Number	OTHERS-93886095
Email Address	NOEMAIL

Address	BLK 731 JURONG WEST STREET 72 #04-17
Postcode	640731
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 - 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	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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

ON 17/08/2020@ABOUT 12.35PM AS I WAS DRIVING FROM FERNVALE ROAD TOWARD TO BLOCK 409C BEFORE ENTRANCE, THERE IS A JAM FROM THE ENTRANCE SO I WAS STOPPING AT THERE WHILE WAITING FOR THE LONG QUEUE, SUDDENLY THE VEHICLE B (SMM8358T) KNOCK TO MY CAR BEHIND. THE DRIVER APOLOGISE TO ME AND AGREE WITH PROCEED INSURANCE CLAIMS.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	THE DRIVER KEEP THE VIDEO FOOTAGE
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMM8358T
Vehicle Make/Model/Colour	KIA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHAN BENG LOONG, MICHAEL
NRIC/Passport Number	SXXXX101B
Contact Number	96323524
Address	BLK 410B FERNVALE ROAD #15-108
Postcode	792410
Insurance Company Name	

Nature Of Damage  
No. Of Passenger (Including Driver)

**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.

I AM AWARED THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.



Policyholder's Signature

Date & Time: 17/8/2020

Driver's Signature

(If driver is not the policyholder)

Date & Time: 17/8/2020

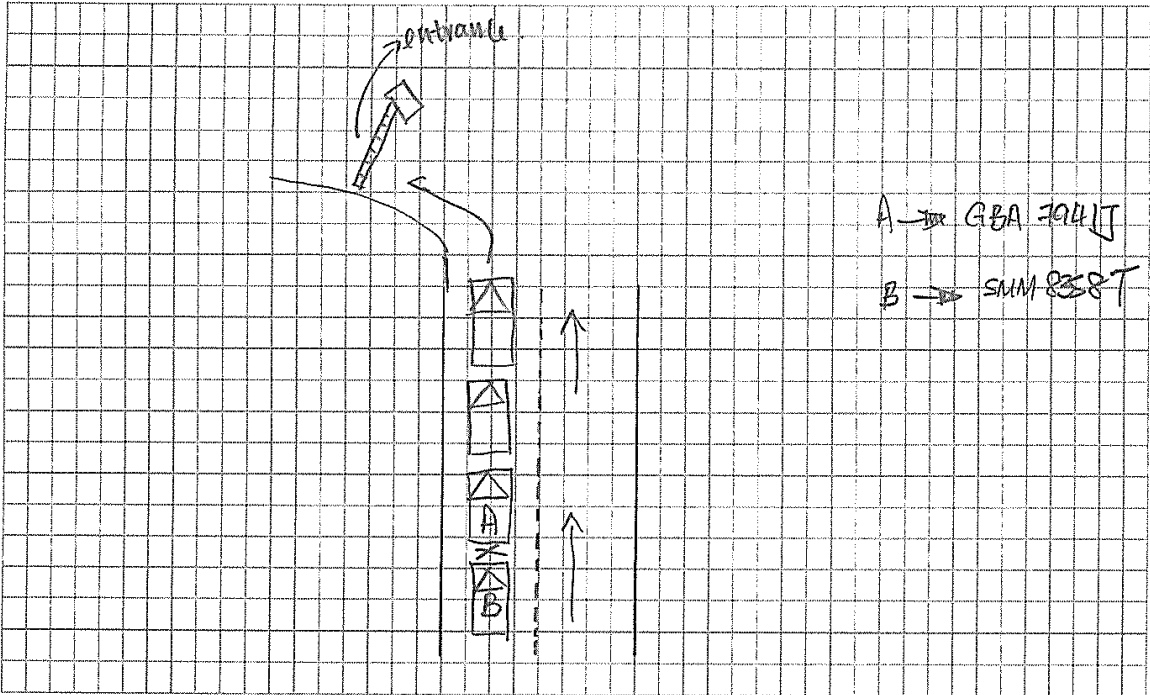
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.: 17/8/2020

# Sketch Plan Pg. 2

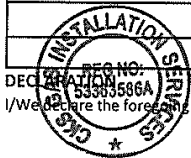
## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on 17/08/2020 @ abt 12.35pm. before

As I was driving from Lembeh Road toward to Blk 109C advance, there is a Jam from the entrance so I was stopping at there while waiting for the long queue, suddenly the vehicle 'B' (SAM 838T) knock to my car behind. The driver apologise to me and agree with proceed Insurance claims.



