

## 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	15/10/2020 14:05
Date Of Accident	14/10/2020 18:00
Exact Location Of Accident	OIONEER ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GW5640R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SOLITON PTE LTD
Co Reg No	200701152Z
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-67730028

### Vehicle Particulars

Manufacturer	TOYOTA
Model	LITEACE-2.2 D CR42 (M)
Exact Purpose for which vehicle was being used at time of accident	TRANSPORTATION
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	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	D19MCV0003933_01
Cover Note Number	

### Driver

Name of Driver	TEE BOON KIAT
NRIC No	S2559478I
Date Of Birth	06/03/1962
Occupation	OUTDOOR
Date Of Driving Pass	30/06/1981
Driving Experience	39 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98367896
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 817B KEAT HONG LINK #07-95 SINGAPORE
Postcode	682817
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

REFER TO ATTACH 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	SMP6142X
Vehicle Make/Model/Colour	HONDA / SHUTTLE /
Details Of Properties	REAR PORTION
Vehicle Category	PRIVATE CAR
Name of Driver	LO GEOK KHUN
NRIC/Passport Number	S8585173Z
Contact Number	92703340
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

**SKETCH PLAN**

**IMPORTANT NOTICE**

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5. **Any false reporting may be referred to the Police for investigation.**
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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:

*[Signature]*

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

*[Signature]*  
NAME & SIGNATURE: *[Signature]*  
DESIGNATION: *[Signature]* DATE: *15/10/12*

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No. *97218099A*

### SKETCH PLAN


**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

Refer to attach police report - T/202010142/2161

## DECLARATION

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

Policyholder's Signature \_\_\_\_\_  
Date & Time: \_\_\_\_\_

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

COMFORTDELGRO ENGINEERING PTE LTD  
EXTERNAL BUSINESS DIV, PAKHOL BRANCH  
NAME & SIGNATURE: *[Signature]*  
DESIGNATION: \_\_\_\_\_ DATE: 15/10/12

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Reporting Centre Personnel's Signature  
Name: WONG CHEE WEI  
NRIC/FIN No.: 87218099A



**SINGAPORE  
POLICE FORCE**



T/20201014/2161

1 of 3

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No: 1800-7659999

Report No. T/20201014/2161

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 14/10/2020 22:54	Vide Report No.:	Station Diary No.: 122
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**Informant's Particulars**

Name of Informant: TEE BOON KIAT			Address: APT BLK 817B KEAT HONG LINK #07-95 SINGAPORE 682817	
ID Type / ID No.: NRIC NO / S25594781			Contact No.: Home/Office:	Mobile: 98367896
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 58	Date of Birth: 06/03/1962	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: INDUSTRIAL STAFF			Driving Licence Information: Class: 2B,3,4A	Date of Expiry:

**General Information of the Accident**

General Information of the Accident				
Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 14/10/2020 18:05	Type of Location: X-Junction
Location:  PIONEER ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GW5640R	Van				Slightly Damaged	1
SMP6142X	Car	HONDA	Shuttle		Slightly Damaged	0

**Details of Person Involved**

Any Pedestrian Involved: No	Use of Pedestrian Crossing: NA	
No. of Pedestrians Injured: NIL		



**SINGAPORE  
POLICE FORCE**



T/20201014/2161

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No: 1800-7659999

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Report No. T/20201014/2161

**CONTINUATION OF REPORT**

<b>Driver</b>			
Name	TEE BOON KIAT		ID No. S2559478I
Related Vehicle	GW5640R (Van)		Contact No. 98367896
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 2B,3,4A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Driver</b>			
Name	Lo Geok Khun		ID No. S8585173Z
Related Vehicle	SMP6142X (Car)		Contact No. 92703340
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On the above date time and location, I was driving my company van GW5640R along Pioneer Road turning into AYE direction. Traffic was very heavy and was moving slowly. This was when the vehicle in front of me SMP6142X suddenly applied the brakes and I was unable to brake in time as well. I then collided into the rear of the vehicle. Both of us exchanged particulars and then took photos of the accident and then left subsequently. No one was injured.



