



## 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	01/09/2020 16:26
Date Of Accident	31/08/2020 19:10
Exact Location Of Accident	BLK 166 BUKIT BATOK WEST AVE 8 CARPARK LOT 64
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GT310S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ONG CHUAN SENG ELECTRICAL TRADER
Co Reg No	5XXXX662X
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-96610449

### Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN19370119000
Cover Note Number	

### Driver

Name of Driver	COACH ONG MING KHANG
NRIC No	SXXXX823J
Date Of Birth	05/06/1987
Occupation	OUTDOOR
Date Of Driving Pass	12/07/2006
Driving Experience	14 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96610449
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 111 GANGSA ROAD #04-71
Postcode	670111
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	COLLIDED INTO PARKED VEHICLE
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

PLS REFER TO THE ATTACHED STATEMENT.

#### 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	SLV7346Z
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	
No. Of Passenger (Including Driver)	

DECLARATION

I, Mr. Ong Chuan Seng, of 166 Bukit Batok West Ave 4 #01-248, Singapore 650166, do hereby declare that I am the owner of the vehicle(s) involved in the accident on the date of the accident.

I, Mr. Ong Chuan Seng, of 166 Bukit Batok West Ave 4 #01-248, Singapore 650166, do hereby declare that I am the owner of the vehicle(s) involved in the accident on the date of the accident.

I, Mr. Ong Chuan Seng, of 166 Bukit Batok West Ave 4 #01-248, Singapore 650166, do hereby declare that I am the owner of the vehicle(s) involved in the accident on the date of the accident.

I, Mr. Ong Chuan Seng, of 166 Bukit Batok West Ave 4 #01-248, Singapore 650166, do hereby declare that I am the owner of the vehicle(s) involved in the accident on the date of the accident.

I, Mr. Ong Chuan Seng, of 166 Bukit Batok West Ave 4 #01-248, Singapore 650166, do hereby declare that I am the owner of the vehicle(s) involved in the accident on the date of the accident.

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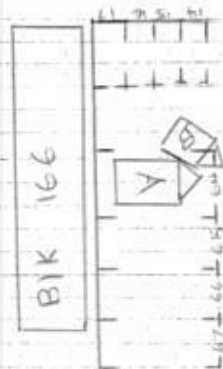
王泉成電器貿易  
ONG CHUAN SENG ELECTRICAL TRADER  
Blk 166 Bukit Batok West Ave 4 #01-248  
Singapore 650166 Tel: 6563 6611  
Email: ongchuanse@gmail.com

*Signature*

*Signature* 01/09/20

BLK 166 BUKIT BATOK WEST AVE 8

王泉成電器貿易  
ONG CHUAN SENG ELECTRICAL TRADER  
Blk 166 Bukit Batok West Ave 8 #01-248  
Singapore 650166 Tel: 6563 6811  
Email: ongchuanseng@gmail.com



(A)-GT3105

(B)-SLV7346Z

On the 31/08/2020 @ about 1910HRS, I parked my Vehicle (A) at lot No. 64 of carpark at Blk 166 Bukit Batok West Ave 8. After I left my Vehicle, I suddenly heard a bang

王泉成電器貿易  
ONG CHUAN SENG ELECTRICAL TRADER  
Blk 166 Bukit Batok West Ave 8 #01-248  
Singapore 650166 Tel: 6563 6811  
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from where I parked my Vehicle. I looked in that direction, and I saw a Vehicle (B) making a 3-point turn of the left side of my Vehicle (A) ~~see~~, and he tried to flee after hitting the front left portion of my Vehicle (A). I chased him on foot and managed to catch up with him.

Note: Please note that your insurer may have 14 days time frame for you to submit an Claim Damage Claim under your own comprehensive policy. Please check your policy for more information.

DECLARATION

王泉成電器貿易  
ONG CHUAN SENG ELECTRICAL TRADER  
Blk 166 Bukit Batok West Ave 8 #01-248  
Singapore 650166 Tel: 6563 6811  
Email: ongchuanseng@gmail.com  
Police Officer's Signature  
Date & Time

Driver's Signature  
(If driver is not the owner of the vehicle)  
Date & Time

Signature 01/09/20  
Police Officer's Signature  
Name  
Date & Time

## SINGAPORE ACCIDENT STATEMENT

Accident Date: 31/08/2020		Time: 1910	(hh:mm) 24 hr format
Location Blk 166 Bukit Batok West Ave 8 carpark Lot 64			
Vehicle Number GT3165			
Insured Name Ong Chuan Seng Electrical Trader			
NRIC/FIN 53400662X		Contact Number 9661 0449	
Make Toyota		Model Dyna	
Are you claiming under your own insurance policy for repair to your vehicle?			
( ) Yes If No, Pls select: ( ) Third Party ( <input checked="" type="checkbox"/> ) Reporting			
Insurance Company China Taiping			
Type of Policy ( <input checked="" type="checkbox"/> ) Comprehensive ( ) Third Party Fire & Theft ( ) TP Only			
Policy Number <del>60015855</del> DM CVS N19370119000			
Name of Driver <sup>Coach</sup> Ong Ming Khang		( ) Same as Insured	
NRIC / FIN 58720823J		Contact Number 9661 0449	
Date of Birth 05/06/1987			
Driving Pass Date 12/07/2006			
Occupation ( ) Indoor ( <input checked="" type="checkbox"/> ) Outdoor			
Gender ( <input checked="" type="checkbox"/> ) Male ( ) Female			
Email Address ongchuanseng@gmail.com		( ) NO EMAIL	
Address of Driver Blk 111 Gangsa Road #04-71 S(670111)			
Was driver an employee of the Insured's Company? ( ) Yes ( <input checked="" type="checkbox"/> ) No			
If No, Relationship of the Driver with the Insured Employee			
( ) Owner ( ) Spouse ( ) Friend ( ) Relative ( ) Children ( ) Sibling			
Does the Driver Own Any Other Vehicle? ( <input checked="" type="checkbox"/> ) Yes ( ) No			
If Yes, Vehicle Registration Number of Driver's Own Vehicle SKZ87H			
Insurance Company of Driver's Own Vehicle NTUC			
Weather Conditions ( <input checked="" type="checkbox"/> ) Clear ( ) Rainy ( ) Others			
Road Surface ( <input checked="" type="checkbox"/> ) Dry ( ) Wet ( ) Others			
Was any foreign vehicle involved in this accident? ( ) Yes ( <input checked="" type="checkbox"/> ) No			
Was anybody injured in the accident? ( ) Yes ( <input checked="" type="checkbox"/> ) No			
If yes, injured detail			
Was there any video captured by Car Camera? ( ) Yes ( <input checked="" type="checkbox"/> ) No			
Was the Accident reported to the Police? ( ) Yes ( <input checked="" type="checkbox"/> ) No If yes attach police report			
DETAILS OF 3 <sup>rd</sup> party		Name / Nric Contact	
Veh B SLV 7346Z			
Veh C			
Veh D			
Veh E			
Veh F			



Motor Commercial

MZ300/C

N SN

AN0633A

Cov. Type:C

**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. DMCVSN19370119000

Engine No.: 1KD2852239

Cha. No.: KDY2318038275

1. Index Mark and Registration  
Number of Vehicle

GT310S

AUTOSAFE  
=====

2. Name of Policy Holder

ONG CHUAN SENG ELECTRICAL TRADER

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

16/09/2019

Excess Sect I. S\$350.00  
EX ON WINDSCREEN S\$100.00

4. Date of Expiry of Insurance

15/09/2020

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

\* 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