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 <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

aforesaid.		
	ACCIDENT STATEMENT	
Date Of Report	29/08/2020 11:03	
Date Of Accident	29/08/2020 09:00	
Exact Location Of Accident	ALONG PIE TWRDS TUAS NEAR LAMP POST 946	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	XE4320P	
Insured/Policyholder		
Name Of Registered Owner	KOK TONG TRANSPORT & ENGINEERING WORKS PTE LTD	
Co Reg No	199904117E	
Email Address	KINHOE.NG@KTCGROUP.COM.SG	
Mobile Phone No		
Alternative Phone No	OFFICE-96155910	
Vehicle Particulars		
Manufacturer	MERCEDES-BENZ	
Model	AROCS 3336K 6X4 3300 S-CAB AUTO ABS	
Exact Purpose for which vehicle was being used at time of accident	t e e e e e e e e e e e e e e e e e e e	
Are you claiming under your own insurance policy for repair to your vehicle?	NO	
If No, Please state action to be taken	REPORTING ONLY	
Vehicle Category	MOBILE EQUIPMENT	
Insurance Company		
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	
Type Of Coverage	COMPREHENSIVE	
Fleet Policy	NO	
Policy Number	DMCVSNA00061702002	
Cover Note Number		

Driver

Name of Driver PEH YONG CHUAN

NRIC No S1360296D

Date Of Birth 29/10/1959

Occupation OUTDOOR

Date Of Driving Pass 04/10/1986

Driving Experience 33 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-87199249

Fax Number
Contact Number

EMail Address NOEMAIL

Address APT BLK 756 PASIR RIS STREET 71 #03-156

Postcode

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? NO

Was any injured conveyed to hospital by

ambulance?

NO

NO

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) 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?

If Yes, against whom?

NO

Circumstances of Accident

ON 29/08/2020 AROUND 9AM, VEHICLE A WAS TRAVELLING ALONG PIE TOWRDS TUAS (NEAR LAMP 946) ON THE MOST LEFT LANE EXITING TO STEVEN RD WHEN VEHICLE B OVERTAKE IN FRONT OF VEHICLE A. SUDDENLY VEHICLE C JAM BRAKED AND VEHICLE A & B WAS NOT ABLE TO STOP IN TIME AND CAUSES A COLLSSION.

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 SKF2599P

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category Name of Driver ONG LI TAR

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SHA7981Y

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category TAXI

Name of Driver

NRIC/Passport Number

Contact Number

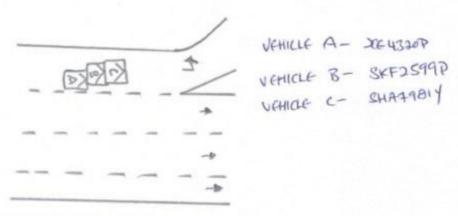
Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

LICENSE PLATE:		ACCIDENT DATE & TIME:			
CONTACT NUMBER:		E-MAIL ADDRESS:			
LOCATION:					
	, ,	gam, vertice A w	AS TRAVELING ALLING		
PIE TOWARDS -	ruas (NEAR LAMP	, 946) ON THE MOS	IT LEFT LANG		
CXHING TO STEE	DEN KD WHEN	VEHICLE B OVERTAN	CE INFROIT OF		
VEHICLE A. SUPPE	NLY VEHICLE (1 JAM BRAKES AN	D VEHICLE A & B		
WAS NOT ABLE	10 3700 IN	TIME AND CAUSES	A COUISION .		
NOTE: PLEASE NOTE	THAT YOUR INSURER MA	Y HAVE 14 DAYS TIME FRAME FOR	YOU TO SUBMIT AN		
OWN DAMAGE CLAIM U	NDER YOUR OWN POLICY	PLEASE CHECK YOUR POLICY FO	R MORE INFORMATION		
Please state:					
() Claim Own Policy	() Claim Third Party	() Claim OD/TP at other workshop	V/Reporting Only		
DECLARATION					

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

Policyho Date & Time 013

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

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

Accident Sketch Plan

SKETCH PLAN

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- B. 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:
 - (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:

NRIC/FIN No.:

Accident Sketch Plan



中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Commercial

M2300/C

BR0072A

Cov. Type:C

CERTIFICATE OF INSURANCE

Vehicles (Third-Party Risks and Compensation) Act (Chapter 11 or Vehicles (Third-Party Risks and Compensation) Rules, 1980 Road Transport Act, 1987 (Melleysia) Motor Vehicles (Third-Party Risks) Rules, 1999 (Malaysia)

CERTIFICATE No.

DMCVSNA00061702002

Engine No.: 470913C0406065 Cha. No::WDB96421620269010

1. Index Mark and Registration

XE4320P

Number of Vehicle

2. Name of Policy Holder

KOK TONG TRANSPORT & ENGINEERING WORKS PTE LTD

Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment

24/08/2020

EX ON WINDSCREEN.

\$\$1,500.00 8\$200.00

4. Date of Expiry of Insurance

23/08/2021

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:"
- Use in connection with the Policyholder's business.
 Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
 Use for social, domestic or pleasure purposes.

(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 PACIFICATO AS HP OWNER. * 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: Tan Jia Hwei Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E) ♠3 Anson Road #16-00 Springleaf Tower Singapore 079909

Q6389 6111

@6222 1033

@www.sq.cntaiping.com

Driving License







YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

2ass 3 Motor Cars < 3000 kg with <<7 passangers, exclusive 08 Jun 1931 ef the deliver; and other meter vehicles < 2500 kg 05 Aug 1902 05 Aug 1902

Load or pussangers and the unladen weight > 25000kg
*Moles vehicles which are not constructed to
corry load and the unlaten weight x 7200kg
Class 5 Moles vehicles not constructed to corry any
04 Oct 1986

NP 426A

