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

Policyholder's Signature

Date & Time: 17/8/2020

GIARMC SketchPlanForm\_V3

Driver's Signature

(If driver is not the policyholder)

Date & Time: 17/8/2020

2

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.: 17/8/2020

- ☐ Claim own policy
- ☐ Claim third party
- ☒ Claim OD / TP at other workshop NO MENTION
- ☐ For record purpose

Policy No. \_\_\_\_\_

Insurer \_\_\_\_\_ Veh.No. \_\_\_\_\_

**ERGO****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)  
 ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)

Certificate/Policy Number : DMCG20007030  
 Vehicle Registration Number : GBA7941J  
 Cover Type : Third Party Fire & Theft  
 Policy Type : Commercial Vehicle (Pte Use)  
 Name of Policyholder/Insured : CKS GAS INSTALLATION SERVICES  
 Commencement Date of Insurance : 15/07/2020  
 Expiry Date of Insurance : 14/07/2021  
 Excess :



Finance Company/Hire Purchase Owner : LAKE VIEW CREDIT PTE LTD

\*Persons or Classes of Persons entitled to drive:

1. The Policyholder
2. Any Person who is driving on the Policyholder's order or 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

\* Limitations as to Use:

- 1) Use in connection with the Policyholder's business
- 2) Use for carriage of passengers (other than for hire or reward) in connection with the Policyholder's business
- 3) Use for social domestic and pleasure purposes

This Policy does not cover :

- 1) Use for hire or reward, racing, pace-making, reliability trial or speed-testing
- 2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle

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 (\*).

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), the Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia), Part IV of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019 (Malaysia).

For and on behalf of ERGO Insurance Pte. Ltd.  
 Approved Insurer

Authorized Signature



A100023	WIFI INSURANCE AGENCY AND SERVICES	Contact Number: 65261287
Vehicle Chassis Number : JN1MG4E25Z0780298, Vehicle Engine Number : ZD30150677K		CP1, 15/06/2020 17:02

# Driving License And Insurance Cert Pg. 2

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7705210J**

Name: **CHAN KOK SIONG (CHEN GUOXIANG)**

Birth Date: **19 Feb 1977**

Issue Date: **06 Jan 2010**

001818494K



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S7705210J**

Name: **CHAN KOK SIONG (CHEN GUOXIANG)**

陈国祥


Race: **CHINESE**

Date of birth: **19-02-1977**

Sex: **M**

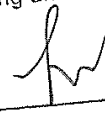
Country of birth: **SINGAPORE**

S7705210J



I consent to provide copy of my Identification Card & Driving License for insurance reporting and related claim purposes.

Signature of Driver



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

Class	Description	Pass Date
Class 2B	Motorcycles =< 200 cc	17 Jul 2006
Class 3	Motor Cars =< 3000kg with =< 7 passengers, exclusive of the driver, and other motor vehicles =< 2500kg	23 Dec 1999
Class 4	Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg	30 Oct 2006
Class 5	Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg	22 Feb 2007
	Motor vehicles not constructed to carry any load and the unladen weight > 7250kg	

Licence No: **S7705210J**



NP 428A

4007767

HRIC No. **S7705210J**

Date of issue: **27-02-2007**

Address: **APT. BLK 731 JURONG WEST STREET 72 #04-17 SINGAPORE 640731**

Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo





CHASSIS NO: JN1MG4E25Z0780298  
U.L.W : 1760 KGS ✓  
M.L.W : 3200 KGS  
P. CAP : F: 1 DRIVER, 2 OTHER  
R: 00  
TYRE SIZE : F: 195xR15 8PLY  
R: 195xR15 8PLY(S)

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: 56650020G / 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:

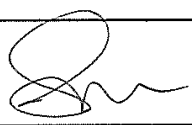
Original Report No : MSA120069912 Vehicle Registration No: GSA7944J  
Name (as shown in NRIC) : CKS Gas Installation Services NRIC/FIN/Passport No : \_\_\_\_\_  
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address : \_\_\_\_\_ Singapore ( )  
Contact (Tel) : \_\_\_\_\_ Mobile No. : \_\_\_\_\_  
Email Address : \_\_\_\_\_  
Date of Accident : 17/08/2020 Time of Accident : 1235Hrs  
Place of Accident : From Fernvale Road toward to BIC HQ Entrance  
Insurance Company : Ergo Insurance

(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:

Typo - Error Insured vehicle number plate  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Policyholder / Driver's Signature  
Date:

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