

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	27/08/2020 18:19
Date Of Accident	31/01/2020 07:00
Exact Location Of Accident	ALONG BENOI ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP1555D
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Insured/Policyholder

Name Of Registered Owner	GOLDBELL LEASING PTE LTD
Co Reg No	1XXXXX196N
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-64942833

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	FUSO-3.0 D FM65FM2RDEB (M)
Exact Purpose for which vehicle was being used at time of accident	
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	29131844
Cover Note Number	

Driver

Name of Driver	TEO HAO TSUN
Passport No/FIN	GXXXX617T
Date Of Birth	25/09/1983
Occupation	OUTDOOR
Date Of Driving Pass	01/11/2014
Driving Experience	5 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83033876
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	NIL
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - LESSEE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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?	
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: : NOT APPLICABLE GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JURONG WEST NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 700 CORPORATION ROAD , POSTCODE: 649818 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2689999 - FAX NO: 62672438
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT NO. J/20200131/2056

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	SHA4368M
Vehicle Make/Model/Colour	
Details Of Properties	VEH B
Vehicle Category	TAXI
Name of Driver	SOH KIM SENG
NRIC/Passport Number	SXXXX256E
Contact Number	91735437
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 1

Sketch Plan

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.

Policyholder's Signature
Date & Time:

✓ *W. H. K. K. M.*
Driver's Signature
(If driver is not the policyholder)
Date & Time:

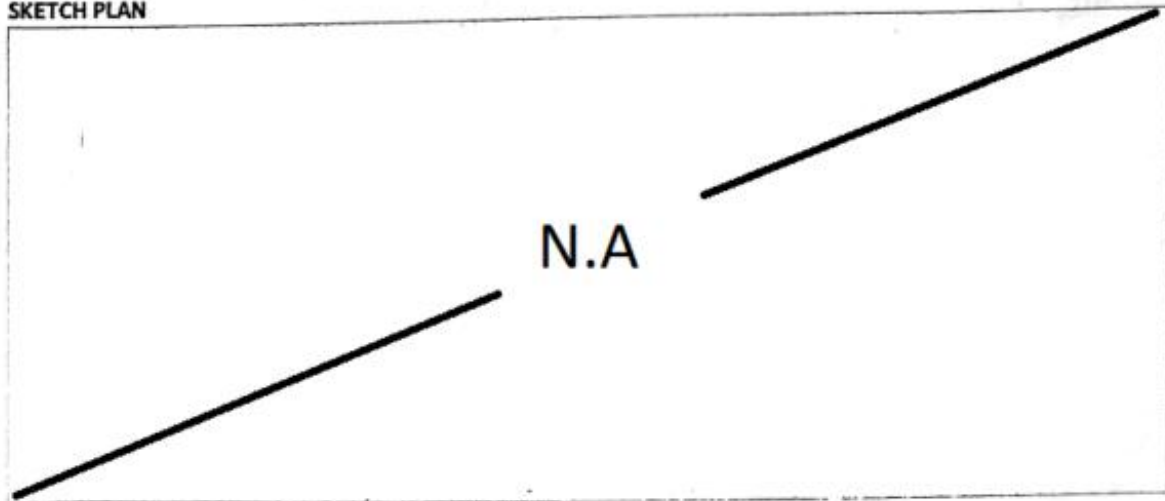
5.58pm 27/8/20

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

Jenny Ng

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to police report : J/20200131/2056

DECLARATION

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

Policyholder's Signature

Date & Time:

GUAMVC SketchPlanForm_V3

✓ *W. H. Wilson*
Driver's Signature

(If driver is not the policyholder)

Date & Time:

5.58pm

27/8/20

Jenny Ng
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Jenny Ng

Police Report



**SINGAPORE
POLICE FORCE**



1 of 2

POLICE REPORT (NP299)

Report No. J/20200131/2056

Police Station Of Origin
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Date/Time Report Made 31/01/2020 14:03	Video Report No.	Station Diary No. 79
Name Of Informant TEO HAO TSUN	Address	
ID Type / ID No. FIN NO / G8131617T	Contact No. Home/Office	Mobile 83033876
Nationality MALAYSIAN	Email Address	
Occupation DELIVERY DRIVER	Sex Male	Age 36
Institution/School Name	Date of Birth 25/09/1983	Race Chinese
Date/Time Of Incident 31/01/2020 07:00	Location Of Incident BENOI ROAD TRAFFIC LIGHT BELOW FLYOVER SINGAPORE	

Brief details.

On 31/01/2020 at about 0700hrs, I was driving company lorry: YP1555D along BENOI ROAD when an accident occurred between my company lorry and a COMFORTDELGRO Taxi: SHA4368M just below the FLYOVER at the TRAFFIC LIGHT JUNCTION.

SHA4368M swerved and hit my company lorry after swerving and his rear bumper was severely damaged. We were both uninjured and exchanged particulars. The driver particulars of said SHA4368M;

Signature Of Officer Recording The Report:

J / Sgt 2 CHIANG WEI TONG

Signature Of Informant:

Teo Hao Tsun

Signature Of Interpreter:
Not applicable

Date/Time:
31/01/2020 14:03

Officer In-Charge Of Case:
J / Jurong Police Divisional Investigation Branch /
Sgt 3 MUHAMMAD SUFI BIN MOHD HUSSIN
Contact No.: 62678637

Classification Of Case:

Authentication Stamp



Signature :

SN 126

Singapore Police Force

Police Report



SINGAPORE
POLICE FORCE



2 of 2

POLICE REPORT (NP289)

CONTINUATION OF REPORT

Report No. J/20200131/2056

A1) SOH KIM SENG
S0172258E
BLK 474 SEMBAWANG DRIVE #09-345
HP: 9173 5437

A1 then informed me that he wishes to privately settle this matter and will compensate my company for the damages incurred for the lorry.

I am making this report for Record Purpose, and that Police will not investigate this matter.

Signature Of Officer Recording The Report:

J / Sgt 2 CHIANG WEI TONG

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
J / Jurong Police Divisional Investigation Branch /
Sgt 3 MUHAMMAD SUFI BIN MOHD HUSSIN
Contact No.: 62678637

Signature Of Informant:

Subhan

Date/Time:
31/01/2020 14:03

Classification Of Case:

Authentication Stamp



Signature: *[Signature]*

SN 126

Singapore Police Force

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Driving License

S PASS
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer:
SIM SOLUTIONS PTE. LTD.

Name:
TEO HAO TSUN

S Pass No:
4 02649801

Sector:
SERVICE

40

K1290930

VISIT PASS
Immigration Regulations

28-03-2019

Name:
TEO HAO TSUN

FIN:
G8131617T

Date of Birth:
25-09-1983

Sex:
M

Nationality:
MALAYSIAN

Download SGWorkPass App to check status

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: G8131617T

Name:
TEO HAO TSUN

Birth Date: 25 Sep 1983

Issue Date: 07 Oct 2019

Valid Till: 06/10/2024

002984738A

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

	EFFECTIVE DATE
Class 2B Motorcycles \leq 200 cc	30 Jul 2014
Class 3 Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg	30 Jul 2014
Class 4 Motor vehicles which are constructed to carry load or passengers and the unladen weight $>$ 2500kg	01 Nov 2014
Motor vehicles which are not constructed to carry load or passengers and the unladen weight \leq 7250kg	

NP 428A

Licence No: G8131617T