**SINGAPORE  
POLICE FORCE**



T/20201014/2161

Police Station Of Origin:  
Choa Chu Kang N.P.C  
20 Choa Chu Kang Street 52 #01-02  
SINGAPORE 689286  
Tel No: 1800-7659999

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Report No. T/20201014/2161

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:

J /

Sgt 2 DYLAN KOK JIE QI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

14/10/2020 22:54

Officer In Charge Of Case:

TP / GIA /

Staff Sgt WONG SIEU LUI

Contact No.: 65478151

Classification Of Case:

Authentication Stamp

NP168

SIGNATURE

## Certificate of Insurance Pg. 1



INDIA INTERNATIONAL INSURANCE PTE LTD  
Co. Reg. No. 198703792k | GST. Reg. No. M2-0078806-X  
64 | Cecil Street | #04 | #05 | #06-02 | 10B Building | Singapore 049711  
Office (65) 63476100 Email insure@iii.com.sg  
Fax (65) 62244174 Website www.iii.com.sg

### 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)

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

CERTIFICATE NO.: D19MCV0003933_01		COVER: Third Party Only
1. Index Mark and Registration Number of Vehicle	: GW5640R	
Chassis No	: CR425006302	
2. Name of Policyholder	: SOLITON PTE LTD	
3. Effective date of Insurance	: 13 Aug 2020	
4. Expiry date of Insurance	: 12 Aug 2021	
5. Persons or Classes of Persons entitled to drive*	<p>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.</p>	
6. Limitations as to use*	<p>a) Use in connection with the Policyholder's business. b) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business. c) Use for social, domestic and pleasure purposes.</p> <p><b>The Policy does not cover</b></p> <p>a) Use for hire or reward. b) Use for racing, pace-making, reliability trial or speed-testing. c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.</p> <p>*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.</p>	
FOR DRIVERS BELOW 21 YEARS OR ABOVE 65 YEARS OF AGE &/OR LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, AN EXCESS OF \$2500/- ON SECTION II WILL BE APPLICABLE.		
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).		
Agent/Broker : A000020/Tan Kok Seng Date of Issuance : 16/07/2020 11:52:03 M.Z. 300C - GOODS CARRYING(ORGANIZATION)		For India International Insurance Pte Ltd  _____ Authorised Signatory



**Soliton Pte Ltd**

192 Pandan Loop  
#07-23 Pantech Business Hub  
Singapore 128381  
Tel : 65 773 0028 Fax : 65 773 0068  
Co Reg. No.200701152Z

15 October 2020

Driver Authorization Letter

To whom it may concern

This is to inform that Mr. Tee Boon Kiat NRIC No.: S25594781 was authorized to drive GW 5540R on 14/10/20.


Yours sincerely.

  
Dennis Low  
Manager



Identification Card Pg. 1

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S25594781




Name  
**TEE BOON KIAT**  
**郑文吉**  
Race  
**CHINESE**  
Date of birth Sex  
**06-03-1962 M**  
Country of birth  
**MALAYSIA**

S25594781

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: S25594781  
Name  
**TEE BOON KIAT**  
Birth Date: 06 Mar 1962  
Issue Date: 26 Feb 2003



000244699C

4892879



NRIC No. S25594781



Date of issue  
**09-10-2012**  
APT BLK 817B KEAT HONG LINK #07-95  
SINGAPORE 682817  
NRIC No: S25594781 Date: 26/01/2017

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

Class 2B	Motorcycles <= 200 CC	06 Mar 1981
Class 3	Motor cars <= 3000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg	20 Jun 1981
Class 4A	Omnibuses	31 Jul 2017

S / No.9000272159

S25594781

NP 428A

License No: S25594781

Accident Photo



Accident Photo



Accident Photo





Accident Photo

